



SAFEGUARDING POLICY

1. STATEMENT OF INTENT

THIS POLICY APPLIES TO ALL STAFF, STUDENTS AND VOLUNTEERS WORKING AT GRASSROOTS DAY NURSERY.

Grassroots Day Nursery fully recognises the legal responsibility it has under the Children's Act (1989 and 2004) to have arrangements in place to safeguard and promote the welfare of children. Grassroots Day Nursery Safeguarding Children Policies and Procedures comply with the MASH Team (Multi Agency Support Team)

Everyone working at Grassroots Day Nursery shares an objective to help keep children safe by contributing to:

- Providing a safe environment for children to learn and develop in the setting
- Identifying children who are suffering or are likely to suffer significant harm and taking appropriate action with the aim of making sure that they are kept safe both at home and in the setting

2. GUIDANCE SUPPORTING THIS POLICY

- Keeping Children Safe in Education- July 2015
- Working together to safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children 2015
- The Children's Act 1989 and 2004
- MASH
- Local Child Protection Procedures
- What to do if you're worried a child is being abused 2015
- Every Child Matters Framework

3. NAMED PERSONNEL

Grassroots Day Nursery will have a nominated person within the setting who is responsible for any Safeguarding Children issues. The setting will also nominate a deputy Safeguarding Children officer. These officers will have attended up-to-date Safeguarding Children courses and will also have attended the Designated Person course. The Safeguarding Children Officers are:

Designated Safeguarding Officer: Gaynor Dicks

Deputy Designated Safeguarding Officer: Kimberley How

Every member of staff will know the name of the Designated Person responsible for Safeguarding Children and their role.

The role of the DSO is to:

- Provide support, advice and guidance to all staff members on all matters relating to Safeguarding on an ongoing basis and any specific safeguarding issues as required
- Keep up-to-date with Local MASH Procedures
- Ensure that there is no delay in the passing on of information

- Co-ordinate the management of any suspected cases of abuse and/or allegations
- Monitor the progress of any child/young person about whom concerns have been expressed
- Ensure that all staff members are aware of the possible signs and symptoms of abuse
- Ensure that staff members are aware of the correct procedures to follow in suspected cases of abuse
- Ensure that staff members are aware of the correct procedures to follow in suspected or possible cases of FGM
- Support staff members throughout any suspected cases of abuse
- Liaise with local statutory children's services agencies i.e. Children's Services department, the Police and Ofsted as appropriate
- Ensure the Safeguarding Policy is updated and reviewed annually
- Support the recruitment of staff and volunteers
- Ensure all new staff and volunteers have a proper induction to the Safeguarding Policies and Procedures

4. **HOW WE SHARE OUR POLICY**

All staff (including temporary staff, volunteers and students) are provided with the nursery's Safeguarding Policy and informed of the nursery's Safeguarding arrangements on induction.

Furthermore, Grassroots Day Nursery will ensure that parents have an understanding of the responsibility placed on Grassroots Day Nursery and its staff for safeguarding and provide them written clear access to all of our Policies. Parents will also be advised of the nursery's complaints procedures.

5. **HOW WE REVIEW OUR POLICY**

Grassroots Day Nursery will review these Policies regularly and makes every effort to ensure that Policies and Procedures are amended to conform to current legislation and directives.

6. **SAFER RECRUITMENT AND DBS PROCESS**

Grassroots Day Nursery has a duty under the Children's Act and other enactments to ensure that all staff are suitable for the job. Staff will provide a secure and safe environment for all children. All Grassroots staff are subject to the DBS process and Safer Recruitment procedures prior to appointment. The nursery will therefore not allow an adult to be left alone with a child who has not received their enhanced DBS disclosure clearance.

All staff qualifications will be checked using [Early Years Qualifications List](#)

The person in charge of the DBS process/who manages the process and database is Gaynor Dicks

(S)He is responsible for ensuring that:

1. The Policy for enhanced DBS checks is adhered to in the application process for staff, volunteers and students
2. Staff files, The Single Central Staff Record and DBS's are kept up to date for all staff and volunteers
3. All checks are subject to a regular review (at least every 3 years) and are kept current
4. All staff sign a Suitability Declaration annually.

If you have already been police-checked by a previous employer, you will be required pay for and provide Grassroots with a new enhanced DBS certificate. We also advise that you subscribe to the update service (at a cost of £13 per year), which enables your DBS to follow you in your career. Please note that you will not be classed as vetted until we see a copy of this new DBS. All enhanced DBS disclosures checks will be updated on a regular basis (at least every 3 years) to ensure suitability of adults caring for children. A self disclosure form will be required annually.

7. SAFE PRACTICE

Our setting complies with the current guidance for Safer Working Practice for those working with Children and Young People.

Safe working practice ensures that the child is safe and that all staff:

- Are responsible for their own actions and behaviour and should avoid any conduct which would lead any reasonable person to question their motivation and intentions
- Work in an open and transparent way
- Work with other colleagues where possible in situations that could be open to question
- Discuss and/or take advice from the nursery management over any incident which may give rise for concern
- Record any incidents or decisions made
- Apply the same professional standards taking into account diversity issues
- Be aware of information sharing and confidentiality policies
- Are aware that breaches of the law and other professional guidelines could result in criminal or disciplinary action being taken against them.

8. TRAINING

The Designated Safeguarding Lead for the nursery will undertake the 2-day Designated Safeguarding Leads (DSL) training and then a ½ day refresher training annually. The 2 day DSL training will be repeated every 2-3 years.

- All staff will attend Safeguarding Children training within their first six months of employment and receive initial basic training during their induction period. This will include the procedures for spotting signs and behaviours of abuse and behaviours abusers, recording and reporting concerns and creating a safe and secure environment for the children in the nursery. All staff has access to the Grassroots Whistle-blowing policy, which will enable them to share any concerns that may arise about their colleagues in an appropriate manner. All staff to have completed Prevent Duty and also FGM Training.

9. SUPERVISION OF OUR STAFF

Developing effective staff supervision in early year's settings is crucial to ensure safe practice and staffs training needs are being met. Staff in the day nursery will be closely supervised by appropriate practitioners in the setting. Giving regular opportunities to share good practice and concerns.

10. CODE OF CONDUCT

All staff will read and understand Grassroots Day Nursery policies and procedures and the staff handbook within the first week of employment as part of their induction.

11. WHISTLE-BLOWING

All Grassroots Day Nursery staff acknowledges their individual responsibility to bring matters of concern to the attention of senior management and/or external agencies. Please see Grassroots Whistle-blowing policy for further details.

12. CONFIDENTIALITY

The nursery will operate with regard to "Information Sharing: Practitioner's Guide: HM Government, 2015 and has a clear and explicit confidentiality policy.

Wherever there is a concern that a child may be suffering from harm or may be at risk of suffering from harm, the child's safety and welfare must be the overriding consideration.

13. IDENTIFYING ABUSE

All staff and other adults in the nursery are well placed to observe any physical, emotional or behavioural signs, which indicate that a child may be suffering significant harm. All staff must be alert to the signs of abuse and their responsibility for referring any concerns to the designated member of staff responsible for Safeguarding.

Signs to identify possible abuse and neglect at the earliest opportunity may include:

- Significant changes in children's behaviour
- Deterioration in children's general well-being
- Unexplained bruising, marks or signs of possible abuse or neglect
- Children's comments which give cause of possible abuse or neglect, Children's comments which give cause for concern
- Any reasons to suspect neglect or abuse outside the setting, for example in the child's home.
- Children who go missing from education, particularly on repeat occasions,
- Inappropriate behaviour displayed by other members of staff, or any other person working with children. For example, inappropriate sexual comments; excessive one-to-one attention beyond the requirements of their role and responsibilities; or inappropriate sharing of images.

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by harming them or by failing to act to prevent harm. Children may be abused within a family, institution or community setting by those known to them or a stranger. This could be an adult or adults, another child or children.

The signs and indicators listed below may not necessarily indicate that a child has been abused, but will help us to recognise that something may be wrong, especially if a child shows a number of these symptoms or any of them to a marked degree.

Physical abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or caregiver fabricates the symptoms of, or deliberately induces, illness in a child.

Indicators of physical abuse may include:

- Where the child has bruises or other injuries of different ages at the same time
- Where a baby not yet independently mobile has bruises, is reluctant to move a limb or limbs, or is tender on handling
- Where a child appears wary or flinches on closeness, as if expecting physical harm
- Where the explanation is not consistent with the injury, or with the child's age and stage of development
- Where there is a history of frequent injuries, even though the explanation of each individual occurrence may appear adequate. This can also indicate lack of supervision, or possible medical problems
- Where there is multiple facial bruising, particularly around the mouth, ears or eyes
- Where there are unexplained or inadequately explained burns or bite marks, or both
- Ingestion of toxic substances, particularly when there is more than one incident

The impact of physical abuse:

Physical abuse can lead directly to neurological damage, physical injuries, pain and disability or, at the extreme, death. Harm may be caused to a child both by the abuse itself and by the abuse taking place in a wider family or institutional context of conflict and aggression. Physical abuse has been linked to aggressive behaviour, emotional and behavioural problems and educational difficulties. Where a child is disabled, injuries or behavioural symptoms may mistakenly be attributed to his/her disability rather than the abuse. Professionals must guard against attributing the possible indicators of abuse to racial, cultural or religious stereotypes.

Please see Grassroots policy on FGM

Emotional abuse

Emotional abuse is the persistent emotional maltreatment of a child so as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.

It may feature age or developmentally inappropriate expectations being imposed on children.

These may include interactions that are beyond the child's developmental capability or prevent them from participating in normal social interaction. It may involve seeing or hearing the ill treatment of the mother (e.g. domestic abuse). It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger or the exploitation or corruption of children.

Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone. Parents/caregivers of children with multiple needs may find it difficult to ensure that the full range of their needs, including their emotional needs, is met. It may be hard to include such children in everyday activities alongside other family members, but not to include them may be harmful.

Indicators of emotional abuse may include:

- Having impaired ability for enjoyment and play
- Lacking normal curiosity and natural inquisitiveness
- Exhibiting delay in language development and play skills
- Having low self-esteem
- Displaying eating disturbances or growth failure
- Not trusting any kindness, expecting it to be accompanied by harmful words or action.
- In severe cases, showing physical signs of deprivation as described earlier. These may occur even though physical care appears adequate and there may be no physical cause.
- Also refer to Grassroots policy on FGM

The impact of emotional abuse:

There is increasing evidence of the adverse long-term consequences for children's development where they have been subject to sustained emotional abuse. Emotional abuse has an important impact on a developing child's mental health, behaviour and self-esteem. It can be especially damaging in infancy. Underlying emotional abuse may be as important, if not more so, than other more visible forms of abuse in terms of its impact on the child. In families where the child experiences a low level of emotional warmth and a high level of criticism, negative incidents may have a more damaging impact on the child. Domestic abuse, adult mental health problems, substance misuse or racism from a caregiver may feature in families where children are exposed to emotional abuse and in extreme cases can lead to suicide.

Sexual abuse

Sexual abuse involves forcing or enticing a child or young person into sexual activities, including prostitution, whether or not the child is aware of what is happening. The activities may involve physical contact including assault by penetration or non-penetrative acts. They may also include non-contact activities, such as involving children in looking at, or in the production of sexual online or printed images, watching sexual activities or encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by male adults. Women can also commit acts of sexual abuse, as can other children.

Indicators of sexual abuse may include:

Physical signs:

- Genital or anal lacerations, bleeding or other trauma
- Genital or peri-anal inflammation or irritation
- Persistent or recurrent vaginal discharge
- Sexually transmitted disease, including peri-anal or genital wart
- Pregnancy

Medical problems such as:

- Recurrent urinary symptoms or 'cystitis'
- Enuresis or secondary enuresis (wetting or soiling)
- Recurrent unexplained abdominal pain

Behavioural problems can include:

- Overt sexualised behaviour
- Compulsive masturbation
- Acting out and aggressive behaviour
- Drawings and play activity which are explicitly sexual
- A sudden change in normal behaviour patterns, or sexual awareness
- Knowledge in advance of what would be expected at the child's age and level of development

The impact of sexual abuse:

Disturbed behaviour, including self-harm, inappropriate sexualised behaviour, sadness, depression and loss of self-esteem, has all been linked to sexual abuse.

Where disabled children are concerned these behaviours have sometimes mistakenly been attributed to their disability without any real assessment of their cause. The adverse effects of sexual abuse may endure into adulthood.

Neglect

Neglect is the persistent failure to meet a child's basic physical and/or physiological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or caregiver failing to:

- Provide adequate food, clothing or shelter (including exclusion from home or abandonment)
- Protect a child from physical and emotional harm or danger
- Ensure adequate supervision including the use of inadequate caregivers
- Ensure access to appropriate medical care or treatment.
- It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Indicators of neglect may include:

- **Failure to thrive** for which no medical cause has been demonstrated
- **Extreme hunger or lack of appetite** and increased feeding difficulties in young babies
- **Inappropriate or inadequate clothing** taking into account the context of where the child lives and the level of poverty. This may also apply to poor hygiene.

- **Lack of appropriate supervision**
- **Persistent failure to seek or to follow medical or nursing advice**
- **Developmental delay** for which no medical cause has been demonstrated - particularly if language and social skills are disproportionately affected
- **Poor relationships with peers** but attention seeking from adults
- **Physical signs of long-standing neglect** including poor growth, thinning hair, a protuberant abdomen, decaying teeth, and persistently cold, reddened hands and feet.

The impact of neglect:

Severe neglect of young children is associated with major impairment of growth and intellectual development. Persistent neglect can lead to serious impairment of health and development and long-term difficulties with social functioning, relationships and educational progress. Neglect can also result, in extreme cases, in death.

This is not an exhaustive list and you may have other concerns that are not listed above.

14. TAKING ACTION

Whilst we acknowledge such allegations, (as all others), may be false, malicious or misplaced, we also acknowledge they may be founded. It is, therefore, essential that all allegations are investigated properly, in line with agreed procedures and outcomes recorded.

It is not the responsibility of the nursery to investigate welfare concerns or to determine the truth of any disclosure or allegation. All staff, however, have a duty to recognise concerns and maintain an open mind. Accordingly, all concerns regarding the welfare of a child will be recorded and discussed with the designated safeguarding lead (or deputy) prior to any discussion with parents.

Staff must immediately report:

- Any suspicion that a child is injured, marked or bruised in a way which is not readily attributable to the normal knocks and scrapes received in play
- Any explanation given which appears inconsistent or suspicious
- Any behaviours which give rise to suspicions that a child may have suffered harm
- Any concerns that a child may be suffering from inadequate care, ill treatment or emotional maltreatment
- Any concerns that a child is presenting signs or symptoms of abuse or neglect
- Any significant changes in a child's presentation, including non-attendance
- Any suspicion, allegation disclosure of abuse about or by a child
- Any concerns regarding person/s who may pose a risk to children (e.g. living in a household with children present)
- Information which indicates that the child is living with someone who does not have a parental responsibility for them (e.g private fostering)
- Any signs that Radicalisation is taking place
- Any signs that FGM may be about to happen (please refer to FGM policy)

Responding to Disclosure and Allegations

Allegations or information may be received from a child, parents or other members of the public. The Nursery recognises that those who disclose such information may do so with difficulty, having chosen carefully to whom they will speak. Accordingly all staff will handle allegations with sensitivity.

Such information cannot remain confidential and staff will immediately communicate what they have been told to the designated person and make a contemporaneous record.

Principles

Staff will not investigate but will, wherever possible, listen, record and pass on information to the Designated Safeguarding Officer in order that s/he can make an informed decision of what to do next.

DISCLOSURE:

- Listen to and take seriously any information shared that a child may be at risk of harm
- Clarify the information
- Stay calm and reassuring
- Do not make promises that cannot be kept e.g. Confidentiality – tell the child that you will have to tell someone else who will be able to help. Explain that only those who ‘need to know’ will be told
- Reassure the child that they were not to blame and that they were right to talk to you
- Keep an open mind
- Record the conversation and facts verbatim in writing immediately afterwards on the “Safeguarding Children Record Keeping”. (Writing notes during may put undue pressure on the child)
- Try to keep questions to a minimum and of an ‘open’ nature e.g. ‘Can you tell me what happened?’ rather than ‘Did x hit you?’
- Try not to show signs of shock, horror or surprise
- Do not express feelings or judgements regarding any person alleged to have harmed the child
- Explain sensitively to the child/staff that they have a responsibility to refer the information to the Designated Safeguarding Officer
- Report to the Designated Person or Manager who will contact Grassroots proprietors and Local Safeguarding Children’s Board Department as necessary

Action by the Designated Safeguarding Officer

Following any information raising concern, the senior designated person will:

- Consider the child’s wishes and feelings but not promise confidentiality
- Consider any urgent medical needs of the child
- Make an immediate referral to the MASH Team or police if there has been a disclosure and/or allegation of abuse or there are clear grounds for concerns about the child’s safety and well-being
- Consult with a member of MASH if they are uncertain whether or not a referral is required

In consultation with either the MASH team decide:

- Wherever possible, to talk to parents, unless to do so may place a child at risk of significant harm, impede any police investigation and/or place the member of staff or others at risk
- Whether to make a child protection referral to social care because a child is suffering or is likely to suffer significant harm and if this needs to be undertaken immediately
- To contact the designated officer for safeguarding in another agency if that agency is working with the family

OR

- Not to make a referral at this stage but retain the information in written notes on the child’s file
- If further monitoring is necessary and agree who and how this will be undertaken
- If it would be appropriate to undertake an assessment and/or make a referral for other services

All information and actions taken, including the reasons for any decisions made, will be fully documented.

Action following a child protection referral

The Designated Safeguarding Officer or other appropriate member of staff will:

- Maintain contact with the allocated Social Worker
- Contribute to the Strategy Discussion and Strategy Meeting
- Provide a report for, attend and contribute to any Initial and Review Child Protection Conference
- Share the content of this report with the parent, prior to the Child Protection Conference
- Attend Core Group Meetings for any child subject to a Child Protection Plan or Child in Need meeting for any child subject to a Child in Need Plan
- Where a child on a Child Protection Plan moves from the nursery or goes missing, immediately inform the key worker in Social Care

Dealing with Disagreement and Escalation of Concerns

The Designated Safeguarding Officer or other appropriate member of staff will:

- Contact the line manager in children's social care if they consider that the social care response to a referral has not led to the child being adequately safeguarded and follow this up in writing
- Contact the line manager in children's social care if they consider that the child is not being adequately safeguarded by the Child Protection Plan and follow this up in writing
- Use the escalation policy if this does not resolve the concern

Supporting the Child and working in Partnership with Parents

- We will provide a secure, caring, supportive and protective relationship for the child
- The nursery recognises that the child's welfare is paramount. Good child protection practice and a good outcome for the child relies on a positive, open and honest working partnership with parents
- Whilst we may, on occasion, need to make referrals without consultation with parents, we will make every effort to maintain a positive working relationship with them whilst fulfilling our duties to protect any child
- Children will be given a proper explanation (appropriate to age & understanding) of what action is being taken on their behalf and why
- We will endeavour always to preserve the privacy, dignity and right to confidentiality of the child and parents. The Designated Safeguarding Officer will determine which members of staff "need to know" personal information and what they "need to know" for the purpose of supporting and protecting the child.
- Grassroots Day Nursery will notify the MASH Team if there is an unexplained absence of more than two days of a child who is on the child protection register.

Child protection files

Any Child Protection documents will be retained in a 'Safeguarding' file, separate to the main child's file. The main file has an alert that a Safeguarding file exists and states its location. The Safeguarding file is locked away and is only accessible by the nursery manager and Designated Safeguarding Officer. When a child leaves the establishment we ensure that the Safeguarding file is copied and transferred to the new establishment ASAP clearly marked "Safeguarding, Confidential for Attention of Designated Safeguarding Officer". This must be separate to the main file.

Allegations regarding person(s) working in or on behalf of the nursery (including volunteers)

Where an allegation is made against any person working in or on behalf of the nursery that he or she has:

- a. Behaved in a way that has harmed a child or may have harmed a child
- b. Possibly committed a criminal offence against or related to a child or

- c. Behaved towards a child or children in a way that indicates s/he is unsuitable to work with children

We will apply the same principles as in the rest of this document and we will always follow the procedures outlined in the Local Child Protection Procedures for managing allegations against people who work with children. This includes allegations against staff in their personal lives.

Whilst we acknowledge that such allegations, (as all others), may be false, malicious or misplaced, we also acknowledge that they may be founded. It is, therefore, essential that all allegations are investigated properly, in line with agreed procedures and outcomes recorded.

Initial Response to an allegation or concern:

Initial Action by person receiving or identifying an allegation or concern

- Treat the matter seriously and keep an open mind
- Make a written record of the information by filling in a 'Safeguarding Children Record Keeping'.
- Immediately report the matter to the Designated Safeguarding Officer or deputy in their absence or where the DSO is the subject of the allegation

Initial Action by the Designated Safeguarding Officer/Owner/Manager (If the DSO is the subject of the allegation then the Nursery Manager/Owner will take the following action):

- Obtain written details of the concern or allegation but do not investigate or interview the child, adult or witnesses
- Inform the owner for advice and guidance
- Contact the local Referral and Assessment Team or Local Authority Designated Officer (LADO) within 1 working day
- Discuss with the LADO next steps

Subsequent Action by the Designated Senior Manager/owner

- Action to be informed by any professional strategy meeting held
- Contribute to the child protection process by attending professional strategy meetings
- Conduct a disciplinary investigation, if an allegation strategy meeting indicates the need for this
- Maintain contact with MASH
- Ensure clear and comprehensive records regarding the allegation and action taken and outcome are retained on the staff member's personnel file
- The nursery reserves the right to suspend any member of staff on full pay during an investigation
- If the allegation could possibly interfere with the normal working of the nursery, the member of staff or volunteer will be allocated to another area, after due consultation with all parties and professionals, including the MASH
- All enquiries/external investigations/interviews will be documented and kept in a locked file
- Unfounded allegations will result in all rights being re-instated
- MASH will be involved in the process immediately after the incident has happened and/or when you received the allegation that a member of staff at Grassroots Day Nursery exhibited inappropriate behaviour towards a child; this may also lead to the Police Child Abuse investigation team being involved.
- Ofsted will be informed about the actions within 14 days.

Children who harm others

- Our Setting recognises that the harm caused to children by the harmful and bullying behaviour of other children can be significant.
- Children who harm others should be held responsible for their harmful behaviour and the setting staff alerted to the fact that they are likely to pose a risk to other children in the setting, home and community.
- Where this harm involves sexual abuse, serious physical or serious emotional abuse, the safeguarding procedures set out in this policy will be applied.
- This setting recognises that children who harm others are likely to have considerable needs themselves and may have experienced or be experiencing significant harm to themselves.

Referrals

- Where a child has caused significant harm to another child, through sexual abuse or serious physical or emotional abuse, the setting will make separate referrals to MASH for the victim(s) and perpetrator(s).
- Our nursery will be mindful of the sections in the Local Child Protection Procedures concerning “Harming Others” and “Sexually Active Children” and work closely with MASH, the police and other agencies following the investigation of a referral.

Ofsted will be informed of any actions taken in respect to an allegation as soon as it is reasonably practicable, but at least within 14 days of the allegations being made.

Useful phone numbers:

Grassroots Day Nursery: 01933 626547

OFSTED: 0300 123 1231: OFSTED Whistleblowing number: 0300 123 3155

MASH: 01234 718700 (office hours) or ring 0300 300 8123 (out of hours).

LADO

Bedford Borough: 01234 276693 or e-mail LADO@bedford.gcsx.gov.uk

Northamptonshire: 01604 364036 or e-mail lscbn@northamptonshire.gcsx.gov.uk

Cambridgeshire: 01223 727968

Local police: 03000 111222

I _____ confirm that I have read and understood this safeguarding policy.

Date _____

<p>SignedProprietor</p> <p>Signed.....Manager</p> <p>To be updated 1/11/2017 or before if required</p>
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