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Part 2 Practical Performance Project

Chosen Case Study 2

Ben is a 6-year-old boy in your year 1 class. He has a brother in year 4. As his teacher, you have known him to be a quiet boy but eager to please and is progressing with his learning. During the last month, you have noticed that Ben is coming into school with dirty clothes on, often unwashed and hasn't brushed hair or teeth. You have also noticed that he seems to be very hungry, always taking more than one piece of fruit at snack time and eating it quickly. Yesterday you caught him going into another child's bag and taking his sandwiches. When you asked him about it, he got upset but told you that mummy didn't go shopping this week

Recognising and Recording

Ben has been attending full-time school since he was 4 and a half years old in line with the United Nations Convention on the Rights of the Child (UNCRC) article 28 that all children have a right to access education (UNICEF, n.d). At the beginning of year 1 Ben presented as tidy in the correct uniform. He was always a happy little boy, engaging well whilst playing and exploring, active learning, creating and thinking critically (Department of Education, 2023a).

After the Christmas break, Ben began to attend school wearing uniform items of clothing that were quite obviously dirty, at times he would also attend in dirty non –uniform items of clothing. This appearance was often alongside messy, greasy looking hair and his breath smelling noticeably stale and of a yellowish/brown colour, indicating he had not been brushing his teeth (NSPCC, 2020). There have been times where we have noticed Ben feeling hungrier at snack times and taking multiple pieces of fruit. In line with guidance in the Working Together to Safeguard children policy we worked with parents, and we addressed our observation with Mum (Morrison, 2000). Mum was offered access to the uniform swap shop in school and an open invitation if she wanted further support Mum did not take up any support suggested.

Working with Neglect Practice Guidance (2021) this points out that if there is persistent failure to meet the basic physical and psychological needs of a child it can affect their health and development. Neglect is not always persistent it can be a one–off event down to a family crisis or a parent under stress. However, in Ben's case the incidents have become more frequent suggesting the concern of neglect is of higher risk to Ben's well-being.

In statutory guidance set out in Keeping Children Safe in Education and Early Years Foundation Stage (EYFS) frameworks there are clear safeguarding duties and expectations of practitioners in safeguarding children and promoting their welfare (Department for Education, 2023). Hobart *et al* (2009) suggests it is not easy to recognise signs of neglect and abuse. However, as a practitioner, it is my role to decide if abuse or neglect is taking place or if a child is a significant risk of harm or abuse. Significant harm was introduced to the Children' Act 1989 as key to child protection work and used as benchmark for professionals to determine whether intervention of compulsory or statutory is required to protect a child from harm (Lindon and Webb, 2016).

According to BHSCP (2022) signs of neglect can be presenting hungrier, wearing clothes that are consistently dirty or smelly and an unkempt appearance and poor hygiene. In Maslow's

Hierarchy physiological needs suggest we need to have enough food, water, good sleep and to feel warm to survive (Huntington, 2023). Action for Children (2022) supports this, saying children need food, clothing and shelter and that it is up to adults to provide children these basics otherwise it is neglect.

In addition to this already being observed yesterday we noticed Ben go into another child's bag taking their sandwiches. When Ben was asked why he did this he became upset and disclosed 'Mummy didn't go shopping this week'. Child Help (n.d) suggests you do not interrogate the child and limit the questions asked whilst reassuring the child providing a safe environment and making them feel supported. As Ben had made a direct disclosure, I acted accordingly recording Bens full name, age and address, exactly what Ben had said in his own words and documented exact quotes in addition to any further information relevant to alleged abuser (Johnson, 2019)

As a result of all these factors contributing to my concern, as advised by Social Care Wales (n.d), these concerns were shared with the school's designated safeguarding person (DSP) with all information obtained on this matter. These actions were taken to support the UNCRC Article 19 that we must ensure that children are protected from types of abuse, neglect, violence and bad treatment from their parents (UNICEF, n.d). Alternatively, if Ben was in immediate danger or injured a telephone call would have to be made to the emergency services (Child Protection in Sport Unit (CPSU), n.d.).

Reporting and referring

Social Service and Well-being (Wales) Act 2014 section 130 guides professionals of their duty to report children at risk and states that if there is reasonable cause to suspect that a child is at risk of possible neglect or harm, they must inform the local authority (Legislation.gov.uk, 2014). Buckler (2023) believes that a Designated Safeguarding Officer (DSO) is one of the most important roles of effective safeguarding practice and should lead to be compliant, competent and confident. Compliant at the appropriate level of training and expected to adhere to and work with. Competent at listening, talking and prioritisng children, show and demonstrate empathy whist working calmly and professionally. Confidence comes over time, however, to build confidence practitioners need to be proactive and driven by children whilst reflecting on and recognising what you need to know and why from on-the-job experiences to draw upon making us confident practitioners.

When relevant partners of a local authority has reasonable cause to suspect that a child is at risk and appears to be within the authority's area, they must inform the local authority. As Ben attends a Cardiff local authority school the reporting procedure required the Designated Safeguarding Officer to complete a Multi – Agency Report Referral Form (MARF) (Cardiff and Vale of Glamorgan Regional Safeguarding Board, n.d.). A MARF is an important document used in child safeguarding for professionals to report all their concerns and the child's safety and well-being (Cheshire West and Chester Council, n.d.). Outside of usual office time reports can be submitted to the social services out of hours service – emergency duty team (EDT), the police (Social Services Wales, n.d).

The information recorded is likely to be the shared information between the report –taker – myself as Ben's class teacher and the report maker –DSO. Whilst making a report a practitioner may worry that their relationship may be affected therefore hold discussions with the parent or carer regarding the concerns raised (Social Care Wales, n.d). It is advised that professionals notify the parent or carer of the referral and gain consent if safe to do so. However, if a parent or carer does not give consent or it is not safe to request consent the MARF should be submitted with an explanation as to why consent has not been given/sought (Sandwell CSP, n.d). Ben's Mum was notified of Ben's disclosure on the occasion and consented to MARF being submitted. Department for Education (2013) supports the purpose of sharing information relating to safeguarding with Multi agency practitioners in line with a legal framework Working Together to Safeguard Children (2023) to embed confidence in their safeguarding procedure.

In the UK the guidelines within the Data Protection Act 2018 (GDPR) those dealing with safeguarding personal information must do so responsibly, transparently and safely (UK Government, 2018). Number one of the seven golden rules for sharing information is that if practitioner believes that not sharing the information may result in a child being at risk of harm or abuse (Department for Education, 2015).

Once a MARF has been submitted to the local authority the report maker will receive confirmation of the report within 24 hours (Social Care Wales, n.d). A Multi – Agency Service Hub (MASH) team including social workers, police, health and early help services will assess the referral and jointly discuss the child at risk and agree on what action will be taken next (Guidance on making a children's safeguarding referral using the Multi-Agency Referral Form (MARF), n.d). The principles within the framework of The Assessment of Children in Need require the process to be child focused, involve working with the child, build on their strengths and ensure equality of opportunity (Department of Health, 2000). In line with The Children's Act 1989 an in-depth family law legislation that aims to keep families together. They will support Ben and Mum with the care of planning and early intervention service and resources to adhere to their own rights and interests (Department of Education, 2021).

As a result of a reported concern the MASH team may decide to carry out Child Protection Investigations (Section 47) where professionals will consider what needs to happen next to help ensure the child is safe. This is usually completed within 10 days of referral being submitted (West Berkshire Council, n.d.). On the other hand, Tuckwell (n.d.) points out that support from universal or early help services may be sufficient to support the family and therefore no further action from statutory services. The aim of this is that it will help promote better outcomes in supporting parents with the guidance and direction of their children as they develop, Article 5 UNCRC (UNICEF, n.d).

Settings Responsibilities

NSPCC (2023) support Early intervention and Early help to offer help and support that aim to improving the outcomes for children and young people and preventing escalating need or risk. Therefore, education including nursery provision are required to have a member of staff

responsible for safeguarding children. All staff must be on high alert for possible signs of abuse to take preventive measures for all children to improve their future opportunities and well-being (Davidson and Bifulco, 2018). According to Gwent Safeguarding, (n.d.) everyone in education shares key objectives to keep children and young people safe by creating and maintaining a learning environment that is safe, being proactive to identify when a child's welfare is a concern and develop children’s understanding, awareness and resilience in line with the curriculum.

The Children Act 2004 introduced the role of a Designated Safeguarding Lead which is essential in the management of safeguarding children in education and further organisations (The Education and Training Foundation, n.d.). NSPCC Learning (2020) reinforces that every organisation that is working with children needs to have someone that takes a lead on safeguarding and child protection. They may be known as Designated Safeguarding Officer (DSO), Designated Safeguarding Lead (DSL), Child protection officer, Child protection lead, Safeguarding or child protection coordinator.

The Protection of Children Act 1999 introduced CRB checks, known as Disclosure and Barring Service (DBS), that checks for people who work or volunteer directly with children and any vulnerable group (ICAP, 2020). Mind (2022) also reiterates that if your work involved working with children or vulnerable adults you require a standard or enhanced Disclosure and Barring Service (DBS). Enhanced checks will be required for teachers, social workers, childminders, foster carers and medical professionals. DBS are applied for by the organisation the applicant cannot apply for their own standard or enhanced DBS check (UK Government, 2018b). In line with The Staffing of Maintained School (Wales) regulations 2007 state that all teachers should have an enhanced DBS to work or volunteer in school (Legislation.gov.uk, 2024).

National government frameworks Working Together to Safeguard Children (2023) and What to do if you are worried a child is being abused (2015) provide all agencies working with children to work in partnership to safeguard children effectively (Early Years Alliance, 2015). Outlined in the Working Together to Safeguard Children (2023) practitioners need to protect children from maltreatment, prevent impairment to their health and development and take action to provide safe effective care to enable children's best outcomes (NSPCC, 2024).

Hartley (2024) believes that teachers should have regular training at least annually and receive local authority safeguarding updates. Training should cover the essential elements of child protection sign of possible neglect or harm and possibly take up additional training in supporting online safety, managing sexual behaviours, sharing nudes and mental health and emotional well-being in schools. World Health Organization (2019) suggests that implementing adequate policies and procedures that favor a child's well-being and dignity increased the opportunity for success, knowledge of good efforts and intentions of their personal achievements.

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