



Guidelines for Safeguarding and Record Keeping

Promoting the welfare and safeguarding of all children

These guidelines have been put together based on the updated training advice provided by Wendy and the Early Years Team.

Training involves the evaluation of a number of serious case reviews which have highlighted the need for more efficient record keeping procedures.

Working Together to Safeguard Children (2013) states 'Safeguarding children - the action we take to promote the welfare of children and protect them from harm - is everyone's responsibility. Everyone who comes into contact with children and families has a role to play'.

Therefore we intend to improve our safeguarding record keeping in a number of ways.

1. A separate file for child protection records
2. Each child will have a Chronology form and child information form at the onset of any concerns
3. There is now a specific incident/concern form for child protection
4. A detailed form of action taken/contacts made will be completed

These forms will enable us to have an overview of any child therefore, building an holistic picture of events/concerns and making it easier to share with other professionals. Promoting the welfare of and safeguarding children is the responsibility of **every** member of staff. Ensuring all staff know when and how to record concerns for a child's welfare, however small or apparently insignificant is an essential part of the Designated Safeguarding Lead's role. Good record keeping is an important part of Whitchurch Pre-School's accountability to children and their families and will assist the DSL in meeting their key responsibility to respond appropriately to welfare concerns for children. Records should be factually accurate, relevant, up to date and auditable. They should support monitoring, risk-assessment and planning for children and enable informed and timely referrals to be made when necessary.

Incident/concern form

Safeguarding children is a whole setting responsibility. All staff have an important role to play in helping to identify welfare concerns and possible indicators of abuse or neglect at an early stage. For some children a "one off" serious incident or concern may occur and you will have no doubt that this must be immediately recorded and reported. Most often however, it is the accumulation of a number of small incidents, events or observations that provide the evidence of harm being caused to a child. It is vital therefore, that any concern you have for a child's welfare however small is recorded

and passed to the DSL. **All** concerns must be recorded on the appropriate form. If in any doubt, please ask.

What is a "welfare concern"?

Concerns may arise in one or more of the following areas:

- The child's behaviour
- The child has a physical injury
- The child makes a disclosure or allegation
- The child's physical presentation
- Information from or observation / behaviour of a parent/carer

What do I record?

Using the incident/concern form:

- The form must be dated, signed and the details are legible
- The incident/event/observation/concern is described clearly and concisely
- Use straightforward language and ensure that fact and opinion are differentiated.
- If recording a disclosure, the child's **own words** are recorded and any questions you may have asked are included
- Physical marks and injuries are recorded on a body map where appropriate
- Record any action you have taken

Taking action in response to an incident/concern form being completed by a member of staff

When an incident/concern form is completed, it must be checked by the DSL. The DSL is responsible for ensuring there is sufficient detail and the form has been dated and signed by the staff member who has reported the concern. If a body map has been completed or there are any other documents referred to in the record these must be attached where appropriate and also dated and signed.

The DSL must keep a record of the action taken in response to every incident/concern form that is completed. The level of detail of this record will clearly depend on the nature and seriousness of the concern but may include:

- Requests to staff for monitoring specific aspects of the child's presentation, behaviour, attendance etc
- Discussions and telephone calls (with colleagues, parents/carers and children and other agencies or services)
- Professional consultations

- Letters sent and received
- Referral forms

When and how to start safeguarding/child protection records

Once an incident/concern form has been completed and the DSL has made a record of the action taken, the forms will need to be stored in the Child Protection Folder (an alphabetically divided ring binder). **This is regardless of whether or not formal child protection procedures have been initiated.** The DSL is responsible for completing the Safeguarding Record form on the child which includes details of parents/carers/siblings this will enable key information to be accessed. This then forms the start of the file for the particular child. The child's general preschool file should be marked in some way to indicate there is a separate confidential file for the child - we use a coloured sticker (found in safeguarding folder). For some children this single record will be the only incident/concern we hold for them over their time in the preschool. For others, further information may crop up from a variety of sources over a period of time. If/when the incidents/concerns are such that a referral to Children's Services is made and they take over the case then an individual file for the child will be initiated.

If the incidents/concerns relate to more than one child from the same family at the preschool, a separate file for each child must be created. If minutes of child protection conferences are received in the preschool they should be photocopied for each file where appropriate.

Chronologies

A chronology form must also be completed by the DSL which is an overview of all incidents/concerns raised about the child.

The importance of understanding concerns for a child in the context of history, time-lines should never be underestimated. Chronologies are central to this process and must be completed by the DSL as concerns/the case progresses. In addition to aiding assessment, a chronology will act as an important record of action taken by the preschool and when attached to an Inter Agency Referral form can provide evidence for the reason for the referral.

A chronology must list specific and significant incidents/concerns and action taken in relation to the child and where appropriate their family, with a brief explanation and cross-reference to the relevant record in the child's file.

A chronology form must be stored at the front of the child's file along with the Safeguarding Record form where it can be quickly accessed and viewed. It must be kept up to date by the DSL.

The following records should be kept in a child's safeguarding file

- All incident/concern forms
- Safeguarding record form
- Chronology form
- Record of action taken: discussions, telephone calls and meetings with colleagues, other agencies/services, parents and children
- Professional consultations
- Letters received and sent
- Minutes of meetings (copies for each child as appropriate)
- Formal plans linked to the child

Recognising signs and symptoms of abuse: please refer to the attached sheets for further information on signs and indicators of abuse. Further information and flow charts will be found in the Safeguarding Policy and Procedure, a copy of which you will have received during your induction and subsequently when it is updated.

All staff are responsible for ensuring that they are aware of the procedures and forms mentioned in this guidance.

Please also refer to Dorset Safeguarding Children Board Threshold Tool.
<http://www.dorsetlscb.co.uk/site/advice-for-people-working-with-children/>

Further sources of support available Early Years Safeguarding Advice 01305 228425

Louise Dodds Early Years Safeguarding Standards team 01305 221122

Local Authority Designated Officer Patrick Crawford 01305 01305 228285