

SETTING LOGO

EYFS Safeguarding Audit for PVI and Group Providers

Name of Setting:	Ofsted Registration Number:	Setting email:		
Designated Safeguarding Lead (DSL):	Deputy Designated Safeguarding Lead (DDSL):	Setting Manager / Deputy Manager:	Owner (if applicable):	Committee Chair (if applicable):

This audit is based on the safeguarding and welfare requirements set out in section 3 of the [Early Years Foundation Stage \(EYFS\) framework](#). It will help you to assess the quality of your safeguarding practice and will help to ensure that gaps in safeguarding are identified and prompt action is taken to address these areas. This audit should be reviewed regularly and can be included as evidence for Ofsted. It is the responsibility of the owner / manager / management committee to ensure that all staff understand their safeguarding responsibilities and that arrangements for safeguarding children, comply with current guidance from government and the North Yorkshire Safeguarding Children Partnership (NYSCP).

Refer to statutory guidance documents: *Working together to safeguard children 2023, early years inspection toolkit, early years inspection operating guide for inspectors, early years inspection information, what to do if you're worried a child is being abused: guidance for practitioners, Prevent duty guidance for England and Wales 2023, Keeping children safe in education 2025 and NYSCP threshold guidance.*

PLEASE NOTE:

1. Advice and guidance, an action plan and safeguarding contacts can be found at the bottom of this document. Any areas identified in the 'not met' column, should be added to the action plan.

In line with DFE guidance, the Local Authority have the ability to withdraw or refuse entitlement funding, when the safeguarding standards at inspection are 'not met.'

Evidence: Settings will have a range of information and documents to use as evidence for each category within the audit. The following are examples:

Records: <ul style="list-style-type: none"> ✓ Training ✓ Individual child files ✓ Individual Child Protection files 	Key documents: <ul style="list-style-type: none"> ✓ Policies and procedures ✓ Setting Improvement Plan 	Other: <ul style="list-style-type: none"> ✓ Surveys undertaken with children, parents, staff ✓ Peer observation
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<ul style="list-style-type: none"> ✓ Staff induction ✓ Staff files including qualifications and references and supervision documents ✓ Parental responsibility and contact information ✓ Staff meeting minutes ✓ Management committee (or equivalent) meeting minutes ✓ Health and Safety fire and risk assessments ✓ Safeguarding monitoring checks – e.g. intimate care log, sleeping, environment checks (indoor and out), feeding records 	<ul style="list-style-type: none"> ✓ Information to parents (for example: prospectus, setting / parent Agreement) ✓ Website – policies, letters to parents, DFE guidance documents 	<ul style="list-style-type: none"> ✓ Local authority visits ✓ Ofsted inspection report ✓ Daily staffing structure ✓ Medical consent forms ✓ Accident records
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EYFS Safeguarding Audit 2025-2026

Introduction 3.1 – 3.3

Children learn best when they are healthy, safe, secure, when their individual needs are met, and when they have positive relationships with the people caring for them. This audit sets out the safeguarding and welfare requirements providers must meet. It is designed to help providers create a high-quality, welcoming, and safe setting where children can enjoy learning and grow in confidence. Providers must take all necessary steps to keep children safe and well.

The requirements in this audit explain what early years providers must do to:

- *Safeguard children.*
- *Ensure the people who have contact with children are suitable.*
- *Promote good health.*
- *Support and understand behaviour.*
- *Maintain records, policies, and procedures.*

Safeguarding Culture		
<i>See Early Years Inspection Toolkit (Ofsted – September 2025) Early years inspection toolkit</i>	Met	Not met
Does the provider promote an open and positive safeguarding culture that puts children’s interests first?		
Do leaders take an effective, whole-setting approach to safeguarding?		
Do providers ensure that children who need help and protection receive high-quality support at the right time from the right agency? <i>(See page 3 of the Toolkit for factors)</i>		
Do leaders encourage a culture of vigilance and recognising that safeguarding issues might occur in any setting at any time, and maintaining an attitude of ‘it could happen here?’		
<p>Are the following adhered to by the provider?</p> <ul style="list-style-type: none"> • They have established a culture in which staff, children, parents and others feel comfortable raising and discussing any concerns that relate to safeguarding children and feel confident that appropriate action will be taken. • They have ensured that safeguarding procedures and associated policies are clear, accessible, in line with local and national expectations and reflected in the setting’s practice. • They know and are assured that policies and procedures are understood, are applied and have a positive impact on children. • They have established purposeful and appropriate links with outside agencies to support the setting’s safeguarding procedures and practice. • They share information with the local authority and support the authority effectively with any statutory assessments in relation to children’s social care needs. • They work collaboratively with social workers and other professionals, as appropriate, to provide effective multi-agency planning and support for children who are known, or previously known, to children’s social care. 		
Safeguarding Policies & Procedures – (EYFS statutory framework September 2025)		
<p>3.4 Does the setting have a designated safeguarding lead (DSL) with responsibility for liaising with local statutory children’s service agencies and with local safeguarding (LSP). Does the DSL provide ongoing support, advice and guidance to other staff, and on any specific safeguarding issue as required.</p> <p>In addition to formal training, does the DSL undertake CPD opportunities to keep their knowledge and skills up to date e.g. attending the early years safeguarding learning event, accessing relevant documents / articles.</p> <p>Is there a deputy DSL at the setting?</p>		

Does the provider ensure staff actively seek and listen to the views and experiences of children, practitioners and parents and carers, and dealing promptly with any concerns?		
3.5 Does the setting have policies and procedures in line with the guidance and procedures to keep children safe and meet the EYFS requirements? Are the policies and procedures in line with the guidance and procedures of the relevant local safeguarding partners (LSP)		
<p>3.6 Do safeguarding policies include all the areas stated below? <i>(See section 3.6 in the EYFS framework.)</i></p> <ul style="list-style-type: none"> • The action to be taken when there are safeguarding concerns about a child. • The action to be taken in the event of an allegation being made against a member of staff. • How mobile phones, cameras, electronic devices, SMART technologies with imaging and sharing capabilities are used in the setting by staff and visitors / The use and storage of children’s images • Procedures to follow to check the suitability of new recruits. • Procedures in place to protect children online / Detail of how safeguarding training is delivered and how practitioners are supported to put this into practice. Providers may find it helpful to read 'Safeguarding children and protecting professionals in early years settings: online safety considerations.' • Refers to the Prevent statutory duty? (To prevent radicalisation and extremism) do all staff know the process on how to raise their concerns regarding the Prevent duty. Does the policy include procedures to be followed regarding concerns that an adult maybe at risk of radicalisation? <p>Does the provider have an up to date Prevent risk assessment? Prevent risk assessment for early years</p> <p>Are arrangements in place for making referrals to the local authority designated officer (LADO), in the event of an allegations been made against a member of staff. NYSCP- LADO contact details.</p> <p>Are there clear and accurate records held in regard to staff low-level concerns and allegations against staff?</p> <p>Are there appropriate measures and security controls in place to protect children online?</p>		
Whistleblowing		
3.7 Have providers put appropriate whistleblowing procedures in place for all staff (including students and volunteers) to raise concerns about poor or unsafe practice in the setting’s safeguarding provision? <i>(This must include when and how to report concerns and the process that will be followed after staff report concerns.)</i>		

<p>Can providers ensure staff are aware of the setting's whistleblowing procedures and ensure all staff feel able to raise concerns about poor or unsafe practice and know that such concerns will be taken seriously by the senior leadership team?</p> <ul style="list-style-type: none"> • NSPCC whistleblowing advice line is available. Staff can call 0800 0280285 or email help@nspcc.org.uk. • Ofsted provides guidance on how to make complaints about a provider: Complaints procedure - Ofsted - GOV.UK • General guidance on whistleblowing can be found via: Whistleblowing for employees: What is a whistleblower - GOV.UK • NYSCP- LADO contact details. <p>Are staff aware of what they should do if they have concerns about another staff member? (<i>Low-level concerns and allegations of concerns</i>)</p>		
<p>3.8 Where a staff member feels unable to raise an issue with their employer or feels that their genuine concerns are not being addressed, do they know other channels open to them? – see 3.8 in the EYFS framework for more details.</p>		
<p>Concerns about children's safety & welfare</p>		
<p>3.9 If providers have concerns about children's safety or welfare, do they immediately notify their local authority children's social care team, in line with local reporting procedures, and, in emergencies, the police?</p> <p>Do providers take into account the government's statutory guidance 'Working Together to Safeguard Children' and 'Prevent duty guidance for England and Wales'.</p> <p><i>(All schools are required to have regard to the government's statutory guidance 'Keeping Children Safe in Education', and other childcare providers may also find it helpful to read this guidance.)</i></p>		
<p>3.10 Is the setting aware that registered providers must inform Ofsted, or the early years childminder agency (CMA) with which a provider of early years childcare on domestic premises (CoDP) is registered, of any allegations of serious harm or abuse by anyone living, working, or looking after children at the premises?</p> <p><i>(This must happen whether the allegations of harm or abuse are alleged to have been committed on the premises or elsewhere, for example, on a visit.)</i></p> <p>Are registered providers also aware that they must also notify Ofsted/ their CMA of the action they have taken in response to the allegations? <i>(Ofsted/the CMA must be notified as soon as is reasonably practicable, but in any event within 14 days of the allegations being made. A registered provider who, without a reasonable excuse, fails to do this, commits an offence.)</i></p>		
<p>Child absences</p>		
<p>3.11 If a child is absent for a prolonged period of time without notification from a carer/parent, are staff aware of their duty to contact the child's parents and/or carers and alternative emergency contacts?</p>		

3.12 Does the provider have an attendance policy that they share with parents and/or carers? - see 3.12 in the EYFS framework for more details.		
Suitable People		
3.13 Are systems in place to ensure that staff and others who have regular contact with children, are suitable for their roles? (e.g. safer recruitment policies and procedures)		
3.14 Is the Provider aware that Ofsted, or the CMA with which a provider of CoDP is registered, is responsible for completing suitability checks of: The provider. <ul style="list-style-type: none"> • Every other person looking after children on domestic premises for whom the care is being provided. <i>(This includes students, who cannot be counted in the ratios until they have been deemed suitable.)</i> • Every other person living or working on any domestic premises from which the childcare is being provided, including requiring enhanced criminal records checks and barred list checks. 		
3.15 Has an enhanced DBS check, with barred list check as appropriate, been obtained for all individuals aged 16 and over who: <ul style="list-style-type: none"> • Work directly with children • Live on the premises; and/or • Work on the premises <i>(unless they do not work on the part of the premises where the childcare takes place, or do not work there at times when children are present)</i> 		
3.16 Has an additional criminal records check <i>(or checks, if more than one country)</i> been carried out for anyone who has lived or worked abroad?		
3.17 Have staff been told that they are expected to declare any convictions, cautions, court orders, reprimands and warnings <i>(except protected convictions and cautions)</i> that may affect their suitability to work with children? <i>(whether received before or during their employment at the setting)</i> <i>Note: only short-listed candidates should be asked to complete a self-declaration form – see this article for more information</i>		
3.18 Have providers recorded information about staff qualifications and the identity checks, vetting processes and references that have been completed <i>(including the criminal records check reference number, the date a check was obtained and details of who at the setting obtained it)?</i>		
3.19 Are providers aware that they are required to make a referral to the Disclosure and Barring Service if a member of staff is dismissed <i>(or would have been, had they not left the setting first)</i> because they have harmed a child or put a child at risk of harm?		

References		
<p>3.20 Have providers obtained a reference for any member of staff (<i>including students and volunteers</i>) before they are recruited?</p> <p>Providers should:</p> <ul style="list-style-type: none"> • not accept open references e.g. to whom it may concern. • not rely on applicants to obtain their reference. • ensure any references are from the applicant’s current employer, training provider or education setting and have been completed by a senior person with appropriate authority. • not accept references from a family member. • obtain verification of the individual’s most recent relevant period of employment where the applicant is not currently employed. • secure a reference from the relevant employer from the last time the applicant worked with children (if not currently working with children). If the applicant has never worked with children, then ensure a reference is from their current employer, training provider or education setting. • ensure electronic references originate from a legitimate source. • contact referees to clarify content where information is vague or insufficient information is provided. • compare the information on the application form with that in the reference and take up any discrepancies with the applicant. • establish the reason for the applicant leaving their current or most recent post, and ensure any concerns are resolved satisfactorily before appointment is confirmed. 		
<p>3.21 Is the provider aware that if asked to provide references for current or former employees, references should:</p> <ul style="list-style-type: none"> • be provided in a timely manner. • ensure the information confirms whether they are satisfied with the applicant’s suitability to work with children. • provide the facts (not opinions) of any substantiated safeguarding concerns/allegations that meet the harm threshold, as defined in the guidance and section 35(4) of the Safeguarding Vulnerable Groups Act 2006. • they should not include information about concerns/allegations which are unsubstantiated, unfounded, false, or malicious. 		
Disqualification		

3.22 Are procedures in place to ensure that anyone who is disqualified from working in childcare, is not employed to work at the setting?		
3.23 Is the registered provider aware that they must notify Ofsted, or the CMA with which a provider of CoDP is registered, of any significant event which is likely to affect the suitability of any person who is in regular contact with children on the premises where childcare is provided? <i>(The disqualification of an employee or a person living or working at domestic premises where childcare is provided could be an example of a significant event.)</i>		
<p>3.24 Is the registered provider aware that it must give Ofsted the following information about themselves or any person who lives or is employed in the same household as the registered provider?</p> <ul style="list-style-type: none"> • Details of any order, determination, conviction, or other ground for disqualification from registration under regulations made under section 75 of the Childcare Act 2006. • The date of the order, determination or conviction, or the date when the other ground for disqualification arose. • The body or court which made the order, determination or conviction, and the sentence (if any) imposed. • A certified copy of the relevant order (in relation to an order or conviction.) <p><i>(This information is given to Ofsted within 14 days of the date the provider became aware of the information or ought reasonably to have become aware of it if they had made reasonable enquiries.)</i></p>		
3.25 Is the provider aware, that they must provide this information (see 3.24) to Ofsted/the CMA as soon as reasonably practicable, but, in any event within 14 days of the date, the provider became aware of the information or should have reasonably become aware of it if they had made reasonable enquiries?		
3.26 Is the provider aware that if they become aware of relevant information that may lead to an employee or a person living or working at domestic premises where childcare is provided being disqualified, the provider must take appropriate action to ensure the safety of children?		
Staff taking medication / other substances		
<p>3.27 Are providers aware that staff members must not be under the influence of alcohol or any other substance which may affect their ability to care for children?</p> <p>The following must be adhered to:</p> <ul style="list-style-type: none"> • If a practitioner is taking medication which may affect their ability to care for children, they should seek medical advice. • Practitioners must only work directly with children if the medical advice received confirms that the medication is unlikely to impair that person's ability to look after children properly. • All medication on the premises must be stored securely, and out of reach of children, at all times. 		
Smoking & vaping		

<p>3.28 Are providers aware that they must not allow smoking in or on the premises when children are present or about to be present? The following must be adhered to:</p> <ul style="list-style-type: none"> Practitioners should not vape or use e-cigarettes when children are present. Providers should consider Public Health England advice on their use in public places and workplaces. 		
Qualifications, training, support and skills		
<p>3.29 Do providers follow their legal responsibilities under the Equality Act 2010 including the fair and equal treatment of practitioners regardless of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation?</p>		
Safeguarding training		
<p>3.30 Are providers aware that they must ensure that all practitioners are trained in line with the criteria set out in Annex C? Providers must ensure that practitioners are supported and confident to implement the setting's safeguarding policy and procedures on an ongoing basis. (Providers should read 'What to do if you're worried a child is being abused: Advice for practitioners'. Child abuse concerns: guide for practitioners - GOV.UK) Has the DSL undertaken appropriate training in child protection and safeguarding to fulfil their role and have they taken account of any advice from the NYSCP or local authority on appropriate training courses? (See Annex C criteria)</p>		
<p>3.31 Does the setting ensure the DSL provides support, advice and guidance to all practitioners on an ongoing basis, and on any specific safeguarding issue as required? (The DSL must attend a training course consistent with the criteria set out in Annex C.) Does the provider have a written record that all staff received induction training in child protection and their knowledge kept up to date? Does the provider have a staff behaviour policy (code of conduct) in place?</p>		
<p>3.32 Are providers aware that training must be renewed every two years? Providers may consider whether any staff need to undertake annual refresher training during any two-year period to help maintain basic skills and keep up to date with any changes to safeguarding procedures, or as a result of any safeguarding concerns that occur in the setting. Does the training include the Prevent duty? Prevent duty guidance: England and Wales (2023) - GOV.UK</p>		
Training and skills		
<p>3.33 Are providers aware that they must ensure that all staff receive induction training to help them understand their roles and responsibilities? All staff must receive induction training which covers:</p> <ul style="list-style-type: none"> Emergency evacuation procedures 		

<ul style="list-style-type: none"> • Safeguarding • Child protection • Health and safety issues 		
Supervision of staff		
<p>3.34 Are providers aware that supervision provides support, coaching and training for staff, promotes the interests of children, and fosters a culture of:</p> <ul style="list-style-type: none"> • Mutual support • Teamwork • Continuous improvement • Encouraging confidential discussion of sensitive issues <p><i>(Including any medical issues which may affect the individual's ability to work with children.)</i></p>		
<p>3.35 Are providers aware of the arrangements that must be in place for the supervision of staff working with children and families, which provides opportunities for them to:</p> <ul style="list-style-type: none"> • Discuss any issues – particularly concerning children's development or well-being, including child protection concerns. • Identify solutions to address issues as they arise. • Receive coaching to improve their personal effectiveness. 		
Paediatric first aid		
<p>3.36 Do providers ensure that at least 1 person with a current paediatric first aid (PFA) certificate is on the premises and available at all times children are present, and accompanies children on outings? <i>(The certificate must be for a full course consistent with the criteria set out in Annex A. PFA training must be renewed every three years and be relevant for people caring for young children and babies.)</i></p>		
<p>3.37 Do providers take into account the number of children, staff, and layout of premises to ensure that a paediatric first aider is able to respond to emergencies quickly?</p>		
<p>3.38 Do providers ensure all staff who obtained a level 2 and/or level 3 qualification since 30 June 2016 must obtain a PFA qualification within three months of starting work in order to be included in the required staff: child ratios at level 2 or level 3 in an early year setting?</p> <p>Do providers ensure all staff who have completed the experience-based route must obtain a PFA qualification before they can be included in the staff:child ratios at level 3? <i>(To continue to be included in the ratio requirement the certificate must be renewed every 3 years.)</i></p>		

3.39 Are providers aware that PFA certificates or a list of staff with a current certificate is on display or made available to parents/carers?		
English language skills		
<p>3.40 Are providers aware that they must ensure that staff have sufficient understanding and use of English to ensure the well-being of children in their care. For example, settings must be able to:</p> <ul style="list-style-type: none"> • Keep records in English. • Liaise with other agencies in English. • Summon emergency help. • Understand instructions. For example, about the safety of medicines or food hygiene. 		
Key person		
<p>3.41 Are providers aware that each child must be assigned a key person? <i>(Their role is to help ensure that every child's care is tailored to meet their individual needs, to help the child become familiar with the setting, offer a settled relationship for the child and build a relationship with their parents and/or carers. They should also help families engage with more specialist support if appropriate.)</i></p> <p>Does the provider seek the views of children and is the voice of the child heard in matters regarding their care? NYSCP – Voice of the child</p>		
Staff: child ratios		
3.42 Does the provider ensure that staffing arrangements meet the needs of all children and ensure their safety? Do providers ensure that children are adequately supervised, especially whilst eating, and decide how to use staff to ensure children's needs are met? Do providers inform parents and/or carers about how staff are organised, and, when relevant and practical, aim to involve them in these decisions?		
3.43 Does the provider ensure children must usually be within sight and hearing of staff and always within sight or hearing. See paragraph 3.63 which applies when children are eating.		
3.44 In settings on the early years register, does the provider ensure the manager of the setting holds an approved qualification at level 3 or above and at least half of all other staff must hold at least an approved level 2 qualification? <i>(An approved qualification is defined by the Department for Education as meeting the criteria set out in the Early Years Qualification Requirements and Standards Early years qualification requirements and standards - GOV.UK document.)</i> See 3.44 for more guidance.		
3.45 To count within the ratios at level 3, does the provider ensure staff hold an Early Years Educator qualification and those who have received approval to be included in the ratios at level 3 after attaining experience-based route status, also have achieved a suitable level 2 qualification in English?		

3.46 Does the provider ensure the ratio requirements in the next section (3.47) apply to the total number of staff available to work directly with children? (<i>Exceptionally, and where the quality of care and safety and security of children is maintained, changes to the ratios may be made. For settings providing overnight care, the relevant ratios continue to apply and at least one member of staff must be awake at all times.</i>)		
3.47 For children aged under two: <i>See 3.47 for more guidance.</i>		
3.48 For children aged two: <i>See 3.48 for more guidance.</i>		
3.49 For children aged three and over in registered early years provision, at any time where a person with Qualified Teacher Status, Early Years Professional Status, Early Years Teacher Status is working directly with children. <i>See 3.49 for more guidance.</i>		
3.50 For children aged three and over in registered early years provision where a person with Qualified Teacher Status, Early Years Professional Status, or Early Years Teacher Status is not working directly with children: <i>See 3.50 for more guidance.</i>		
3.51 For children aged three and over in independent schools (including in nursery classes in free schools and academies) where a person with Qualified Teacher Status, Early Years Professional Status, Early Years Teacher Status, an instructor, or another suitably qualified overseas trained teacher, is working directly with children: <i>See 3.51 for more guidance.</i>		
3.52 For children aged three and over in independent schools (including in nursery classes in free schools and academies) where there is no person with Qualified Teacher Status, Early Years Professional Status, Early Years Teacher Status no instructor, and not suitably qualified overseas trained teacher, working directly with children: <i>See 3.52 for more guidance.</i>		
3.53 For children aged three and over in maintained nursery schools and nursery classes in maintained schools: <i>See 3.53 for more guidance.</i>		
3.54 Reception classes in maintained schools and academies are subject to infant class size legislation, which is limited to 30 pupils per school teacher (subject to permitted exceptions) while an ordinary teaching session is conducted. <i>See 3.54 for more guidance.</i>		
3.55 Some schools may choose to mix their reception classes with groups of younger children (for example, nursery pupils, non-pupils, or younger children from a registered provider). <i>See 3.55 for more guidance.</i>		
3.56 Providers must not include anyone aged under 17 in ratios, except apprentices who may be included in ratios from the age of 16. Providers must not allow anyone aged under 17 to care for children unsupervised at any time. <i>See 3.56 for more guidance.</i>		
<i>Before / after school care and holiday provision</i>		
3.57 Do providers ensure that where the provision is solely before/after school care or holiday provision for children who normally attend reception class (or older) during the school day, there must be sufficient staff as for a class of 30 children?		

<p>Do providers determine how many staff are needed to ensure the safety and welfare of children, bearing in mind the type(s) of activity and the age and needs of the children?</p> <p>Do providers determine what qualifications, if any, the manager and/or staff should have? <i>See details on page 8 in the EYFS statutory framework EYFS statutory framework for group and school-based providers for the learning and development requirements for providers offering care exclusively before/after school or during the school holidays.</i></p>		
Health: Medicines		
<p>3.58 Does the provider promote good health, including oral health of all children in the setting?</p>		
<p>3.59 Does the provider have a procedure in place for dealing with children who are ill or infectious, which is shared with parents and/or carers?</p> <p>The procedure must include:</p> <ul style="list-style-type: none"> • Action to take if a child becomes ill in the setting. • The necessary steps to prevent the spread of infection. • Health advice from the Health Protection guidance on managing infection: Health protection in children and young people settings 		
<p>3.60 Does the provider have a policy and procedure in place for administering medicines, including systems for obtaining information about a child's needs for medicines, and for keeping this information up to date?</p> <p>The policy must include:</p> <ul style="list-style-type: none"> • Details of how prescription medicines should only be administered where they have been prescribed for a child by a doctor, dentist, nurse or pharmacist. • How medicines containing aspirin will only be given if prescribed by a doctor. • How Staff will complete training where administering medication requires medical or technical knowledge. 		
<p>3.61 Medicines (both prescription and non-prescription): Does the provider ensure that the following is adhered to:</p> <ul style="list-style-type: none"> • Medication will only be administered where written permission for that particular medicine has been obtained from the child's parent and/or carers. • Written records will be completed each time a medicine (both prescription and non-prescription) is administered • Two staff will administer / witness medication being administered and record and sign records. • Parents and/or carers are informed on the same day that the medicine has been administered, or as soon as reasonably practicable. • British Medical Association (BMA) advice and guidance: Prescribing over-the-counter medicines in nurseries and schools. 		

Health: Food and drink		
<p>3.62 Where children are provided with meals, snacks and drinks, does the provider ensure these are healthy, balanced and nutritious?</p> <p>Are the following requirements adhered to:</p> <ul style="list-style-type: none"> • The provider will have regard to the EYFS nutrition guidance Early Years Foundation Stage nutrition guidance. • The setting will have a food and nutrition policy to share the settings approach to food provision with parent and/or carers. • Fresh drinking water will always be available and accessible to children. 		
Health: Safer eating		
<p>3.63 Does the provider ensure whilst children are eating that there is always a member of staff in the room with a valid paediatric first aid (PFA) certificate, as specified within Annex A of the EYFS statutory guidance?</p>		
<p>3.64 Obtaining and sharing information: Does the provider obtain information about special dietary requirements, preferences, food allergies and intolerances that the child has, and any special health requirements before a child is admitted to the setting?</p> <p>Does the provider adhere to the following requirements:</p> <ul style="list-style-type: none"> • The above information is shared with all staff involved in the preparing and handling of food. • At each mealtime and snack time it is clear about who is responsible for checking that the food provided meets all the requirements for each child. 		
<p>3.65 Allergies and intolerances: Does the provider ensure?</p> <ul style="list-style-type: none"> • Ongoing discussions with parents and/or carers and, where appropriate, health professionals to develop allergy action plans for managing any known allergies and intolerances. • Allergy and intolerance information and actions plans are kept up to date and shared with all staff. • The British Society for Allergy and Clinical Immunology (BSACI) allergy action plan document is used BSACI Allergy Action Plan. • That all staff are aware of the symptoms and treatments for allergies and anaphylaxis, the differences between allergies and intolerances and that children can develop allergies at any time, especially during the introduction of solid foods which is sometimes called complementary feeding or weaning. • That the NHS advice on food allergies: Food allergy - Food allergy - NHS and treatment of anaphylaxis Anaphylaxis - NHS is followed. 		
<p>3.66 Introducing solid foods: Does the provider?</p>		

<ul style="list-style-type: none"> • Have ongoing discussions with parents and/or carers about the stage their child is at in regard to introducing solid foods, including to understand the textures the child is familiar with. • Ensure assumptions are not made based on the child's age when introducing solid foods. • Prepare food in a suitable way for each child's individual developmental needs, working with parents and/or carers to help children move on to the next stage at a pace right for the child. • Ensure staff refer to the NHS weaning guidance Weaning - Best Start in Life - NHS. 		
<p>3.67 Preventing choking: The provider must prepare food in a way to prevent choking. Does the provider:</p> <ul style="list-style-type: none"> • Refer to the DfE food safety guidance for young children Help for early years providers : Food safety including advice on food and drink to avoid, how to reduce the risk of choking and links to other useful resources for early year providers. Preparing Food Safely for Young Children video • Ensure all staff involved in the preparing of food understand the way to prepare food to prevent choking. • Display the Food Safety Agency early years choking hazards poster in the setting and share with all staff and parent/and or carers. Food safety advice on choking hazards in settings - Foundation Years. • Have documentation to evidence staff food safety training (briefings / webinars). 		
<p>3.68 Safe and appropriate arrangements: Does the provider ensure that babies and young children are seated safely in a highchair or appropriately sized low chair while eating and where possible in a designated eating space where distractions are minimised?</p>		
<p>3.69 Eating arrangements: Does the provider ensure that the following arrangements are in place when children are eating?</p> <ul style="list-style-type: none"> • Children must always be within the sight and hearing of a member of staff whilst eating. • Staff aware that choking can be completely silent and the importance for staff being alert to when a child may be starting to choke. • Where possible, providers / staff 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. • Whilst children are eating, there is at least one staff member in the room with a valid PFA certificate. 		
<p>3.70 Choking - When a child experiences a choking incident that requires intervention: Does the provider?</p> <ul style="list-style-type: none"> • Record details of where and how the child choked and ensure parents and/or carers are made aware. • Reviewed record periodically to identify if there are trends or common features of incidents that could be addressed to reduce the risk of choking. • Put in place appropriate action to address any identified concerns. 		

Health: Food and drink facilities		
<p>3.71 Does the provider ensure an area which is adequately equipped to provide healthy meals, snacks and drinks for children?</p> <p>The provider must:</p> <ul style="list-style-type: none"> • Provide suitable facilities for the hygienic preparation of food for children, if necessary, including suitable sterilisation equipment for babies' food. • Be confident that those responsible for preparing and handling food are competent to do so. • Ensure all staff involved in preparing and handling food must receive training in food hygiene and evidence is held in training records. 		
Food poisoning		
<p>3.72 Is the provider aware that they must notify Ofsted, or the CMA of any food poisoning affecting two or more children cared for on the premises?</p> <p>Requirement: This must be done as soon as is reasonably practicable, but, in any event, within 14 days of the incident. A registered provider who, without reasonable excuse, does not meet this requirement commits an offence.</p>		
Supporting and understanding behaviour		
<p>3.73 Does the provider ensure that staff support, understand and manage children's behaviour in an appropriate way?</p>		
<p>3.74 Physical Intervention: Is the provider aware they must:</p> <ul style="list-style-type: none"> • Not give or threaten corporal punishment or any punishment which could negatively affect a child's well-being. • Take reasonable steps to ensure that corporal punishment is not given by anyone who is caring for or is in regular contact with a child, or by anyone living or working in the premises where care is provided. Any early years provider who does not meet these requirements commits an offence. • A person will not be considered to have used corporal punishment (and therefore will not have committed an offence) if physical intervention was taken to avert immediate danger of personal injury to any person (including the child) or to manage a child's behaviour if absolutely necessary. 		
<p>3.75 Physical Intervention: Does the provider keep a record of any occasion where physical intervention is used, and are parents and/or carers informed on the same day, or as soon as reasonably practicable?</p>		
Special educational needs / Inclusion		
<p>3.76 Does the provider have arrangements in place to support children with Special Educational Needs and Disabilities (SEND)?</p> <p>The provider must:</p>		

<ul style="list-style-type: none"> • Identify a Special Educational Needs Co-ordinator (SENCO) • Have regard to the 0-25 SEND Code of Practice (Providers who are funded by the local authority to deliver early education places) Other providers to familiarise themselves with the early years section of the 0-25 SEND Code of Practice. • Adhere to the Equality Act 2010, including the duty to make reasonable adjustments for those with disabilities. 		
<p>Do leaders and practitioners: (See Ofsted Toolkit / Inclusion section Early years inspection toolkit)</p> <ul style="list-style-type: none"> • Have high expectations for all children, including disadvantaged children, those with SEND, those who are known (or previously known) to children’s social care, and those who may face other barriers to their learning and/or well-being. • Embed a culture in which the early and accurate assessment of children’s needs is prioritised. • Reduce barriers to children’s learning and/or well-being to support their development, involving specialists when necessary. • Put in place an EYPP strategy that is well thought through and is based on evidence of what works well to support the achievement and well-being of eligible children. • Work closely and effectively with children, parents, professionals and staff and ensuring that children’s and parents’ views and aspirations are included in decision-making about support for children. 		
<i>Safety and suitability of premises, environment and equipment: Accident or injury</i>		
<p>3.77 Accident or injury: Does the provider ensure that accident and injury arrangements and procedures are in place? The provider must:</p> <ul style="list-style-type: none"> • Ensure a first aid box with appropriate items for use on children is always accessible. • Keep written record of accidents or injuries and first aid treatment. • Inform parents and/or carers of any accident or injury. • Review accident records to identify any trends or patterns and take action as required 		
<p>3.78 Accident or injury: Is the provider aware that that must notify Ofsted, or the CMA, of any serious accident, illness, or injury to, or death of, any child while in their care, and of the action taken?</p> <p>This must be done as soon as is reasonably practicable, but in any event, within 14 days of the incident occurring. A registered provider who, without reasonable excuse, does not meet this requirement commits an offence.</p> <p>Child Death Review Process: Is the provider aware that they must notify the local child protection agencies of any serious accident or injury to, or the death of, any child while in their care, and must act on any advice from those agencies? NYSCP Child Death Review Process (CDRP)</p>		

Safety of premises		
3.79 Does the provider ensure that their premises, including overall floor space and outdoor spaces, are fit for purpose and suitable for the age of children cared for and the activities provided on the premises? Does the Provider comply with requirements of health and safety legislation, including fire safety and hygiene requirements?		
3.80 Does the provider take reasonable steps to ensure the safety of children, staff, and others on the premises in the case of fire or any other emergency? Providers must have: <ul style="list-style-type: none"> • An emergency evacuation procedure. • An invacuation and lockdown procedure • Appropriate fire detection and control equipment (for example, fire alarms, smoke detectors, fire blankets and/or fire extinguishers) which is in working order. • Fire exits must be clearly identifiable, and fire doors free of obstruction and easily opened from the inside. Does the provider have awareness of Martyn’s Law, The Terrorism (Protection of Premises) Act 2025? How Martyn’s Law will affect education settings - GOV.UK DfE guidance and example procedures Protective security and preparedness for education settings - GOV.UK		
Indoor space requirements		
3.81 Does the provider ensure that the premises and equipment are organised in a way that meets the needs of children? Providers must ensure the indoor space requirements are adhered to: <ul style="list-style-type: none"> • Children under two: 3.5m² per child • Two-year-olds: 2.5m² per child • Children aged three to five years: 2.3m² per child 		
3.82 Is the provider aware where the space standards are applied, providers cannot increase the number of children on roll because they additionally use an outside area? Forest and other exclusively outdoor provision (where children are outside all or almost all of the time) is not required to meet the space standards above as long as children’s needs can be met. For this kind of provision, indoor space requirements can be used as a guide for the minimum area needed.		
Outdoor access		
3.83 Does the provider provide access to an outdoor play area? If that is not possible/ Does the provider ensure that outdoor activities are planned and taken on a daily basis (unless circumstances make this inappropriate, for example unsafe weather conditions)?		

<p>Does the provider have a clear guidance in place to ensure children remain safe from the harmful effects of exposure to sun and extreme weather?</p> <p>Are there measures in place to ensure that children remain safe and there is appropriate supervision during free flow play and outdoor play?</p> <p>Is the provider aware that they must follow their legal responsibilities under the Equality Act 2010 (for example, the provisions on reasonable adjustments)?</p>		
<i>Sleeping arrangements</i>		
<p>3.84 Does the provider ensure safe sleeping arrangements?</p> <p>The provider must ensure:</p> <ul style="list-style-type: none"> • Sleeping children are frequently checked to ensure that they are safe. • Cots and bedding are in good condition and suited to the age of the child and babies are placed down to sleep in line with the latest government safety guidance. Sudden infant death syndrome (SIDS) - NHS • Practitioners have read NHS advice on safety of sleeping babies: Sudden infant death syndrome (SIDS) - NHS 		
<i>Baby Room</i>		
<p>3.85 Does the provider ensure suitable provision for children under the age of two?</p> <p>The provider must ensure:</p> <ul style="list-style-type: none"> • A separate baby room for children under the age of two. • Children under 2 in the baby room have contact with older children and are moved into the older age group when appropriate. 		
<i>Toilets and Intimate hygiene</i>		
<p>3.86 Does the provider ensure adequate toileting and intimate hygiene arrangements?</p> <p>The provider must ensure that:</p> <ul style="list-style-type: none"> • There are adequate number of toilets and hand basins available – there should usually be separate toilet facilities for adults. • There are suitable hygienic changing facilities for changing any children who are in nappies. • Children’s privacy is considered and balanced with safeguarding and support needs when changing nappies and toileting. • There is an adequate supply of clean bedding, towels, spare clothes, and any other necessary items. 		
<i>Organising premises for confidentiality and safeguarding</i>		
<p>3.86 Does the provider ensure confidentiality and safeguarding?</p> <p>The provider must ensure:</p>		

<ul style="list-style-type: none"> • There is an area for staff to take breaks away from areas being used by children. • Children are only released into the care of individuals of whom the parent has explicitly notified the provider. • Children do not leave the premises unsupervised. • They take all reasonable steps to prevent unauthorised persons entering the premises and have an agreed procedure for checking the identity of visitors / visitors to sign in and out. • They consider what additional measures are necessary when children stay overnight. • There are robust procedures in place to ensure the provider is registering arrival and departure times of children within the day. 		
Insurance		
3.88 Does the provider have appropriate insurance (e.g. public liability insurance) to cover all premises from which they provide childcare?		
Safety of outings		
3.89 Does the provider assess potential risks or hazards for the children and identify the steps to be taken to remove, minimise and manage those risks and hazards during outings? Does the risk assessment include consideration of staff to child ratios?		
3.90 Vehicles used to transport children (if applicable). Are the vehicles and driver(s) of those vehicles, adequately insured?		
Risk assessments		
3.91 Does the providers ensure that they take all reasonable steps to ensure staff and children in their care are not exposed to risks and must be able to demonstrate how they are managing risks? Does the provider have written risk assessments in relation to specific issues, to inform staff practice, and to demonstrate how they are managing risks if asked by parents and/or carers or inspectors? Do the risk assessments identify aspects of the environment that need to be checked on a regular basis, when and by whom those aspects will be checked, and how the risk will be removed or minimised?		
Information and record keeping		
3.92 Maintaining and sharing records: Does the provider maintain records, obtain and share relevant information (with parents and carers, other professionals working with the child, the police, social services and Ofsted or their CMA, as appropriate)? Information sharing advice for safeguarding practitioners - GOV.UK		

<p>Does the provider ensure a regular, two-way flow of information between the school and parents and/or carers, (and between other providers, if a child is attending more than one setting)?</p> <p>If requested does the provider incorporate parents' and/or carers' comments into children's records?</p> <p>Does the provider ensure child protection records passed to other providers when a child moves to a new setting or school? Are leaders and practitioners receptive to challenge and reflect on their own practice so that the impact of safeguarding policies, systems and processes is kept under continual review?</p>		
<p>3.93 Holding records: Is the provider aware that records must be easily accessible and available (these may be kept securely off the premises)?</p> <p>Does the provider ensure that confidential information and records about staff and children is held securely and only accessible and available to those who have a right or professional need to see them?</p> <p>Is the provider aware of their responsibilities under the Data Protection legislation and, where relevant, the Freedom of Information Act 2000? Data protection: The UK's data protection legislation - GOV.UK</p> <p>Does the provider support staff to record and report safeguarding and child protection concerns / incidents in a factual, timely and accurate manner? Does the DSL / DDSL monitor and track these concerns on a regular basis and refer to / take advice from external agencies?</p>		
<p>3.94 Privacy: Does the provider ensure that all staff understand the need to protect the privacy of the children in their care, as well the legal requirements that exist to ensure that information relating to the child is handled in a way that ensures confidentiality?</p> <p>Does the provider give parents and/or carers access to all records about their child, provided that no relevant exemptions apply to their disclosure under the Data Protection Act.?</p>		
<p>3.95 Retention of records: Is the provider aware that records relating to individual children are retained for a reasonable period of time after they have left the provision?</p>		
<p>Information about the child</p>		
<p>3.96 Does the provider record the following information for each child in their care?</p> <ul style="list-style-type: none"> • Full name 		

<ul style="list-style-type: none"> • Date of birth • Name and address of every parent and/or carer who is known to the provider. • Information about any other person who has parental responsibility for the child • Which parent(s) or carer(s) the child normally lives with • Emergency contact details for parents and/or carers Where possible, settings should hold more than 2 emergency contact numbers for each child. <p>Does the provider have written consent from parents, for using or displaying images of children within the building, online or within publicity materials?</p>		
Information for parents and carers:		
<p>3.97 Does the provider share the following information with parents and/or carers:</p> <ul style="list-style-type: none"> • How the EYFS is being delivered in the setting, and how parents and/or carers can access more information. • The range and type of activities and experiences provided for children, the daily routines of the setting, and how parents and carers can share learning at home. • How the setting supports children with special educational needs and disabilities. • Food and drinks provided for children. • Details of the provider's policies and procedures - making copies available on request. This includes the procedure to be followed in the event of a parent and/or carer failing to collect a child at the appointed time, or in the event of a child going missing at, or away from, the setting. • How staffing in the setting is organised. • The name of their child's key person and their role. • A telephone number for parents and/or carers to contact the provider in an emergency. 		
Complaints		
<p>3.98 Does the provider have a written procedure for dealing with concerns and complaints from parents and/or carers and keep a written record of any complaints, and their outcome?</p> <p>All providers must:</p> <ul style="list-style-type: none"> • Investigate written complaints relating to how they are fulfilling the EYFS requirements. • Notify the person who made the complaint of the outcome of the investigation within 28 days of having received the complaint. • Make available to Ofsted a record of complaints, or the early years childminder agency (CMA) with which a provider of childcare on domestic premises (CoDP) is registered, on request. 		

3.99 Does the provider make available to parents and/or carers the details about how to contact Ofsted, or the CMA with which a provider of CoDP is registered, if they believe the provider is not meeting the EYFS requirements?		
<i>Inspections and quality assurance visits</i>		
3.100 Is the provider aware of the following inspections and quality assurance visits requirements? The provider must: <ul style="list-style-type: none"> • Notify parents and/or carers of an inspection by Ofsted or a quality assurance visit by their CMA. • After an inspection by Ofsted or a quality assurance visit by their CMA, they must supply a copy of the report to parents and/or carers of children attending on a regular basis. 		
<i>Information about the provider</i>		
3.101 Does the provider hold the following documentation? <ul style="list-style-type: none"> • Name, home address and telephone number of the provider and any other person living or employed on the premises. • Name, home address and telephone number of anyone else who will regularly be in unsupervised contact with the children attending the early years provision. • A daily record of the names of the children being cared for on the premises, their hours of attendance and the names of each child's key person. • Their certificate of registration (which must be displayed at the setting and shown to parents and/or carers on request). 		
<i>Changes that must be notified to Ofsted</i>		
3.102 Is the provider aware of the changes that you must notify Ofsted or the or CMA of? Changes that providers must notify Ofsted or their CMA of: <ul style="list-style-type: none"> • Any change to the address of the premises (and must obtain prior approval to operate from those premises where appropriate). • Any change to the premises which may affect the space available to children and the quality of childcare available to them. • Any change to the name or address of the provider, or the provider's other contact information. • Any change to the person who is managing the early years provision. • Any proposal to change the hours during which childcare is to be provided which will entail the provision of overnight care. • Any significant event which is likely to affect the suitability of the early years provider to look after children. 		

<ul style="list-style-type: none"> • Any significant event which is likely to affect the suitability of any person who cares for/is in regular contact with children on the premises. • Where the early years provision is provided by a company, any change in the name or registered number of the company. • Where the early years provision is provided by a charity, any change in the name or registration number of the charity. • Where the childcare is provided by a partnership, body corporate or unincorporated association, any change to the “nominated individual.” • Where the childcare is provided by a partnership, body corporate or unincorporated association whose sole or main purpose is the provision of childcare, any change to the individuals who are partners in, or a director, secretary or other officer or members of its governing body. 		
<p>3.103 Is the provider aware of the requirement to notify Ofsted about a change of person except for managers, as specified in paragraph 3.102 above, providers must give Ofsted the new person's name, any former names or aliases, date of birth, and home address. If there is a change of manager, providers must notify Ofsted that a new manager has been appointed. Where it is reasonably practical to do so, this must be done in advance of the change happening. In other cases, this must be made as soon as is reasonably practical but, in any event, within 14 days. A registered provider who, without reasonable excuse, fails to comply with these requirements commits an offence.</p>		
<p>3.104 Is the provider aware that where providers of early years childcare on domestic premises (CoDP) are registered with an early years childminder agency (CMA) the above notifications should be given to their CMA, not Ofsted.</p>		
<p>Other legal duties</p>		
<p>3.105 Do providers cover all their other legal obligations alongside the EYFS requirements?</p> <p>Other duties on providers include: Employment laws.</p> <ul style="list-style-type: none"> • Anti-discriminatory legislation. • Health and safety legislation. • Data collection regulations • Duty of care. 		
<p>EYFS Annex C - Criteria for effective safeguarding training</p>		
<p>Does the provider ensure that all staff have completed safeguarding training in line with the EYFS Annex C – Criteria for effective safeguarding training? Criteria for effective safeguarding training:</p>		

<p>C1 Training is designed for staff caring for 0-5 year olds and is appropriate to the age of the children being cared for.</p> <p>C2 The safeguarding training for all practitioners must cover the following areas:</p> <ul style="list-style-type: none"> • What is meant by the term safeguarding. • The main categories of abuse, harm and neglect. • The factors, situation and actions that could lead or contribute to abuse, harm or neglect. • How to work in ways that safeguard children from abuse, harm and neglect. • How to identify signs of possible abuse, harm and neglect at the earliest opportunity. <p>These may include:</p> <ul style="list-style-type: none"> ✓ Significant changes in children’s behaviour ✓ A decline in children’s general well-being. ✓ Unexplained bruising, marks or signs of possible abuse or neglect. ✓ Concerning comments or behaviour from children. ✓ Inappropriate behaviour from practitioners, or any other person working with the children. This could include inappropriate sexual comments; excessive one-to-one attention beyond what is required through their role; or inappropriate sharing of images. ✓ Any reasons to suspect neglect or abuse outside the setting, for example in the child’s home or that a child may experience emotional abuse or physical abuse because of witnessing domestic abuse or coercive control or that a girl may have been subjected to (or is at risk of) female genital mutilation. • How to respond, record and effectively refer concerns or allegations related to safeguarding in a timely and appropriate way. • The setting’s safeguarding policy and procedures. • Legislation, national policies, codes of conduct and professional practice in relation to safeguarding. • Roles and responsibilities of practitioners and other relevant professionals involved in safeguarding. 		
<p>C3 Training for the designated safeguarding lead (DSL).</p> <p>Does the provider take account of any advice from the local safeguarding partners or local authority on appropriate training courses?</p> <p>In addition to the areas set out in paragraph 2, training for the DSL must cover the elements listed below:</p> <p>The training for DSL must cover the elements listed below:</p> <ul style="list-style-type: none"> • How to build a safe organisational culture. • How to ensure safe recruitment. • How to develop and implement safeguarding policies and procedures. • If applicable, how to support and work with other practitioners to safeguard children. 		

<ul style="list-style-type: none"> • Local child protection procedures and how to liaise with local statutory children's services agencies and with the local safeguarding partners to safeguard children. • How to refer and escalate concerns (including as described at paragraph 3.9 of the EYFS). • How to manage and monitor allegations of abuse against other staff. • How to ensure internet safety. 		
<p>Useful Information / Links: NYSCP – Worried about a child NYSCP - LADO NYSCP - YouTube NYES School Improvement - Safeguarding Team NYES Info Home - Dingley's Promise Help for early years providers: Health and wellbeing</p>		

SAFEGUARDING ACTION PLAN <i>All areas identified as 'not met' to be added to this plan.</i>	
Name of provider:	
Date safeguarding audit completed:	
Date action plan completed:	

Action	By whom?	Target completion date	Achieved and evidence

KEY REFERENCE MATERIALS

[Early years foundation stage statutory framework for childminders](#)
[EYFS statutory framework for group and school-based providers](#)

KEY ROLES AND CONTACTS

MAST – Multi Agency Screening Team

Worried About a Child? Make a Referral

NYC MAST are based at County Hall in Northallerton. MAST professionals access their own agency’s information about a child and family to support shared decision making to improve outcomes for children, where statutory intervention is required or where alternative services may be needed.

NYC MAST consist of:

- Social Work Team Manager
- Social Work Practice Supervisor
- Early Help Casework Practitioner
- Social Worker
- Business support
- North Yorkshire Police; detective sergeants, detective constables, intelligence management officer and administrator.
- Harrogate District Foundation Trust (HDFT) Specialist Nurse Child Protection.

Where there are significant immediate concerns about the safety of a child, contact the police on 999.

If you believe the situation is urgent but does not require the police, call **0300 131 2 131** Multi Agency Screening Team (MAST) - When prompted, say “children’s social care”. One of the advisors will be happy to support you.

Once information is shared the universal referral form must be submitted to social.care@northyorks.gov.uk

Out of Hours (Monday – Friday 9am-5pm) call 0300 131 2 131. to speak to the Emergency Duty Team.

Professional’s Consultation Line 01609 535070 is available between 10am and 4pm.

The Consultation Line should be used when you have concerns about a child safeguarding situation and unsure how to proceed on the next steps.

The concerns should be of a higher threshold than of what can be supported by Early Help. [NYSCP](#)

Early Help – Early support and interventions for families

Early Help Consultants are based across North Yorkshire

Early Help Consultants role is to offer support, advice, and guidance on Early Help for children and their families.

Early Help Consultants

- Early Help East (Scarborough, Whitby, Ryedale): 01609 534852
- Early Help West (Harrogate, Craven, Knaresborough, Ripon): 01609 534842
- Early Help Central (Hambleton, Richmondshire, Selby): 01609 534829

<https://www.safeguardingchildren.co.uk/professionals/early-help/>

[North Yorkshire Children & Families Service - Early Help Resources | NYES Info](#)

LADO – Local Authority Designated Officer

Duty Local Authority Designated Officer – LADO.

Advice in relation to managing an allegation against staff member or a volunteer who works in North Yorkshire with children.

lado@northyorks.gov.uk or **01609 798005** within office hours

LADO Notification Form and Guide - [NYSCP](#)

NYSCP - North Yorkshire Safeguarding Children Partnership

[NYSCP \(safeguardingchildren.co.uk\)](http://safeguardingchildren.co.uk)

[NYSCP safeguarding procedures](#)

[DSL Network meetings](#)

North Yorkshire Families Information Service

[Families Information Service | North Yorkshire Council](#)

fis.information@northyorks.gov.uk

North Yorkshire Safeguarding Advisers

Kellee Osborne Kellee.osborne@northyorkshire.gov.uk and Joanna Conway Joanna.conway@northyorks.gov.uk

Safeguarding Training

[NYES School Improvement - Safeguarding Team | NYES Info](#)

[Training for early years settings | NSPCC Learning](#)