



**GRADUATE CERTIFICATE in Consolidation
of Social Work Practice
LEVEL 6 - 60 Credits
BMPF6044**

**LEARNER PORTFOLIO
(PORTH AGORED and UNIVERSITY OF WALES
TRINITY SAINT DAVID)**

Learner's name: Samantha Ashbrooke Robertson

Email address:samblackcrow@gmail.com

**Learner's University Registration Number:
2127092**

Cohort: 18 onwards

Task 4

Safeguarding in an area which is not your main area of work

Guidance:

*Social Care Wales require newly qualified social workers to provide evidence of their understanding of safeguarding work with adults and children. The assignment below will enable you to demonstrate this. **N.B.** if your usual area of work is with children please write about adult safeguarding. If you usually work with adults, then write about child safeguarding. Ensure you meet the learning outcomes for this task (see appendix 5 of the handbook).*

Question a:

In an area **that is not your main focus of work** (see guidance above), explain the relevant legislation, and the national, local and organisational policies and procedures for safeguarding.

In Wales, children's safeguarding legislation is under s126 Social Services and Wellbeing (Wales) Act 2014, and s47 Children Act 1989, with guidance offered in Working Together to Safeguard People Volume 5 – Handling Individual Cases to Protect Children at Risk (2014). As with adult safeguarding, the Wales Safeguarding Procedures (2019) "detail the essential roles and responsibilities for practitioners to ensure that they safeguard children... who are at risk of abuse and neglect." The procedures offer guidance on implementing SSWB(W)A 2014. A national and six regional Safeguarding Boards monitor and promote excellence in practice and may advise accordingly.

S131 of SSWB(W)A 2014 details the duty to report any child "experiencing or... at risk of abuse, neglect or other kinds of harm". There is a dedicated telephone number and specialist staff for reporting child protection (CP) concerns in my LA, a duty under p210.

When a report is received, as much information as possible is gathered. Within one working day, strategy is discussed with agencies and professionals, who have a duty to provide

requested information to the LA under s164 SSWB(W)A 2014. If a decision is made to take the concern further, workers will seek permission to speak to the child if appropriate (where this would not present risk to the child or others, or could impact any police enquiries) from persons with Parental Responsibility, and a Social Worker allocated to assess and undertake an investigation under s47 Children Act 1989. A CP conference is convened within 15 working days of the last strategy meeting, when a safety plan is put in place and the child(ren) registered on the CP register. The Core Group meets within 10 working days of this. Assessments and further Core Group meetings continue, to be completed by the lead coordinator within 42 working days of the first report, roughly coinciding with a 3-month review conference, where de-registration may be decided, or continued for further review at 6 months, potentially leading to legal advice. **(324)**

A number of socio-economic factors may indicate that a child is at risk. Poverty is a known trigger for many stressors on individuals and families that may involve mental health issues, substance misuse, domestic violence, ill-health, any of which may impact a child reliant on them. Others may be aware of adverse childhood experiences (ACEs), e.g. losing a parent. Abuse may be physical, sexual, psychological/ emotional (e.g. bullying), neglect or financial. Children (Abolition of Defence of Reasonable Punishment) (Wales) Act 2020 further protects children from physical punishment and abuse. Signs of abuse may include weight loss, changes in behaviour, 'acting out', bed-wetting, sexualised behaviour, or physical marks or indications of unexplained pain. **(112)**

Many LA's use the Signs of Safety model (Turnell, A. and Edwards, S. (1999)) which promotes the child and their support network being key to safety planning, which may form part of the Care and Support Plan required under p4 SSWB(W)A 2014. It is recognised that change enforced from outside (e.g. by CP registration) is unlikely to engender long-term positive effects, so models that encourage control over the process and self-motivation have been found to be more successful in long term safety planning. **(84)**

520 words

500 words (+/- 10%: include your actual word count at the end of each section).

Question b:

Reflect on the difference between safeguarding in adults' and children's work

Legislatively, children's safeguarding is affected by different Acts that are specific to children, whereas adult safeguarding is informed less by adult-specific law than overall human rights legislation, in addition to p7 of SSWB(W)A 2014. It is often forgotten that the Mental Capacity Act 2005 also applies to children aged 16-18; very few mental capacity assessments are offered to or undertaken with 16-18 year old children with cognitive difficulties, in my experience. Principle 3 of MCA 2005 details the right to make unwise decisions; this may not be as respected in young adults as it might be in older people. MCA 2005 is used relatively extensively in adult safeguarding, as capacity may be key to the level of intervention by Social Services and others. **(123)**

The main aspect of children's safeguarding that really impacts workers is the strict timescales required for certain actions or types of intervention. In ongoing cases, in addition to the timescales noted above, children on the CP register must be visited every ten days,

which can be extremely time-consuming for workers, especially if they live rurally. While recording of decisions, actions, visits etc. is necessary in both adults and children's safeguarding, it is more onerous in the latter. In complex cases, forms, meeting and case notes can number in the hundreds. In many ways, adult safeguarding appears less structured. It is often more difficult to obtain necessary information from partner agencies due to confidentiality, and far less is obtained in the first stage of the reporting process, which itself often takes several days to reach an allocated Social Worker. In one of my cases, it took almost 3 weeks to get to MARAC, instead of the 24-hour response in a child protection case for strategy discussion. It was deemed to be of lesser importance by the police service. **(177)**

It may be cynical, but I suspect that the difference in perceived importance and urgency between children's and adult safeguarding responses is due to media and public perception and outcry in the past. High profile cases like those of Victoria Climbié and Baby P have resulted in media frenzy, scapegoating of Social Workers and some knee-jerk reactions by governments. Most CP Social Workers feel vulnerable due to the level of criticism aimed at them. There is a sense that adults have more choice over their lives, are harder to control or abuse, they are not as vulnerable, and ultimately, not as important to protect as children. Greater resources are provided for CP processes than for Adult Protection. There is no corresponding register for adults at risk. **(126)**

428 words

400 words (+/- 10%: include your actual word count at the end of each section).