

Safeguarding

Safeguarding is defined as protecting and promoting children's welfare and safety (McCarthy, 2015; HM Government, 2023). Therefore, acts, policies and procedures are in place to protect children, such as the Children's Act 1989/2024, Social Services and Wellbeing (Wales) Act 2014: Working Together to Safeguard People (2022). However, there are many forms of abuse, including emotional, sexual, neglect and physical (NSPCC, no date).

Lindon and Webb (2016) emphasise early recognition of abuse is paramount, stating how children in families who experience domestic violence and children with additional needs and babies are more vulnerable to experience abuse. Welsh Government (WG, 2022a), state abuse can have a devastating impact on life. Therefore, it is important that practitioners are aware of these policies and procedures to ensure children are protected, by noticing signs and symptoms, and bringing it to the attention of their settings designated safeguarding person (DSP), for referral (Wales Safeguarding Procedures, no date a).

Recognising and recording

Ensuring children are safeguarded is every practitioner's responsibility and being proactive, begins with appropriate and up to date training and information, with practitioners being aware of the signs and symptoms of potential abuse (Wales Safeguarding Procedures, no date a). The scenario does not provide details of the family's ethnic origin or culture which may be an influence. Lucy started at the setting only two weeks ago; it is early days. When her parents bring her to nursery mum appears quiet, and Dad does the talking. It is important to get to know Lucy and her family, in building a relationship, by listening and observing the family dynamics, how they live, interact and their relationships. (Buckler, 2023; HM Government, 2023; Firmin *et al.*, 2022; Neaum, 2016; Bowlby, 1969, Rose, Gilbert, and Richards, 2016).

NSPCC Learning (2024) emphasises the importance of recognising signs and symptoms such as physical, behavioural, and emotional, however Lucy has only recently started and has settled in quickly which suggests a secure attachment with her parents (Davies and Troy, 2020). Lucy is not showing any behavioural signs such as being withdrawn, unhappy, or aggressive (Healey, 2018).

Dad declared that Lucy was toilet trained when she was two, although according to NHS (no date a) this is early and suggests many children are dry most days by the age of 3. However, from observations Lucy went to the toilet several times and complained that it was painful, according to NHS (2022b), needing to urinate more often, and it being painful can be a urinary tract infection (UTI), yet not showing a temperature or appearing unwell, guidance is to see a GP. However, this could be due to a soap irritation or poor hygiene, causing vaginitis (Ben-Joseph, 2023). Following good practice and ensuring Lucys health and wellbeing is cared for, informing the parents is good practice. However, Dad's response of "she is just playing games" is concerning, and the following day Lucy's statement that "Not to say anything, it was their secret." is concerning and following policies and procedures this response needs to be reported to the manager and recorded accurately (Reid, 2018).

Lucy was crying when using the toilet, she was naked from the waist down as she is stood there, her genital area looked red, inflamed, and there appeared to be a discharge. There could several reasons for this and whilst this could be signs of infection such as cystitis, an accident, sexual abuse or in some culture's female genital mutilation (FGM) (NSPCC, no date a; NSPCC, no date b; Wales Safeguarding Procedures, no date b and Buckler, 2023).

However, when asking Lucy if she is ok, although this is a closed question and ideally, open ended questions are better (Lindon and Webb, 2016), Lucy replied, Daddy told her "Not to say anything, it is their secret." This often is a sign of sexual abuse, according to Ventress (2018) who identifies sexual abuse can be seen in four main signs, physical, behavioural, disclosure or an allegation from another. In Lucy's case, there were physical and emotional signs. Additionally, as Lucy is young and is unaware of what is potentially happening to her, she will not understand sexual abuse (NSPCC, no date).

She has been told it is a secret and must not tell anyone and may have also been told something bad will happen if she does. Allnock and Kiff (2023) emphasise the worry and fear children feel about disclosing, for the possible consequences for themselves or others, children need to build trust that is based relationships to be able to disclose.

When children disclose information, recording needs to be accurate recording the child's own, exact words (Buckler, 2023). National Institute for Health and Care Excellence (NICE, 2017) state observations and what is heard and seen, build up the report, for example, appearance, behaviour, symptoms, physical signs, and interaction from parents. Burton (2018) highlights following the settings policies and procedures and identifies the importance of keeping written notes simple and factual and ensuring good timing of the information that needs sharing. Reid (2018) agrees stating that once abuse is suspected, it must be discussed with the DSP. If suspicions and concerns are not acted upon, the child may experience further harm rather than protection (WG, 2022)

Lucy said her dad said, "Not to say anything, it is their secret," this needs to be recorded exactly and reported immediately to the DSP. Therefore, the next stage of safeguarding will be implemented to ensure Lucy is safe from harm, as this is her right according to UNCRC (no date) Article 19, to be protected from abuse from their parents and Article 35, protection from sexual abuse or exploitation.

Reporting and referral

Reporting suspected abuse is required by a variety of legislation, policies, and ethical considerations, ensuring practitioners implement the 'do no harm' imperative, all decisions made and conducted by collecting data, and reporting should be obtained ethically preventing harm and reducing risks to children, families, and staff (Save the Children, no date). NSPCC Learning (2022) agree by identifying the importance of logging the date and time of the disclosure, name of who is writing the concern, the child's name, age or date of birth, a detailed and factual report, ensuring the child's exact wording.

The Social Services and Wellbeing (Wales) Act 2014 is in place to ensure reporting of suspected abuse or individuals at risk of harm, therefore when information reaches the DSP of a setting, they must inform local authorities, known as Multi-Agencies Safeguarding Hub (MASH) (WG, 2021). Royal College of Paediatrics and Child Health (RCPCH) (2023) agree, stating it is mandatory to report suspected child abuse, in all forms. However, Walsh and Jones (2015) identified how child abuse is under-reported, and suspicions of abuse and neglect may not be reported. Wales Safeguarding Procedures (no date c) agree, identifying how some practitioners worry about losing trust or not be taken seriously or their concern being disregarded. Additionally, RCPCH (2023) agree by adding how some practitioners worry how concerns will have a negative impact on the family, also, how some may lack knowledge and confidence. Practitioners may also fear the breakdown of their relationship with parents. However, they must always act in the best interests of the child in safeguarding them (National Occupational Standards, NOS, no date).

In accordance with WG (2023) practitioners who have concerns, should feel that they are able to raise concerns, without fear and with confidence that their concerns will be heard and dealt with appropriately, this is known as Whistleblowing.

However, WG (no date) state all information must be recorded accurately and kept confidential, and passed on to new settings, most settings use My Concerns, which is

an online safe and secure platform, creating ease to record concerns and safely storing them, with the ability to share between settings in line with General Data Protection Regulations GDPR (Safeguarding company, no date). The Information Commissioner's Office (ICO, no date), state data protection laws do not prevent information being shared in a safeguarding concern.

The legal framework Working Together to Safeguard Children (2023) and the Department of Education (2013) endorse multi-agency sharing of information regarding safeguarding and the GDPR (2018) states that personal information relating to safeguarding must be transparently, safely and responsibly shared (UK Government, 2018) The DFE states that if the practitioner considers that not sharing concerns may mean children being harmed or at risk of abuse then they must report this information (Department for Education, 2015)

The DSP role is to receive and report once a concern has been raised and leads by responding and assessing information and clarifying with the practitioner, potentially requesting additional information or evidence (NSPCC Learning, 2019).

The DSP must complete a Multi-Agency Report Referral Form (MARF) and phone MASH. According to Cardiff and Vale of Glamorgan Safeguarding Board (2021) settings should work with the child and their families and seek consent before completing a MARF. However, in this case, asking for consent may put Lucy in more harm, in seeking guidance from MASH, therefore, consent is not required, and it needs to be recorded why.

Once a MARF has been submitted to the local authority confirmation of the report will be received within 24 hours (Social Care Wales, no date). Additionally, the DSP must be notified of the outcome within 10 working days once the referral was submitted (Cardiff and Vales Safeguarding Board (2021).

The MASH team comprising of police, social services, health services and education, will share evidence and information, assess, and identify risk and provide timely support (Care Learning, 2024). It is a staged process, Children's services will assess the

information within 24 hours to determine what type of support is needed and decide on ways forward and get report back to the DSP (Child Law Advice, 2023). This could lead to a multi-agency strategy discussion within 7 working days, under Section 17 of the Children Act 1989. After a strategy discussion a Section 47 Child protection enquiry may be conducted within 10 working days, when a child is suspected or is likely to suffer harm (Children Act 1989, Wales Safeguarding Procedures, no date d; no date e).

In Lucy's case it is likely that a Child protection enquiry under Section 47 of the Children's Act would be immediate as she is suffering or at risk of harm.

Responsibilities

Welsh Government (2022a) state settings must have a safeguarding policy in place, and Welsh Government (2021) states within a setting there must be a senior member of staff that is the Designated Safeguarding Person (DSP). The Munro review (2011) highlighted the child approach, ensuring the child is the focus and their holistic needs, rights and best interests are paramount (WG, 2022b; Article 3, UNCRC, no date). Additionally, it is down to the setting to ensure all staff are suitable, without a criminal record. In 2003, a critical incident involving 2 children was followed by the Bichard Inquiry review (2004) the Criminal records Bureau (CRB) was implemented. Now carried out by the Disclosure and Barring Services (DBS) in 2012 (CRB Direct, 2021; GOV.UK, no date).

Safeguarding is not the responsibility of just one person, everyone is, with the importance of communication and working together, sharing information across multi-agencies and along with local authorities, families, and children themselves (Munro, 2011; WG, 2022b; McCarthy, 2015; HM Government, 2023).

Welsh Government (2022a) requires practitioners to follow The Wales Safeguarding Procedures app to ensure they are up to date and are aware of their roles and responsibilities to keep children and adults safe. Additionally, NOS (no date) highlight

practitioners must understand signs and symptoms that build factors that could lead to abuse or harm. It is the practitioner's responsibility to act on any suspicion of abuse.

Prevention is key, for practitioners recognising, responding, and reporting to a DSP supports the Future Generations (Wales) Act 2015 (2024) by ensuring a referral is in place allowing multi agencies to meet their objectives and prevent ongoing abuse.

Practitioners work in a holistic manner, during disclosures Lindon and Webb (2016) encourage practitioners to listen to children, asking open ended questions and showing a response with facial expressions and body language and finally, recording and documenting exactly what is said without making promises. UNCRC (no date) Article 12 Children have the right to have a say in matters that affect them. However, Lindon and Webb (2016) state practitioners should not make false promises about confidentiality, interrogate, investigate, make assumptions, or make suggestions about what is being said.

Summary

Safeguarding children is paramount, settings must have a DSP, procedures to follow that are clear and consistent, the DSP must ensure they and the staff have up-to-date training providing information and enhancing confidence to recognise abuse. It is important that practitioners record children's own words, be open, honest and offer reassurance, but never making promises. Recording the suspicion of abuse must be shared with the DSP, where it is their responsibility to make a referral to MASH using a MARF where multi-agencies will assess and provide support accordingly to the situation. Additionally, all children have the right to have their voices heard and to be safe from harm.

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