SAFEGUARDING & CHILD PROTECTION POLICY

(Updated in line with KCSiE and EYFS 2026)

Written by: Sarah Mackintosh
Date: September 2026
Update Required: September 2027

Safeguarding Statement - “It could happen here”

Key Staff:

Designated Safeguarding lead (DSL) – Sarah Mackintosh, Suzanne Goodwin & Jessica Erb

Deputy DSLs - Laura Atkin, Crystal Howlett, Emi Sadak & Amna Kamran

Hillingdon Hub Number: 01895 556006

The Stronger Families Hub is the new one stop shop for all Early Help AND Safeguarding referrals (one referral, one phone, one email)

01895 556006 strongerfamilieshub@hillingdon.gov.uk

LADO: Manager regarding allegations against members of staff

Rob Wratten: 01895 250975 rwratten@hillingdon.gov.uk Deputy (LADO) Hannah Ives, hives@hillingdon.gov.uk

Child Protection Officer and School Adviser: Hannah Ives 01895 250010, Mobile 07753431285 hives@hillingdon.gov.uk

Contact Details regarding radicalisation are to be referred to HUB in the first instance on 01895 556006

The local authority Prevent Lead: Fiona Gibbs, fgibbs@hillingdon.gov.uk

Local Police Force, 101, the non-emergency number

DfE dedicated telephone number for non-emergency advice: 020 7340 7264 counter-extremism@education.gsi.gov.uk

NSPCC Whistle blowing helpline: 0800 028 0285 help@nspcc.org.uk

Statement of Intent

Our setting is committed to safeguarding and promoting the welfare of all children. We believe that every child has the right to be protected from harm, abuse, neglect and exploitation.

We will:

- Provide a safe and secure environment.
- Follow the EYFS Statutory Framework.

- Work in partnership with parents, carers and other agencies.
- Ensure all staff understand their safeguarding responsibilities.
- Take prompt action where concerns arise.

Safeguarding Policy 2026

Section 1 - Safeguarding and Child Protection

1.1 What is safeguarding and child protection?

Safeguarding refers to the measures and actions taken to promote the welfare of children and protect them from harm. Safeguarding means:

- protecting children from abuse and maltreatment;
- preventing harm to children's health and development;
- providing support to meet children's individual needs;
- ensuring children grow up with safe and effective care, within their family where possible;
- taking action to ensure that all babies, children and young people achieve the best possible outcomes.

Child protection is part of the safeguarding process. It focuses on protecting individual children identified as suffering, or likely to suffer, significant harm. This includes child protection procedures detailing how to respond to concerns about a child.

(NSPCC, 2025)

1.2 Who is the Designated Safeguarding Lead (DSL) and what do they do?

In our setting the DSL is Sarah Mackintosh, Suzanne Goodwin and Jessica Erb. Our deputies are Laura Atkin, Crystal Howlett, Emi Sadak and Amna Kamran.

In every early years setting, an educator must be designated to take lead responsibility for safeguarding the children in attendance. The designated safeguarding lead (DSL) in this setting has a duty to:

- act as the main point of contact for all safeguarding concerns within the setting;
- ensure that all concerns about a child's welfare are recorded accurately;
- liaise with external agencies, such as local Safeguarding Children Partnerships, children's social services, the police or other professionals;
- provide advice, guidance and support to other staff members on safeguarding issues;
- ensure that safeguarding policies and procedures are implemented, up to date and followed by staff;
- attend regular safeguarding training to ensure knowledge remains current;
- support staff in recognising signs of abuse, neglect and other safeguarding concerns;
- promote a culture of safeguarding, ensuring children's welfare is the highest priority.

1.3 What are the main types of abuse?

The main types of abuse include physical abuse, emotional abuse, sexual abuse and neglect. Domestic abuse is also recognised as a significant safeguarding concern.

In addition to the main types of abuse outlined above, all early years educators must be familiar with safeguarding terminology and the specific risks and vulnerabilities that may impact children.

Staff are required to undertake thorough and regular safeguarding training to ensure they can recognise the signs and indicators that may suggest a child is at risk of harm or abuse.

Educators must also understand how to respond appropriately to any concerns, including the correct procedures for recording, reporting and sharing information.

In our setting we have annual safeguarding training.

1.4 How might abuse be identified?

Educators must remain vigilant and able to recognise possible signs and indicators of abuse, which may be identified through physical signs, changes in behaviour or through what a child communicates (either directly or indirectly). The NSPCC website also lists other signs that can, in some cases, indicate abuse is happening:

- 'unexplained' changes in behaviour or personality
- becoming withdrawn
- seeming anxious
- becoming uncharacteristically aggressive
- lacks social skills and has few friends if any
- poor bond or relationship with a parent
- knowledge of adult issues inappropriate for their age running away or going missing
- always choosing to wear clothes which cover their body.' (NSPCC, 2025)

These signs alone do not necessarily mean a child is being abused. However, a pattern of concerning behaviours or a combination of indicators should always be taken seriously and educators are responsible for observing, recording and reporting concerns promptly.

Abuse may also be identified through the behaviour, attitudes or comments of adults who have contact with children, which raise concerns about a child's safety or wellbeing.

All concerns must be recorded promptly and accurately on a Concern form.

1.5 What precautions are taken to protect children in the setting?

- Robust Safer Recruitment procedures are in place to ensure that all staff, volunteers and regular visitors are safe to work with children (see section 3.5).
- All educators are aware of health and safety policies, including emergency procedures.
- At least one educator in each classroom holds a valid, current paediatric first-aid qualification. First-aiders are available at all times, including mealtimes and snack times. Under the EYFS framework, the legal minimum is at least one person with a current, full Paediatric First Aid (PFA) certificate on-site and on outings, however most of our staff are PFA trained. We know that staff with Level 2 or 3 qualifications obtained after June 30, 2016, must have a PFA certificate within 3 months of starting to be counted in ratios and that PFA certificates must be renewed every 3 years.
- Children are supervised at all times. Staff ratios meet statutory requirements for the number of children and their age, as follows:

Age of Children	Minimum Staff-to-Child Ratio	Key Qualification Requirements
Under 2 years old	**1:3**	At least one member of staff must hold a Level 3 qualification and be experienced with babies. Half of all other staff must be Level 2.
2 years old	**1:5**	At least one member of staff must hold a Level 3 qualification. Half of all other staff must be Level 2.
3 years & over (without a Level 6 teacher)	**1:8**	At least one member of staff must hold a Level 3 qualification. Half of all other staff must be Level 2.
3 years & over (with a Level 6 teacher)	**1:13**	An approved Level 6 practitioner (such as a teacher with QTS, EYTS, or EYPS) must be working directly with the children.

- Detailed information is collected about each child's dietary requirements, allergies, intolerances and medical needs prior to starting. For children with specific medical conditions, such as allergies, intolerances or medical conditions, parents and caregivers must provide a copy of their child's Individual Health Care Plan. This information will be used to develop an individual risk assessment which will detail our procedures for meeting individual needs within the setting and during outings, ensuring their full participation without compromising their health and safety. All staff are made

aware of any special requirements, symptoms to look out for and treatment protocol, as well as a named person being responsible for ensuring food provided meets each child's needs.

- Children eat in age-appropriate seating, supervised by staff with a trained first-aider present. Food is age-appropriate and is prepared to reduce choking risks. Safer eating practices are promoted and any incidents (such as choking or allergic reactions) are documented, reviewed and shared with parents and caregivers.
- Weaning is planned in close collaboration with parents and caregivers. Staff remain alert to newly developing allergies or intolerances when introducing new foods.
- Children do not leave the setting without an adult and unauthorised individuals cannot access the setting. Visitors are supervised at all times.
- The setting offers a welcoming, safe and nurturing environment in which children feel comfortable sharing their worries or concerns with staff.
- Accurate records are kept, including accidents and incidents. Parents and caregivers are informed of and asked to sign records where appropriate.
- Procedures are in place if a child fails to arrive or is not collected.
- Measures are taken to prevent children leaving the premises unsupervised. In the unlikely event a child goes missing, the setting contacts parents and Police immediately.

1.6 What happens if there are safeguarding concerns regarding a child?

If any member of staff has a concern about a child's welfare or safety, they must first report it internally to the DSL, however they can also report it directly to the Local Safeguarding Hub in Hillingdon at

Stronger Families Hub: 01895 556006

Email: strongerfamilieshub@hillingdon.gov.uk

Safeguarding Partnership team: 01895 277855

Email: safeguardingpartnership@hillingdon.gov.uk

Emergency Duty Team (24 hours): 020 8424 0999

Hillingdon Safeguarding Children Partnership, Civic Centre, High Street, Uxbridge, Hillingdon, UB8 1UW. All information on the website: www.hillingdonsafeguardingpartnership.org.uk

If there is any reason to believe that a child is in immediate danger, the police must be contacted without delay. All concerns, whether urgent or non-urgent, must also be recorded accurately and shared with the setting's designated safeguarding lead (DSL), ensuring the appropriate action is taken to protect the child in line with statutory requirements and the setting's safeguarding policies.

1.7 What happens if an allegation of abuse is made?

There are procedures in place for each of the following situations:

- a child discloses that they or another child are being abused
- an allegation is made against a parent/caregiver
- an allegation is made against a member of staff / volunteer
- a child is suspected of or discloses having experienced Female Genital Mutilation (FGM)
- an allegation is made against a child
- a child makes an allegation against someone from outside the setting
- a parent/caregiver reports a safeguarding concern
- whistleblowing
- recording and reporting safeguarding information

In each case staff should speak the DSL or DDSL first.

1.8 How do we keep safeguarding and child protection practices up to date?

All staff in the setting are required to have up-to-date safeguarding and child protection training, with mandatory renewal in September each year. In addition to this, safeguarding knowledge is kept up to date through regular updates and continuing professional development (CPD), including refresher training where appropriate. Staff use this knowledge to inform and improve practice. Safeguarding policies and procedures are regularly reviewed annually to ensure they remain in line with current national and local guidance.

1.9 What statutory safeguarding guidance and key documents are in place for early years settings?

Early years settings must follow the statutory safeguarding guidance applicable to their setting, including:

- reporting children's accidents and injuries (Ofsted, 2022a)
- reporting a serious childcare incident (Ofsted, 2022b)
- registration requirements for childminders and childcare providers (Ofsted, 2025)
- registering with Ofsted if you provide childcare for under 2 hours a day (Ofsted, 2020d)
- Early years settings must read, understand and revisit the following documents when updates are made:
    - Early Years Foundation Stage (EYFS) Statutory Framework
    - Working Together to Safeguard Children
    - Prevent Duty Guidance: England and Wales
    - Keeping Children Safe in Education
    - Child Abuse Concerns: Guide for Practitioners
    - Early Years Inspection Toolkit
    - Information Sharing Advice for Safeguarding Practitioners
    - UN Convention on the Rights of the Child, UNICEF
    - Children and Social Work Act

1.10 What is Prevent Duty and how do early years settings help to prevent radicalisation?

The Prevent Duty aims to 'tackle the ideological causes of terrorism' and is a statutory aspect of safeguarding for all early years settings. All staff members have a duty of care to be vigilant and to help prevent children from being drawn into terrorism and extremist ideologies.

To fulfil Prevent Duty requirements, educators must be able to recognise children who may be vulnerable to radicalisation and know how to respond appropriately.

Protecting children from the risk of radicalisation is part of the wider safeguarding responsibility and should be approached in the same way as protecting children from other forms of abuse, whether these arise from within the family or from external influences.

There is no single way to identify a child who may be susceptible to extremist ideologies. All staff must remain alert to changes in children's behaviour, attitudes and circumstances that may indicate a child requires support or protection.

Any child, from any background, can be the victim of radicalisation and as such, concerns must be reported promptly and without discrimination based on race, religion, culture, gender, social background or any other characteristic. All concerns are passed on in accordance with local safeguarding partner procedures and statutory guidance.

1.11 What are 'fundamental British values' and how do they affect early years settings?

The Prevent Duty guidance states that all early years settings must actively promote fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance, which can help build children's resilience to radicalisation and help them gain the confidence to challenge extremist views later in life.

Children and educators will contribute to creating rules and codes of behaviour for the setting, ensuring everyone is treated fairly and given equal opportunities.

The setting promotes an ethos of respect and inclusion, where all children are encouraged to appreciate all cultures, faiths, backgrounds and beliefs. Discriminatory views or behaviours will not be tolerated.

The curriculum plays a key role in promoting positive values:

'*teaching children to be respectful and to recognise those who help us, and contribute positively to society; developing children's understanding of fundamental British values; developing children's understanding and appreciation of diversity; celebrating what we have in common; and routinely challenging stereotypical behaviours and promoting respect for different people.'*

(PACEY, 2025)

Suitable, age-appropriate opportunities will be provided to help children respect each other's views, beliefs and values, understand that their opinions matter and express their feelings. The setting will encourage children to reflect on differences and recognise how everyone is unique. Activities will promote turn-taking, sharing and collaboration and children will be supported to understand their own behaviour and its impact on others.

1.12 How does the setting safeguard children's privacy and dignity during personal care routines?

Children's privacy and dignity will be maintained at all times while ensuring high standards of hygiene and safety. Nappy changes and toileting will be carried out discreetly and out of the direct view of others wherever possible. Children will be supported to respect each other's privacy and will be encouraged not to watch or disturb others during these routines. Children will be guided to ensure they are fully dressed and comfortable before rejoining others.

Section 2 - Electronic Devices and Online Safety

2.1 How are electronic devices with imaging and sharing capabilities used in the setting?

Images and recordings of children are only created with prior written consent from parents and caregivers. Parents and caregivers must not share images of other children on social media or other online platforms. The setting will not upload images or recordings of children to any social media site or similar website without express permission. Parents and caregivers have the right to withdraw permission at any time, and any online content will be removed promptly in this event.

2.2 Are non-staff members allowed to take photographs in the setting?

To safeguard children, visitors and parents must not take photographs or videos of children on personal devices. Images will only be taken using setting-approved devices and with prior written consent. Photographs will be used solely for agreed purposes, such as learning and development records and the newsletter.

2.3 How are photographs of children kept secure?

All devices used to store photographs are password protected and access is restricted to authorised individuals. Any images or data will be handled in accordance with General Data Protection Regulation (GDPR) and the Data Protection Act 2018.

2.4 How is online safety promoted in the setting?

The setting recognises that the use of digital technology presents both risks and opportunities. Appropriate measures are in place to ensure that children are safeguarded when accessing online content. Children are supervised when using digital devices and all content is age-appropriate.

2.5 Screen Use

The setting recognises that technology can support learning but must be used appropriately.
We will…

- Ensure screen use has a clear educational purpose.
- Avoid excessive or passive screen exposure.
- Balance screen activities with physical play, outdoor experiences and social interaction.
- Ensure content is age appropriate.
- Monitor children's access to digital devices.
- Obtain parental consent where necessary for digital learning activities.

Staff use of personal devices around children is prohibited unless authorised.

Section 3 - Staff and Other Adults

3.1 How many children can the setting care for?

The number of children cared for at any one time is in accordance with the requirements outlined in the Early Years Foundation Stage statutory framework. Ratios are maintained to ensure that all children's safety, wellbeing and individual needs are met.

Any variation to these ratios is subject to a risk assessment and will only be permitted where it does not compromise the safety, care or learning of any child.

3.2 Why does each child have a key person?

'Children typically build warm, trusting and respectful relationships with their key persons. As a result, they are confident to share their concerns in age- and/or stage-appropriate ways.' (Early Years Inspection Toolkit, 2025)

Each child is assigned a key person to support the development of a secure and trusting relationship. The key person is responsible for meeting the child's individual needs, supporting their wellbeing and forming a partnership with parents and caregivers to support children in developing confidence and a sense of belonging within the setting.

'Key person arrangements, care practices, routines and warm, positive relationships are effective in promoting children's feelings of security and character development.' (Early Years Inspection Toolkit, 2025)

3.3 Will any other adults be present in the setting at the same time as children?

There may be occasions when other adults are present in the setting while children are in attendance. These may include visitors, prospective parents or tradespeople.

Visitors to the setting are supervised at all times and are not left alone with children. Reasonable steps are taken to ensure that children are not exposed to unnecessary risk when visitors are present.

Where possible, visits are managed to minimise disruption to children's care and learning. All visitors are required to sign a Visitors' Log, which records who was present in the setting and when, in order to safeguard children and respond to any future concerns.

Any concerns regarding the behaviour or suitability of an adult are acted upon immediately to safeguard children.

3.4 Will any other adults be left alone with children?

Children are appropriately supervised at all times, including during mealtimes and care routines. Intimate care, such as nappy changes or toileting, is carried out by authorised staff members in line with the setting's procedures.

Children are not left alone with visitors or any other adults whose suitability has not been formally verified. In the event of an emergency, procedures set out in the setting's emergency and safeguarding policies will be followed to ensure children remain safe.

3.5 What procedures are in place for safer recruitment?

The setting follows safer recruitment procedures in line with Keeping Children Safe in Education 2025. This includes robust processes for advertising, shortlisting and selecting candidates.

All appointments are subject to appropriate checks, including Disclosure and Barring Service checks, verification of identity, qualifications and employment history and the obtaining of references. References are checked to confirm suitability and to identify any concerns.

Any gaps or discrepancies in employment history are explored. The setting also verifies prospective candidates' right to work in the United Kingdom and where applicable, checks relevant overseas records.

Recruitment decisions are made only when the setting is satisfied that the individual is suitable to work with children and poses no risk to their safety or wellbeing.

3.6 Under what circumstances might a member of staff be disqualified from working with children?

A member of staff may be disqualified from working in an early years setting when they do not meet suitability requirements outlined in statutory guidance.

This may include circumstances where an individual has a relevant criminal conviction, has been barred from working with children or is subject to any order or restriction that impacts their suitability to work with children.

Staff are required to inform the setting of any changes to their circumstances that may affect their suitability. Appropriate action will be taken in line with statutory requirements to ensure children are safeguarded at all times.

3.7 Can staff work if they are under the influence of medication or other substances?

All staff must be fit to carry out their roles and responsibilities when working with children. Staff must not be under the influence of alcohol or any substance that may impair their ability to care for children safely.

Where medication is taken that may affect a staff member's ability to perform their duties, this must be reported to the setting. Appropriate risk assessments will be carried out and adjustments made where necessary to ensure that children remain safe and adequately supervised.

3.8 Do staff have appropriate first-aid training?

At least one member of staff with a current, valid paediatric first-aid qualification is on premises at all times when children are present, as well as accompanying children on outings. Paediatric first-aid training meets the requirements of the Early Years Foundation Stage and certificates are kept up to date and renewed as required.

The setting maintains a fully stocked first-aid kit which is accessible at all times and checked regularly using a First-Aid Kit Checklist. Records of accidents and first-aid treatment are maintained in accordance with statutory requirements and parents and caregivers are informed of any incidents involving their child.

Section 4 - Children's Health

4.1 Are staff allowed to administer medication to children?

Staff may administer both prescription and non-prescription medication to children where necessary and where prior written consent has been obtained from parents or caregivers. Prescription medicines will only be administered where they have been prescribed by a doctor, dentist, nurse or pharmacists. Medicines containing aspirin will only be given if prescribed by a doctor.

All medication must be provided in the original container with the child's name and date of birth clearly visible on the label. Medication must be accompanied by clear written instructions, including dosage and frequency. Staff will only administer medication in accordance with the instructions provided.

A written record is kept each time medication is administered, and parents or caregivers are informed on the same day of the time and dosage given.

4.2 How is medicine stored in the setting?

All medication is stored safely and securely, out of the reach of children. Where medication requires refrigeration, it is stored appropriately in a designated area.

Medication brought into the setting must be handed directly to a member of staff. It must not be left in bags or areas accessible to children.

4.3 How are healthy eating and oral hygiene promoted?

The setting promotes healthy eating and oral health as part of children's daily routines and learning. Children are supported to make healthy food choices and to develop an understanding of the importance of oral hygiene.

Food and drink provided by the setting are nutritious and in line with current guidance. Fresh drinking water is available at all times.

The setting works in partnership with parents and caregivers to support children with specific dietary needs, including allergies, medical conditions or cultural preferences.

'Where children are provided with meals, snacks, and drinks, these must be healthy, balanced and nutritious. To understand how to meet this requirement, providers must have regard to the 'Early Years Foundation Stage nutrition guidance'. Fresh drinking water must always be available and accessible to children.'

(PACEY, 2025)

4.4 How closely are children supervised while eating?

Children are always supervised closely while eating, ensuring their safety and promoting appropriate eating behaviours. Food provided is appropriate to the age and developmental stage of each child and is prepared in a way that reduces the risk of choking.

'*Children must always be within sight and hearing of a member of staff whilst eating. Choking can be completely silent, therefore, it is important for providers to be alert to when a child may be starting to choke. Where possible, providers should sit facing children whilst they eat, so they can make sure children are eating in a way to prevent choking and so they can prevent food sharing and be aware of any unexpected allergic reactions.'*

(EYFS Framework for Group and School-Based Providers, 2025)

4.5 What happens if a child has an allergy or special dietary requirement?

Parents and caregivers must inform the setting of any known allergies or dietary requirements. This information is recorded and shared with all relevant staff to ensure children's safety.

The setting takes all reasonable steps to prevent children from being exposed to known allergens.

Care plans are implemented where necessary to support children with specific medical or dietary needs. Staff follow these plans to ensure children's safety.

4.6 How is food safety managed in the setting?

The setting follows appropriate food hygiene practices to reduce the risk of illness. Food is prepared, stored and handled in line with current guidance.

Staff follow effective handwashing procedures and maintain high standards of cleanliness in food preparation areas. The setting is compliant with relevant environmental requirements and may be inspected by the local authority.

This setting follows guidance set out by the Food Standards Agency in Safer Food, Better Business.

Section 5 - Safety Within the Setting

5.1 How are children safeguarded in the setting's outdoor area?

'Providers must provide access to an outdoor play area. If that is not possible, they must ensure that outdoor activities are planned and taken on a daily basis (unless circumstances make this inappropriate, for example unsafe weather conditions). Providers must follow their legal responsibilities under the Equality Act 2010 (for example, the provisions on reasonable adjustments).'

(EYFS Framework for Group and School-Based Providers, 2025)

All equipment in the setting's outdoor area is age-appropriate and maintained to ensure it is safe for children. Before outdoor activities, weather conditions are assessed carefully. Children are dressed appropriately for the conditions to ensure their safety and comfort.

5.2 How are children safeguarded on outings?

Potential risks are assessed before any outing takes place. This includes consideration of risks specific to the destination, method of transport, weather conditions and the individual needs of the children attending.The setting takes all reasonable steps to remove or minimise risks to ensure the safety and wellbeing of children throughout the outing.

5.3 Will children travel by public transport or private vehicle?

Parents and caregivers are asked to provide consent in advance of any outing involving travel by public transport or private vehicle.

The setting ensures that all vehicles used for transporting children are properly insured and comply with relevant safety regulations. A detailed risk assessment is carried out for all travel arrangements, outlining measures taken to ensure children's safety when travelling by public transport or private vehicle.

5.4 What happens if a child has an accident?

In the event of an accident, a written accident record is completed detailing the nature of the injury, any treatment given and the circumstances surrounding the incident.

Parents and caregivers are required to acknowledge the record on the same day or as soon as reasonably practicable.

5.5 What happens if a child or adult has a serious accident or injury?

There is a legal duty to report all serious injuries, accidents and illnesses, including:

- any incident requiring resuscitation
- admission to hospital for more than 24 hours
- a broken bone or fracture
- dislocation of any major joint, such as the shoulder, knee, hip or elbow
- any loss of consciousness
- severe breathing difficulties
- conditions leading to hypothermia or heat-induced illness
- loss of sight, whether temporary or permanent
- absorption of harmful substances via inhalation, ingestion or through the skin
- electric shock or electrical burn
- exposure to harmful substances, biological agents, toxins or infected materials

Ofsted must be notified of any serious injury, accident or illness and of any action taken in response within 14 days of occurrence. Where appropriate, referrals must also be made to local safeguarding agencies in line with child protection procedures.

5.6 What happens if a child goes missing from the setting or while on an outing?

'Children must be kept safe while on outings. Providers must assess potential risks or hazards for the children and must identify the steps to be taken to remove, minimise and manage those risks and hazards'.

(EYFS Framework for Group and School-Based Providers, 2025)

The setting takes all reasonable steps to ensure children are not able to leave the premises unsupervised and are kept safe at all times. Risk assessments which detail how the risk of a child being separated on outings or leaving the setting without permission is minimised must be in place.

Any incident of a child going missing will be accurately recorded and reported in line with statutory requirements. Ofsted will be notified within 14 days.

5.7 What would happen if there was an emergency in the setting?

The setting has a range of risk assessments and precautions in place to reduce the risk of emergencies, including fire, floods, serious accidents and other unexpected incidents.

The setting has policies and procedures in place which detail the actions to be taken in the event of an emergency, including an Accident and Emergency Procedure. All staff are familiar with these procedures and understand their roles and responsibilities in responding to emergency situations.

Fire exits are kept clear, accessible and can be easily opened by an adult from the inside at all times. For security purposes, doors and windows are kept locked when not in use, however keys are readily accessible in the event of an emergency.

The setting provides regular, age-appropriate fire safety discussions with children and carries out routine fire drills to ensure that all children and staff are familiar with evacuation procedures.

Appropriate safety equipment is in place and maintained, including smoke detectors, a fire blanket and fire extinguishers.

5.8 Are smoking and vaping allowed on the premises?

'Providers must not allow smoking in or on the premises when children are present or about to be present. Practitioners should not vape or use e-cigarettes when children are present, and providers should consider Public Health England advice on their use in public places and workplaces.'

(EYFS Framework for Group and School-Based Providers, 2025)

Smoking and vaping are not permitted on the premises during working hours, while children are present or likely to be present. In addition:

- Smoking is not permitted inside the premises or in any vehicle used to transport children at any time.
- Staff, visitors and any other adults are not permitted to smoke or vape within the setting or in the presence of children.
- If visitors wish to smoke, this must take place away from the premises and outside of the setting's operating hours. Any waste must be disposed of appropriately and away from areas used by children.
- Children will not be taken into any indoor environment where smoking or vaping is taking place, including private dwellings.
- In outdoor public spaces, reasonable steps will be taken to avoid children being exposed to second-hand smoke or vapour.

5.9 How safe are the toys that children play with?

All toys and resources that children have access to are checked and cleaned regularly to ensure they are safe and suitable for use. Any broken, damaged or hazardous items are removed immediately.

Children are only provided with toys and resources that are appropriate for their age and stage of development.

The level of supervision required for each resource or activity is continually assessed. Some children may require closer supervision to ensure their safety and wellbeing.

5.10 How do early years settings limit the spread of illnesses and infectious diseases?

We ask parents to keep children at home of they have the following:

- **High Temperature / Fever**: Keep them home until their temperature returns to normal and they are well enough to join normal activities.
- **Diarrhoea and Vomiting:** Keep them away for 48 hours after the very last episode of sickness or runny poo.
- **Chickenpox:** Keep away for 5 days from when the rash first appears, or until all spots have crusted over.
- **Impetigo:** Keep off until all sores have crusted over and healed, or 48 hours after starting antibiotic treatment.

- **Whooping Cough:** Keep away for 2 days after starting antibiotics, or 21 days from the onset of illness if untreated.
- **Scarlet Fever**: Return is allowed 24 hours after starting antibiotic treatment.
- **Measles:** They'll need to see a GP. Call the GP surgery before you go in, as measles can spread to others easily. Keep your child off school for at least 4 days from when the rash first appears.

5.11 How are sleeping children kept safe?

'Sleeping children must be frequently checked to ensure that they are safe. Being safe includes ensuring that cots and bedding are in good condition and suited to the age of the child, and that babies are placed down to sleep safely in line with the latest government safety guidance: Sudden infant death syndrome (SIDS) - NHS (www.nhs.uk). Practitioners should read NHS advice on safety of sleeping babies: Reduce the risk of sudden infant death syndrome (SIDS) - NHS (www.nhs.uk).'

(EYFS Framework for Group and School-Based Providers, 2026)

The setting has procedures in place to ensure that children who are sleeping are monitored and kept safe at all times. Staff assess each child's individual needs and ensure that sleeping arrangements are appropriate for their age and stage of development.

Children sleep in a safe environment, following current guidance on reducing risks. Sleeping areas are kept clean, hazard-free and well-ventilated, and equipment such as cots and mats are checked regularly.

Staff supervise sleeping children according to risk assessments and regular checks are made to ensure children are safe and comfortable.

The setting follows current safer sleep guidance 2026
We will:
- Place babies on their backs to sleep unless medical advice states otherwise.
- Maintain a clear sleep policy.
- Discuss sleep arrangements with parents.
- Record individual sleep requirements.
- Ensure babies are regularly checked while sleeping.
- Maintain suitable sleep environments that are clean, ventilated and free from hazards.
- Keep records of sleep checks.

Staff will receive safer sleep training as part of safeguarding procedures.

5.12 What would happen if an unexpected person tried to collect a child?

Children will only be released from the setting to a parent, caregiver or another adult who has been named and authorised by the parent or caregiver. If the person collecting the child is not already known to the setting, a password or other agreed form of identification may be requested to confirm their identity.

Staff are aware that they cannot legally withhold a child from an adult with parental responsibility (for example, named on the birth certificate) who can provide evidence and valid identification, unless a court order restricting collection is in place.

5.13 What would happen if a child did not arrive at the setting or was not collected when expected?

'Providers must take all necessary steps to keep children safe and well.'

(EYFS Framework for Group and School-Based Providers, 2025)

Staff will attempt to contact the child's parent / other emergency contacts. If there is no response within a reasonable timeframe, the setting may request a police emergency welfare check or visit the family in order to ensure the child's safety.

Section 6 - Vulnerable Children

6.1 How are children with special needs and disabilities (SEND) protected from harm?

Arrangements are put in place to support children with SEND in line with the Special Educational Needs Code of Practice. Children with SEND are statistically more vulnerable to harm or abuse due to their additional care needs, increased dependency or challenges faced by their parents or caregivers.

Procedures are followed to monitor and record any concerns regarding children with SEND. While it is recognised that parents and caregivers may experience additional pressures in caring for a child with SEND, this will not affect the setting's judgement regarding what is acceptable in the child's treatment or wellbeing.

The setting provides support and guidance to families where appropriate, but may also make referrals to relevant external agencies, including Local Safeguarding Partners, where necessary to ensure the safety and welfare of the child or family.

6.2 How are non-mobile babies protected from harm?

Non-mobile babies are generally not able to injure themselves. The setting has procedures in place to ensure that any signs of injury, including bruises or marks, are carefully monitored. Any suspicious marks or injuries are recorded promptly, as such injuries in non-mobile babies are more likely to be non-accidental than similar marks on older children. Staff follow safeguarding procedures to ensure the safety and welfare of all babies in the setting.

Section 7 - Managing Children's Behaviour

'Providers must not give or threaten corporal punishment or any punishment which could negatively affect a child's well-being.'

(EYFS Framework for Group and School-Based Providers, 2025)

Any issues arising from children's behaviour are reported to parents or caregivers.

Children's behaviour is managed appropriately and in line with the settings Positive Behaviour Procedure, ensuring that all responses are consistent, fair and supportive of children's wellbeing and development.

7.1 How is bullying and discrimination tackled in the setting?

The setting does not accept bullying of any kind. Children are supported to understand mutual respect and the importance of being considerate of other people's feelings and views.

Children using the internet or digital devices in the setting are closely supervised and online access is only permitted under appropriate supervision. If a child is found to be experiencing cyberbullying, the setting will take steps to support the child and communicate with the parent or caregiver.

7.2 How much physical contact is there between staff and children?

Children may receive appropriate physical contact within the setting. Any physical contact will be suitable to the situation, the child's age and stage of development and their individual needs and preferences.

Physical contact may be necessary for the following reasons:

- **Comfort:** Physical contact is used to meet the emotional and physical needs of babies and young children and where appropriate, older children.
- **Personal Care and Hygiene:** This includes supporting children with personal care tasks they are unable to carry out independently, such as nappy changing, toileting, wiping noses, dressing and undressing, handwashing and attending to individual care or medical needs.
- **First aid:** Physical contact may be required to administer first aid, such as cleaning wounds, applying plasters or using ice packs.
- **Physical Intervention:** In some circumstances, physical intervention may be necessary to prevent a child from harming themselves or others, or causing serious damage. Any intervention will use the minimum force necessary and will be recorded in the setting's Physical Intervention Record. Parents and caregivers will be informed.
- **Friendships Between Children:** Appropriate physical contact between children, such as holding hands or hugging, is recognised as a natural part of development. Children are encouraged to respect personal boundaries, including seeking permission and respecting others' wishes.

Staff ensure that children are treated with dignity and respect at all times. Wherever possible, consent is sought or clear explanations are given before physical contact takes place, unless immediate action is required to ensure safety. Physical contact will never be used in a way that causes harm, distress or discomfort.

The setting will work in partnership with parents and caregivers and will take into account any preferences regarding physical contact where possible.

Section 8 - Information and Records

8.1 What data is kept by the setting and for how long?

The setting is required by law to collect and maintain certain information about children and their families. This may include, but is not limited to, a child's date of birth, home address, emergency contact details and information relating to health or allergies.

Additional information may be collected to support the provision of personalised care and to meet individual needs, such as cultural, religious or family background information.

The setting is registered with the Information Commissioner's Office (ICO) and complies with data protection legislation. All data is handled in accordance with confidentiality requirements, stored securely and retained only for as long as necessary in line with legal and regulatory requirements.

8.2 How are families' records kept confidential?

All information collected about children and their families is kept securely and treated as confidential. Records are stored safely, either in locked storage or on password-protected systems, and are only accessible to authorised members of staff.

Information will only be shared where necessary and in line with data protection and safeguarding requirements.

'Confidential information and records about staff and children must be held securely and only accessible and available to those who have a right or professional need to see them.'

(EYFS Framework for Group and School-Based Providers, 2025)

8.3 How is attendance monitored?

The setting is required to maintain an accurate daily record of attendance.

If a child does not arrive as expected, staff will contact the child's parent or caregiver to establish the reason for absence. Emergency contact details are also held and may be used if parents or caregivers are not contactable.

Where there are concerns about a child's or family's welfare, appropriate action will be taken, which may include requesting a police welfare check. If a child is absent for extended periods or there is a pattern of unexplained absence, this may be treated as safeguarding concern and managed in line with the setting's safeguarding procedures.

8.4 What records will be kept in the setting and which will be shared with parents and caregivers?

The setting maintains a range of records to support children's ongoing safety, health and wellbeing. Records relating to a child's health, safety or wellbeing are shared with parents and caregivers, at their request.

8.5 Will any information need to be reported to Ofsted?

The setting has a legal duty to notify Ofsted of any significant events that may affect the safety, health or welfare of children. Notifications will be made within the required timescales. Significant events include:

- serious accidents or incidents (as outlined in section 5)
- any incident of food poisoning affecting two or more children
- involvement with safeguarding partners or statutory agencies where the setting is subject to investigation
- loss or theft of a device containing children's personal data
- any incident where a person has been a victim of a crime on the premises, such as assault, harassment or vandalism
- any incidents or domestic abuse
- any incidents of self-harm or overdose
- any one-off or ongoing incidents on or around the premises that may affect children's safety or welfare, including violence, criminal or sexual exploitation, gang activity, county lines, grooming or child trafficking
- the disqualification of any person working on the premises
- any significant changes to health that may affect the ability of staff to safely care for children
- any incident where a child or children may have been at risk, for example:
    - involvement in a road traffic accident while transporting children;
    - a child leaving the setting unaccompanied or going missing for any period;
    - inadequate supervision (a child left unattended, for example);
    - an unauthorised person gaining access to the premises.

Section 9 - Useful Telephone Numbers

Hillingdon Hub Number: 01895 556006

The Stronger Families Hub is the new one stop shop for all Early Help AND Safeguarding referrals (one referral, one phone, one email)

01895 556006 strongerfamilieshub@hillingdon.gov.uk

LADO: Manager regarding allegations against members of staff

Rob Wratten: 01895 250975 rwratten@hillingdon.gov.uk Deputy (LADO) Hannah Ives, hives@hillingdon.gov.uk

Child Protection Officer and School Adviser: Hannah Ives 01895 250010, Mobile 07753431285 hives@hillingdon.gov.uk

Contact Details regarding radicalisation are to be referred to HUB in the first instance on 01895 556006

The local authority Prevent Lead: Fiona Gibbs, fgibbs@hillingdon.gov.uk

Local Police Force, 101, the non-emergency number

DfE dedicated telephone number for non-emergency advice: 020 7340 7264 counter-extremism@education.gsi.gov.uk

NSPCC Whistle blowing helpline: 0800 028 0285 help@nspcc.org.uk