



# **Safeguarding and Child Protection Policy and Procedure**

## **Policy Monitoring**

Date Policy was reviewed: April 2026

Signed by (Printed name and  
signature):

Date of next review: April 2027

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# Safeguarding and Child Protection Policy and Procedure

## Our Responsibility / Legal Duties

Throughout this policy and procedure, we've often used the term 'our setting'. For childminders, this refers to their childminding community, including the childminder, any assistants, the children, and their families.

Within our childminding setting, we have a legal duty to safeguard and promote the welfare of all children. This responsibility is underpinned by key legislation and statutory guidance, including the Early Years Foundation Stage (2025) and Keeping Children Safe in Education (2025) which childminding settings must have due regard to. Our setting recognises that the welfare of the child is paramount, and we are committed to safeguarding and promoting their wellbeing by ensuring a safe environment, acting on concerns, and fulfilling our legal responsibilities to protect children from harm.

Statutory guidance such as Working Together to Safeguard Children (2026) outlines our responsibilities to ensure that the welfare of the child is paramount. We adopt an "it could happen here" approach to safeguarding, ensuring that concerns are taken seriously and acted upon appropriately.

Safeguarding and promoting the welfare of children is **everyone's responsibility**. Everyone who comes into contact with children and their families has a role to play.

This policy is in line with our settings other key policies, including the Equality Policy, Safe Recruitment and Working with Assistants Policy, Relationships and Belonging Policy, SEND Policy, Accidents and Incidents Policy, and Attendance and Absence Policy. This list is not exhaustive.

## Responsibility of the DSL (Designated Safeguarding Lead)

The childminder acts as the Designated Safeguarding Lead (DSL) within the setting and takes the overall lead responsibility for safeguarding and child protection within the setting.

The DSL is responsible for ensuring that all assistants, and anyone connected to the setting, have up-to-date knowledge of safeguarding procedures and understand the correct procedure to follow if a concern is raised.

Regular supervision and support must be provided to assistants, with opportunities created to discuss children's wellbeing and raise any safeguarding concerns in a safe and supportive environment

As the Designated Safeguarding Lead (DSL) for this childminding setting, any concerns about a child will be addressed by following the child protection procedures set out within this policy, alongside the Keeping Bristol Safe Partnership local safeguarding procedures.

## Safeguarding Training

Safeguarding training will be completed every 2 years, in line with the Early Years Foundation Stage (EYFS) statutory requirements. This training will meet the standards outlined in Annex C, ensuring it is appropriate for those working with children aged 0–5. We will continuously keep our knowledge of safeguarding and child protection updated regularly.

Training for the Designated Safeguarding Lead (DSL) will be consistent with the criteria set out in Annex C of the EYFS.

**Most recently, I attended a training session titled .....on  
..... (Date)**

## Equalities

In line with the Equality Act 2010 we are committed to promoting equality and inclusion within our setting. As a childminding setting, we aim to:

- Be inclusive, anti-discriminatory, and responsive to the needs and experiences of children and families from different ethnic, cultural, and religious backgrounds.
- Be aware that bias in practice may adversely impact particular groups or communities, and always prioritise the child's vulnerability to harm. For example, ensure that children from certain ethnic backgrounds are not treated as older than they are, recognising the risks of adultification bias
- Eliminate discrimination, harassment, and victimisation within our practice and childminding setting.
- Advance equality of opportunity between individuals who share a protected characteristic and those who do not.
- Foster positive relationships, ensuring that every child and family feels respected, safe, and supported.

## Key Safeguarding Areas

Abuse is a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Harm can include ill treatment that is not physical as well as the impact of witnessing ill treatment of others.

There are four main categories of abuse and neglect the 1989 Children Act recognises: physical abuse, emotional abuse, sexual abuse and neglect.

**Physical Abuse** – a form of abuse which 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.

Signs a child may be suffering physical abuse:

- Children with frequent injuries.
- Children with unexplained or unusual fractures or broken bones.
- Children with unexplained bruises or cuts, burns or scalds or bite marks.

### Bruising in Babies and Children

**Emotional Abuse** - the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child 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 from participating in normal social interaction. It may involve seeing or hearing the ill treatment of another. It may involve serious bullying (including cyberbullying), 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, although it may occur alone.

The signs that may be indicators of emotional abuse can include:

- Children who are excessively withdrawn, fearful, or anxious about doing something wrong;
- Parents or carers who withdraw their attention from their child, giving the child the 'cold shoulder';
- Parents or carers blaming their problems on their child; and
- Parents or carers who humiliate their child, for example, by name-calling or making negative comparisons.

**Sexual Abuse**- involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing, and touching outside of 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. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Sexual abuse which takes place within family environments (**Child Sexual Abuse in the Family Environment**) often remains hidden and is the most secretive and difficult type of abuse for children and young people to disclose.

**The Centre of Expertise on Child Sexual Abuse**, is a multi-disciplinary team, funded by the Home Office, who have produced a range of resources to support professionals.

Signs that may indicate sexual abuse can include:

- Children who display knowledge or interest in sexual acts inappropriate to their age;
- Children who use sexual language or have sexual knowledge that you wouldn't expect them to have;
- Children who ask others to behave sexually or play sexual games;
- Children with physical sexual health problems, including soreness in the genital and anal areas, sexually transmitted infections or underage pregnancy.

The CSA Centre has created the **Response Pathway**, an interactive online resource to guide professionals through how they can protect and support children and their families when there are concerns of sexual abuse.

**Neglect** - the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy, for example, 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
- protect a child from physical and emotional harm or danger
- ensure adequate supervision (including the use of inadequate caregivers);
- or ensure access to appropriate medical care or treatment.

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

Signs of possible neglect may include the following signs:

- Children who are living in a home that is indisputably dirty or unsafe;
- Children who are left hungry or dirty;
- Children who are left without adequate clothing;

- Children who are living in dangerous conditions, i.e. around drugs, alcohol or violence;
- Children who are often angry, aggressive or self-harm;
- Children who fail to receive basic health care;
- Parents/ carers who fail to seek medical treatment when their children are ill or are injured.

### Toilets and intimate hygiene

Children's privacy is considered and balanced with safeguarding and support needs when changing nappies and toileting. (3.68 EYFS For Childminders 01.09.25)

Nappy rash, while common in babies, can be a potential indicator of neglect if left untreated. Any occurrences of nappy rash must be recorded and signed by the child's parent or carer. The childminding setting will work in partnership with parents/carers to ensure appropriate treatment and preventative care is provided. If there are any concerns regarding the child's welfare, the childminder will follow the child protection procedures outlined in this policy, which may include seeking advice from Families in Focus or making a referral to First Response.

**In addition to the four main categories of abuse, there are other types of abuse that childminders need to be aware of to help safeguard children.**

### Child Criminal Exploitation (CCE) Including County Lines

When children are coerced into criminal activities, such as drug trafficking, this is referred to as child criminal exploitation (CCE). One example is county lines, where children and vulnerable adults are exploited to transport, store, and sell drugs and money across counties. Offenders often use coercion, intimidation, violence, including sexual violence, and weapons. Children may be targeted and recruited in various settings including online. Specific forms of CCE can also include involvement in cannabis cultivation, shoplifting, or pickpocketing, often through manipulation, threats, or force.

### Child Sexual Exploitation (CSE)

(Child Sexual Exploitation) is a form of abuse that can occur where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a child into taking part in sexual activity. [Child sexual exploitation: definition and guide for practitioners - GOV.UK](#)

### Domestic Abuse

**Domestic abuse** can involve a wide range of behaviours and may occur as a single incident or as part of a repeated pattern. It can take many forms, including psychological, physical, sexual, financial, or emotional abuse.

Under the Domestic Abuse Act 2021, children are recognised as victims in their own right. They may witness, hear, or be directly affected by abuse within the home. This can have a serious and lasting impact on a child's wellbeing.

Domestic abuse can often begin or intensify during pregnancy and can be linked to increased risks such as miscarriage, premature birth, foetal injury, and even foetal death.

As a setting we will respond to concerns about domestic abuse with sensitivity, ensure concerns are accurately recorded, and consider making a referral to First Response.

Guidance on supporting children experiencing domestic abuse: [Supporting-chn-experiencing-DA-2024.pdf](#)

## Child-on-Child Abuse

Children can abuse other children. This is generally referred to as child-on-child abuse and can take many forms. This can include (but is not limited to): abuse 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. [Keeping Children Safe in Education \(2025\)](#) provides information and guidance on managing cases of child-on-child sexual violence and sexual harassment.

Childminder settings can refer to the Brook Sexual Behaviours Traffic Light Tool to help identify, understand and respond to sexual behaviours in children and young people up to 18 years old: [CPD: Brook Sexual Behaviours Traffic Light Tool \(RSE\) Course](#).

## Contextual Safeguarding Approach to Harm Outside the Home (HOtH)

Abuse of children can occur in contexts beyond the home and family environment. This type of abuse, known as extrafamilial abuse or contextual safeguarding, may include forms such as child sexual exploitation (CSE), for example, coercing a child to share indecent images of themselves (“sexting”) and child criminal exploitation (CCE), such as involvement in “county lines” operations where children are used by criminal gangs to store, transport, and sell drugs or money. Exploitation can be perpetrated by adult males or females, acting alone or in groups, and may also be carried out by other children. In cases where children are exploited by their peers, it is essential to recognise that the child perpetrator may also be a victim of exploitation. If there is evidence that a child is experiencing HOtH the setting will make a referral to First Response.

[Safer Connections](#) is part of Bristol’s Violence Reduction Partnership. It is a multi-agency approach to tackling Serious Youth Violence (SYV), Child Criminal Exploitation (CCE) and Child Sexual Exploitation (CSE). The childminder as the DSL can contact Safer Connections for inter-agency support, consultation, and advice about responding to HOtH and for guidance in implementing contextual safeguarding strategies to improve safety for vulnerable learners: [saferconnections@bristol.gov.uk](mailto:saferconnections@bristol.gov.uk).

## Honour Based Violence/Abuse

Honour-based violence refers to a collection of practices used to control behaviour within families or social groups, often to protect perceived cultural or religious beliefs and maintain a sense of honour. This form of abuse may occur when individuals are believed to have brought shame upon their family or community by violating an honour code. Unlike other forms of violence, honour-based abuse is frequently carried out with a degree of approval or collusion from family or community members. Perpetrators may include women, men, and younger family members.

Honour-based abuse can also encompass practices such as Female Genital Mutilation (FGM) and Forced Marriage.

[Honour Based Violence and Forced Marriage](#)

## Children Missing from Education

A child missing from education may be an indicator of abuse, neglect, exploitation, or a need for early help and support. The setting will follow its attendance procedures for unauthorised absences and respond appropriately to any instances where a child goes missing from education, particularly if this occurs repeatedly.

## Female Genital Mutilation (FGM)

**FGM is illegal in the UK. It is also a crime to take a UK national or resident abroad to carry out or help with FGM.**

Female Genital Mutilation (FGM) is a procedure where the female genital organs are deliberately cut, injured or changed and there is no medical reason for this. It is a harmful, traumatic and violent act and can cause harm in many ways. The practice can cause severe pain, and there may be immediate and/or long-term health consequences, including pain and infection, mental health problems, difficulties in childbirth and/or death.

As a childminding setting, we have a statutory duty to safeguard girls from Female Genital Mutilation (FGM) and to identify children who may be at risk. In order to do this we must understand what FGM is and are aware of the signs that may indicate a child is at risk.

Indicators that FGM may be planned include a child or family talking about an extended holiday to a country where the practice is prevalent, or a child being unexpectedly absent from the setting. There are also physical and emotional symptoms that may suggest FGM has taken place. [Signs of FGM](#) .

We have a duty to report concerns regarding Female Genital Mutilation (FGM). 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 First Response. If we suspect that FGM has been carried out on a girl under the age of 18, we will refer the concern to First Response, who will work in partnership with health services to carry out a statutory safeguarding assessment. This ensures the child receives appropriate care and support.

For further information: <https://bristolsafeguarding.org/professional-resources/female-genital-mutilation>

## The Prevent Duty/Radicalisation

As part of our safeguarding responsibilities, we are required under the Prevent Duty to help reduce the risk of individuals becoming involved in terrorism or supporting extremist ideologies. This includes protecting children from radicalisation and exposure to extremist views.

There is no single indicator that someone is being radicalised, but signs may include viewing violent or extremist content online, expressing extremist views, speaking in a scripted speech, and changes in behaviour.

The Prevent Duty applies to all forms of extremism that could lead to acts of terrorism, including Islamist extremism (such as ISIS, a terrorist group active in Iraq and Syria that follows an extreme interpretation of Islam) and far-right extremism (such as National Action, a banned neo-Nazi group promoting racist ideologies). The Government has a list of [proscribed terrorist groups or organisations](#) banned under UK law.

As a childminding setting, we have a statutory responsibility under the Prevent Duty to remain vigilant and report any concerns that may help safeguard children and their families from all forms of extremism.

### **Any concerns about a child being radicalised will be referred through First Response.**

If there are concerns about individuals expressing extremist views, the setting can also contact the Prevent Duty team via 01278 647466 or email: [PreventSW@avonandsomerset.police.uk](mailto:PreventSW@avonandsomerset.police.uk) for advice or to raise a concern.

- Further information: [Understanding and identifying radicalisation risk in your education setting - GOV.UK](#)
- Training: [Prevent duty training: Learn how to support people susceptible to radicalisation | Prevent duty training](#)

Our setting can also build pupils' resilience to radicalisation by promoting the 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.

### **Preventing Extremism in Education Settings**

As a setting, we can refer concerns about extremism related to education settings in England including allegations involving institutions, staff, or external individuals attempting to influence children, through the government's online notification form.

- Concerns can be made anonymously through the online notification form: <https://report-extremism.education.gov.uk/>
- Telephone: 020 7340 7264
- Email: [counter.extremism@education.gov.uk](mailto:counter.extremism@education.gov.uk)

### **Mental Health and Wellbeing**

The term mental health for babies and young children refers to their emotional wellbeing and social development. Childminders have an important role in supporting children's mental health through warm, responsive relationships and by helping them develop self-regulation skills.

In some cases, mental health concerns may be a sign that a child has experienced, or is at risk of, abuse, neglect, or exploitation, and may require support. If concerns arise, the setting will work in partnership with parents / carers and seek advice from relevant professionals, such as health visitors, the childminder SENCO, or follow the child protection procedures outlined within this policy.

For further information: [Help for early years providers : Mental health for early years children](#)

### **Additional information about key safeguarding areas can also be found in Keeping Children Safe in Education (2025) including:**

- **Private Fostering** – If the childminder as the Designated Safeguarding Lead (DSL) becomes aware of a private fostering arrangement, this must be reported to Children's Social Care to ensure the child's needs are being met. *(A private fostering arrangement is one made privately (without the involvement of the local authority) for the care of a child under the age of 16, or under 18 if the child is disabled, by someone who is not a parent or close relative. A close relative is defined as a*

*grandparent, brother, sister, uncle, or aunt, including half-siblings and stepparents. It does not include great-aunts or uncles, great-grandparents, or cousins).*

## Recognising Abuse, Neglect and Exploitation

Recognising possible signs of abuse or neglect is a vital part of safeguarding children and young people. In this setting, we remain alert to any behaviours, disclosures, or situations that may raise concern. **We maintain professional curiosity**, especially where information relies solely on parent or carer accounts.

Signs that a child may be experiencing abuse or neglect include, (this list is not exhaustive):

- Becoming excessively aggressive, withdrawn, or clingy
- Appearing to be keeping a secret
- Changes in behaviour
- Difficulty sleeping or bedwetting
- A noticeable decline in overall well-being
- Unexplained bruises, marks, or other signs of possible abuse or neglect
- Any bruising or marks on a non-mobile baby
- An unreasonable fear of certain people or places
- Inappropriate behaviour, possibly involving adults, other children, toys, or objects
- Comments from children that raise concern, such as inconsistent explanations for injuries
- Consistently poor hygiene
- Evidence of self-harm
- Use of sexually explicit language or actions
- Being upset, withdrawn, or angry after using the internet or texting
- Children who go missing, particularly on repeat occasions
- Delayed developmental milestones (e.g. speech or walking) without a medical reason
- Poor attendance or punctuality, or consistently late pick-ups
- Parents / carers who are dismissive or unresponsive to the childminder's concerns
- Parents carers who collect their children from school when drunk, or under the influence of drugs

For further information about recognising the signs of abuse and neglect:

[https://assets.publishing.service.gov.uk/media/5a80597640f0b62302692fa1/What\\_to\\_do\\_if\\_you\\_re\\_worried\\_a\\_child\\_is\\_being\\_abused.pdf](https://assets.publishing.service.gov.uk/media/5a80597640f0b62302692fa1/What_to_do_if_you_re_worried_a_child_is_being_abused.pdf)

## Vulnerable Children and their Families

Some children may be more vulnerable to abuse for a range of reasons, as a setting we need to be alert to these:

- Children who have additional needs, who are neurodivergent and/or disabled (collectively referred to as children with Special Educational Needs (SEND). We are vigilant regarding possible signs of abuse relating to children with SEND and not automatically assume that signs relate to their additional need.
- Looked after children/children in care
- Homelessness
- Children with allocated social worker or family support worker
- Privately fostered children (*If the childminder as the Designated Safeguarding Lead (DSL) becomes aware of a private fostering arrangement, this must be reported to*

*Children's Social Care to ensure the child's needs are being met. (A private fostering arrangement is one made privately (without the involvement of the local authority) for the care of a child under the age of 16, or under 18 if the child is disabled, by someone who is not a parent or close relative. A close relative is defined as a grandparent, brother, sister, uncle, or aunt, including half-siblings and stepparents. It does not include great-aunts or uncles, great-grandparents, or cousins).*

- 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

The DSL will regularly review and monitor those children who have been identified as vulnerable.

## Responding to Concerns about Abuse

The setting is committed to safeguarding children by treating all concerns and disclosures seriously and sensitively. As a childminding setting, we are not responsible for investigating suspected abuse. However, we have a duty to act on any concerns regarding a child's welfare. Where concerns arise, we will follow the procedure outlined below, in line with local safeguarding guidance and statutory responsibilities.

**If a child communicates abuse or there are concerns about abuse, the procedure will be followed:**

- Stay calm and listen carefully.
- If a child communicates possible abuse, reassure them that they've done the right thing by speaking to you.
- Use open-ended questions to clarify, avoiding leading or closed questions (Use 'Tell Me, Explain to me, Describe to me' (TED) questioning.)
- Check that you have understood correctly what the child is trying to tell you but do not ask the child to repeat their account.
- Avoid promising confidentiality; explain who needs to be informed and why.
- Record the disclosure promptly using the setting's Child Protection Form, include the child's exact words and any visible marks (using a body map if needed). Do not add any opinions or interpretations. Keep records factual, detailed, and securely stored.
- In the event of a disclosure or concern, if the adult involved is not the registered childminder (such as an assistant), they must notify the childminder, as the Designated Safeguarding Lead (DSL). The DSL takes the lead in reporting the disclosure or concern to the appropriate agency.
- If the disclosure or concern involves a member of staff, the Staff Allegation Procedure must be followed.
- Parents/carers should be informed unless doing so poses a risk to the child or childminder.
- The childminder will refer to the Keeping Bristol Safe Partnership (KBSP) [Indicators of Possible Need booklet](#) to assess whether the concern meets **Level 4: specialist services for acute or chronic needs**. If the concern meets this level, a referral to First Response is required. However, if it is not clear whether the concern reaches Level 4, the childminder will use their professional judgement to decide whether a referral to First Response is appropriate.
- The childminder will make the referral to First Response, which is the front door to Children's Social Care in Bristol. **A referral can be made by telephoning First**

**Response on 0117 903 6444.** If the concern is urgent and requires a same-day response outside of office hours, **contact the Emergency Duty Team on 01454 615 165.** Webpage: [Make a safeguarding referral to First Response for professionals.](#)

- When the concern is referred to First Response the duty officer will ask you if the parent / carer has been informed. If you haven't, they will want to know the reasons why. [Consent and information sharing for safeguarding referrals and targeted support.](#)
- The DSL will follow up with Children's Social Care if no response is received after a referral. If the DSL is not satisfied with the response, they must follow up and escalate their concerns in line with the Keeping Bristol Safe Partnership procedures.

Where the child already has a social worker, the request for support should go immediately to the social worker involved or, in their absence, to their team manager. If the child is a child in care, notification should also be made to the Hope Virtual School: <https://www.bristol.gov.uk/the-hope/schools-education-settings>

If a child lives outside of Bristol, specific safeguarding procedures for the child's location can be found on the Southwest Procedures: <https://swcpp.trixonline.co.uk/>

If the concern does not fall under Level 4, you should read the [Effective Support for Children and Families in Bristol booklet](#) for further guidance on what action to take.

### Early Help for Children and Families

If the DSL is unsure whether a concern is reportable, or if the concern may meet the **Level 3 (Intensive)** criteria as outlined in the [Indicators of Possible Need booklet](#), they should make a referral to Early Help for target support.

Family Help Team:

- South: Telephone - 0117 9037770 or email: [familiesinfocusnorth@bristol.gov.uk](mailto:familiesinfocusnorth@bristol.gov.uk)
- East Central: Telephone - 0117 3576460 or email: [familiesinfocuseastcentral@bristol.gov.uk](mailto:familiesinfocuseastcentral@bristol.gov.uk)
- North: Telephone- 0117 3521499 or email: [familiesinfocusnorth@bristol.gov.uk](mailto:familiesinfocusnorth@bristol.gov.uk)

### [Advice about making safeguarding referrals and requests for targeted support](#)

The DSL can also make a request for targeted support using the online referral form: [Make a request for targeted support.](#)

### Support for Families - Bristol Family Hubs

Childminders are encouraged to signpost families to Bristol Family Hubs, which provide universal access to information, advice, and support for all families across the city. Family Hubs offer a range of services including parenting support, health and wellbeing resources, and early years activities. These services are available both in-person at Family Hub centres and online. Childminders can play a key role in helping families engage with these services by sharing information and encouraging contact with their local hub.

For more information: [Bristol Family Hubs](#)

### What to do if it is an Emergency

**If a child is in immediate danger or a criminal act has taken place, the police should be contacted by calling 999, and a referral should be made to First Response.**

Guidance on when to contact the police: [when-to-call-the-police--guidance-for-schools-and-colleges.pdf](#)

## Confidentiality and Appropriate Disclosure of Information

Confidentiality is crucial to all our relationships, but the welfare of the child is paramount. 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. Appropriate information sharing is central to effectively safeguarding children from harm and promoting their wellbeing. 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 access will be limited to the childminder and relevant agencies.

If we are uncertain about what information may be shared, we can refer to the Keeping Bristol Safe Partnership Procedures Information Sharing: [Information Sharing](#) and the [Information sharing advice for safeguarding practitioners - GOV.UK](#)

While parents and carers have the right to access records held about their child, this may not always be appropriate, particularly if doing so could place the child or the childminder at risk. It is essential that information is shared only on a need-to-know basis, to protect the wellbeing of the child, the parent or carer, and the wider childminder setting.

## Information Keeping

Information on child protection/safeguarding concerns should be kept confidential and stored securely. Each child will have a separate child protection file.

Records should include:

- a clear and comprehensive summary of the concern;
- details of how the concern was followed up and resolved;
- a note of any action taken, decisions reached and the outcome;

Where there are a number of concerns;

- an overview timeline linked to the concern reports.

As part of our safeguarding responsibilities, we will handle personal data securely and in line with data protection legislation. All Ofsted-registered childminding settings that use digital media to store or process any information about minded children or their families, including photographs, observations, assessments, or contact details, are required to register with the [Information Commissioner's Office \(ICO\)](#) as a Data Controller. This registration ensures compliance with the Data Protection Act and supports safe and lawful information sharing practices.

### **Transfer of a Child Protection Safeguarding File from one education setting to another (e.g. from an early years setting to another early years setting or to a school)**

- When a child moves to a new early years or education setting, the Designated Safeguarding Lead (DSL) must inform the new setting that a child protection file exists and will be transferred.
- The original file should be sent separately from the child's main records, either by hand or recorded delivery, never via parents or carers.
- A copy of the file must be kept by the previous setting. The transfer should be completed within five school days, and both settings must record the transfer and receipt.
- Confidentiality must be maintained throughout. If a child joins from another setting, the childminder should check whether a safeguarding file exists.

- Once received, the new setting must record the receipt and retain that record for six years. The previous setting should retain their copy of the file until the child's 25th birthday, with the envelope marked with the destruction date.

The KBSP guidance "[Guidance on the Transfer of a Child Protection Safeguarding File to Another Education Setting](#)" sets out what should be in a child protection file, how to transfer it and what records should be retained.

Parents/carers will be made aware when registering their child with us, that we have a duty to record any concerns and to share or transfer child protection and safeguarding information to the child's next education provider.

### **Injuries in Non-Mobile Babies**

\*Non-mobile babies cannot cause injuries to themselves and therefore must be considered at significant risk of abuse. Severe child abuse is six times more common in babies under one than in older children. If there is non-mobile baby presenting with an injury the setting must follow the KBSP '[Multi-agency Guidance on Non-mobile Babies](#)' procedure.

In all cases of observed injury, an explanation should be sought and the explanation(s) recorded. Due to the significant risk of abusive injury in a non-mobile baby, all non-mobile babies with any injury must be discussed without delay with a hospital or **Community Paediatrician** (Community Paediatrician via UHBW switchboard: **0117 923 0000**)

The Community Paediatrician will need to know the baby's name, date of birth, parent's contact details and the explanation which the parent has given for the injury (the setting will not offer any suggestion to the parent as to how the injury might have occurred).

In an emergency, the DSL will call an ambulance by dialling 999. This includes situations involving bleeding from the nose, mouth, and/or ears.

If the Community Paediatrician deems that an examination is required, the setting will explain to the parent that someone with parental responsibility must give their consent to, and attend, the examination. The DSL will discuss with the parent how they will get the child to the medical examination and the following day and will contact the hospital to confirm that the baby was taken to the examination. If a parent refuses to take the baby for an examination, the setting must inform the Community Paediatrician and First Response.

After consulting with the Community Paediatrician and facilitating an examination (if needed), the setting must contact First Response to provide information about the injury. First Response will carry out Social Care checks. The Community Paediatrician will liaise with Social Care about any findings.

*\*A non-mobile baby is a baby who is not yet pulling to stand, crawling, cruising around furniture, or toddling. Once a baby is bum-shuffling, commando crawling, pulling to stand, cruising etc, they are classed as 'mobile'.*

### **Benign Skin Marks**

Some skin marks in babies may be birthmarks or other benign medical conditions. When a child first starts at the setting, the childminder should discuss any existing skin marks or birthmarks with the parent or carer, including conditions such as congenital dermal melanocytosis (previously referred to as "blue spots"). Parents and carers should be asked to show the child's Red Book (Parent-Held Record) so that any birthmarks or recorded marks can be noted.

If there is any uncertainty about the nature or cause of a skin mark, parents or carers should be advised to seek medical assessment from their GP.

## Allegations about Professionals Working with Children

There is no guaranteed way to identify someone who may pose a risk to children. However, there are signs that may indicate cause for concern. These can include:

- Paying excessive attention to a child or group of children, giving gifts or money, or showing favouritism (which may be signs of grooming);
- Seeking out vulnerable children, such as those with disabilities;
- Regularly attempting to spend time alone with a particular child or group of children;
- Making inappropriate sexual comments;
- Sharing inappropriate images;
- Being vague or evasive about previous employment or work history;
- Encouraging secrecy or asking children to keep things hidden from others.

There may be other sources of concern; this is not a conclusive list.

Should any allegations of harm arise concerning the childminder or anyone living, working, or caring for children alongside the childminder, the setting must contact **the Local Authority Designated Officer (LADO)** within one working day. Additionally, **Ofsted must be informed within 14 days** of the allegation using the **Report a serious childcare incident - GOV.UK** online form.

An allegation meets the LADO threshold if the individual:

- **behaved in a way that has harmed a child or may have harmed a child**
- **possibly committed a criminal offence related to a child**
- **behaved in a way that indicates they may pose a risk of harm to children**
- **behaved in a way that indicates they may not be suitable to work with children**

### Reporting Allegations to the LADO

If an allegation meets the LADO threshold, the LADO team must be notified within one working day using the referral form: [lado-referral-form-2025-update.docx](#)  
The completed form should be emailed securely to: [LADO@bristol.gov.uk](mailto:LADO@bristol.gov.uk)

### Contact Details:

- Telephone: 0117 903 7795
- Email: [LADO@bristol.gov.uk](mailto:LADO@bristol.gov.uk)
- Referral Form: [LADO Concerns Professionals Bristol Referral Form](#) (available at <https://bristolsafeguarding.org/professional-resources/lado-concerns-about-professionals/>)
- Report to Ofsted: [Report a serious childcare incident - GOV.UK](#)

If a childminder is unsure whether an allegation or incident meets the threshold, they can consult with the LADO team for guidance using the LADO referral form.

Enhanced Provision Childminders must also inform Dawn Butler, Early Years Manager, of the allegation:

- Tel: 07827 306287
- Email: [Dawn.butler@bristol.gov.uk](mailto:Dawn.butler@bristol.gov.uk)

If an allegation is made against an assistant, the DSL must ensure that the assistant is not left in sole charge of any child for the remainder of the working day. The DSL must also seek

advice from the LADO regarding the assistant's duties while the allegation is being considered.

The setting must follow the advice given by the LADO on how to handle allegations against staff. **No internal investigation should begin until the LADO has been contacted.**

As well as contacting the LADO to refer the allegation, if there is evidence of significant harm or risk, the DSL must also contact the police where appropriate.

### Low-Level Concerns

A low-level concern is a concern, no matter how small, that is inconsistent with the settings code of conduct, including inappropriate conduct outside of work. Where a concern does not meet the LADO harm threshold it will be dealt with under our [low-level concerns policy](#) and procedure. If we are uncertain a concern is at a low level or staff allegation level, a professional discussion with the LADO should be sought.

### Safe Recruitment and Employment of Assistants

As part of this policy, we will ensure that people working with the children are safe to do so.

When the setting employs an assistant, the DSL must ensure that they are suitable to work with children by carrying out all the necessary checks before they start. This includes:

- Completing an enhanced DBS check with barred lists. [DBS checks for childminders and childcare workers - GOV.UK](#)
- Pre-employment checks must be carried out to make sure the person is safe and suitable to work with children. This includes obtaining a **reference** ([section 3.21, page 20 of the EYFS on how to carry out reference checks will be followed](#)).
- Ofsted will be notified of the assistant so they can carry out suitability checks, including health and social care checks. [Childminders: report new people in the setting - GOV.UK](#)
- **The assistant must not be left unsupervised with children or counted in ratio until the letter of suitability from Ofsted confirming they are approved to work with children has been issued.**
- All people connected with the setting must declare all convictions/cautions which may affect their suitability to work with children.
- The childminder and all people connected with the setting must declare their disqualification and disqualification by association status.
- When assistants start work, an induction that covers the setting's policies and procedures will be given. This includes child protection and safeguarding training in line with the requirements of annex c of the EYFS, as well as a staff behaviour policy/code of conduct.

[A safe recruitment policy and procedure](#) can be found on the Bristol Early Years website, on the 'Working with Assistants' webpage: [Working with Assistants - Bristol Early Years](#)

### Whistleblowing

During induction, assistants are informed that they can raise any concerns or grievances directly with the childminder. For issues related to employment, they can also contact the ACAS helpline at <https://www.acas.org.uk/contact>.

If an assistant has concerns about poor or unsafe early years practice and feels unable to speak to the childminder, or feels their concerns are not being listened to, they are advised to whistleblow using the channels available:

- **NSPCC Whistleblowing Advice Line:** Call 0800 028 0285 (Monday to Friday: 08:00–20:00, Weekends: 09:00–18:00) or email [help@nspcc.org.uk](mailto:help@nspcc.org.uk).
- **Write to:** NSPCC, Weston House, 42 Curtain Road, London EC2A 3NH.
- **Ofsted Complaints Guidance:** Visit Complaints procedure - [Complaints procedure - Ofsted - GOV.UK](#)

Further information about whistleblowing: [Whistleblowing for employees: What is a whistleblower - GOV.UK](#)

If an assistant has concerns about a childminder’s behaviour towards a child that meets the LADO threshold of harm, they must contact the Local Authority Designated Officer (LADO), as outlined in the allegations section of this policy. The allegation must also be reported to Ofsted within 14 days, as stated in the staff allegations section. If the assistant is unsure whether their concern meets the LADO threshold, they are encouraged to seek guidance directly from the LADO.

Where childminders are working together (co-childminding) and have concerns about poor practice or the quality of provision, they should first try to address the issue directly with the other childminder. If the concern cannot be resolved or if they feel unable to raise it directly, they can follow the whistleblowing procedure outlined in this policy. Each childminder is individually responsible for ensuring they meet the requirements of their own registration.

### **Use of Mobile Phones, Cameras and Online Safety**

As a setting we are aware of the risks associated with mobile phones, cameras, and internet-enabled devices. As digital technology is part of everyday life, childminders have a key role in promoting online safety from an early age.

Within the setting, screen use will be avoided wherever possible. If screens are ever used within the setting, it will only be on very limited occasions and strictly for clearly defined educational purposes or carefully shared activities that promote bonding, interaction, and communication. Children will always be supervised when using any digital devices, and their access will be safeguarded through appropriate safety measures, including secure passwords, parental controls, and content filters.

As part of our safeguarding and wellbeing responsibilities, we will work closely with families to share key messages about screen use at home. This includes supporting parents and carers to understand recommended limits for children and the importance of avoiding screen time during meals and before bed. [New screen time guidance for parents of under-5s - GOV.UK](#)

The setting may need to use a mobile phone for essential communication with parents and carers. Mobile phones may also be used to take photographs for the purpose of observing children’s learning and development, and these images will only be shared with parents and carers in line with data-protection requirements.

However, the use of mobile phones and any smart devices with recording or camera capabilities, such as smartwatches, will be kept to an absolute minimum when children are present. All devices must be stored securely when not in use and kept out of children’s reach at all times.

To protect the personal data of children and their families, all mobile phones and devices must be password-protected or secured with appropriate privacy features. Wherever possible, a separate work-only phone should be used instead of a personal device.

All mobile phone use must be responsible and must follow safeguarding, confidentiality, and data-protection guidelines to protect the safety, privacy, and dignity of children and their families.

Images of children may only be taken when they are fully and appropriately dressed. Photographs or videos must never be taken in sensitive areas of the setting, such as bathrooms. Children's privacy must always be respected and carefully balanced with safeguarding. Additionally, no images should be taken of a child who has sustained an injury, whether accidental or suspected non-accidental, in order to protect the child's dignity and privacy. If evidence of an injury is required, this must be carried out by trained professionals, such as a social worker.

Visitors should keep mobile phones and other devices switched off or on silent, and should not use them in areas where children are being cared for.

Any online activity by the childminder must follow confidentiality and safeguarding policies. Personal social media accounts should not be used to discuss or reference minded children or their families. Childminders should carefully consider the content they share online to ensure it does not bring their setting into disrepute and to protect themselves from allegation.

Childminders must maintain professional boundaries. It is important to recognise that behaviour and conduct outside of working hours, including online activity, can impact the childminders suitability to work with children.

For further information: <https://www.gov.uk/government/publications/safeguarding-children-and-protecting-professionals-in-early-years-settings-online-safety-considerations>

### **Use of Reasonable Force / Physical Intervention**

In line with Section 3.74 (page 29) of the EYFS, physical intervention is permitted when absolutely necessary to prevent immediate harm or to manage behaviour that poses a serious risk. For example, this could include using physical intervention to stop a child from running into a road. In such cases, this would not be considered corporal punishment and is not regarded as an offence.

Childminders must keep a record of any incident involving physical intervention. Parents or carers must be informed on the same day, or as soon as reasonably practicable.

Childminders should follow and adhere to the guidance: [Use of reasonable force and other restrictive interventions guidance](#).

### **Visitors**

Whilst visits are permitted during childminding, particularly when they support children's wellbeing, such as visits from another childminder, I will ensure that each visitor's identity is verified before allowing entry.

Under no circumstances will minded children be left unsupervised with any visitor.

### **Safeguarding in the Curriculum**

Our setting aims to support to support children learn about safeguarding, including online safety. For example, using the [NSPCC's Talk PANTS](#) campaign to help children understand their right to say no and to speak out if something is wrong. We also support families to safeguard their children by providing guidance and resources where needed.

### **Further Information**

**South West Child Protection Procedures** – provide detailed online information on all aspects of child protection: [Welcome to the South West Child Protection Procedures \(trixonline.co.uk\)](http://trixonline.co.uk)

**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>

[Advice about making safeguarding referrals and requests for targeted support](#)

Guidance for safer working practice for those working with children and young people in education settings:

[https://www.saferrecruitmentconsortium.org/files/ugd/f576a8\\_0d079cbe69ea458e9e99fe462e447084.pdf](https://www.saferrecruitmentconsortium.org/files/ugd/f576a8_0d079cbe69ea458e9e99fe462e447084.pdf)

[Keeping Bristol Safe Partnership: Effective Support for Children and Families in Bristol \(bristolsafeguarding.org\)](http://bristolsafeguarding.org)

[Keeping Bristol Safe Partnership: Indicators of need \(bristolsafeguarding.org\)](http://bristolsafeguarding.org)

Safeguarding d/Deaf and disabled children and young people: [Safeguarding d/Deaf and disabled children and young people | NSPCC Learning](#)