

Welcome



MODULE 1

Introduction



MODULE 2

Safeguarding legislation and guidance



INTRODUCTION TO SAFEGUARDING

Safeguarding is a term we use to describe how we protect children and vulnerable adults from abuse or neglect.

- **Definition of a child:** Anyone who has not reached their 18th birthday. Therefore, 'children' means 'children and young people'
- **Definition of an adult at risk:** An adult at risk is any person who is aged 18 years or over and at risk of abuse or neglect because of their needs for care and/or support. Where someone is over 18 but still receiving children's services and a safeguarding issue is raised, the matter should be dealt with as a matter of course by the adult safeguarding team



INTRODUCTION TO SAFEGUARDING



Safeguarding children and young people includes:

- Protecting children from maltreatment
- Preventing impairment of children's health or development
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best outcomes

Safeguarding adults at risk includes:

- Protecting their rights to live in safety, free from abuse and neglect
- People and organisations working together to prevent the risk of abuse or neglect and to stop them from happening
- Making sure people's wellbeing is promoted, taking their views, wishes, feelings and beliefs into account



INTRODUCTION TO SAFEGUARDING

There may be times when a person has care and support needs and are unable to protect themselves for a short, temporary period – for example, when they are in hospital under anaesthetic. People with care and support needs are not inherently vulnerable, but they may come to be at risk of abuse or neglect at any point due to:

- | | | |
|--------------------------------------|-------------------------------|---------------------------|
| • Physical or mental ill-health | • Inappropriate accommodation | • Getting older |
| • Disability or cognitive impairment | • Financial circumstances | • Being socially isolated |
| • Use of substances and/or alcohol | • Not having support networks | • Asylum seekers |



INTRODUCTION TO SAFEGUARDING

What is child protection?

A process for responding to individual children who are suffering or likely to suffer, significant harm as a result of abuse or neglect.

What is meant by a 'child (or adult) in need'?

A child or adult in need are people who are unlikely to reach or maintain a satisfactory level of health or development, or their health and development will be significantly impaired, without the provision of services, plus those who are disabled. This can also include children who are themselves young carers.

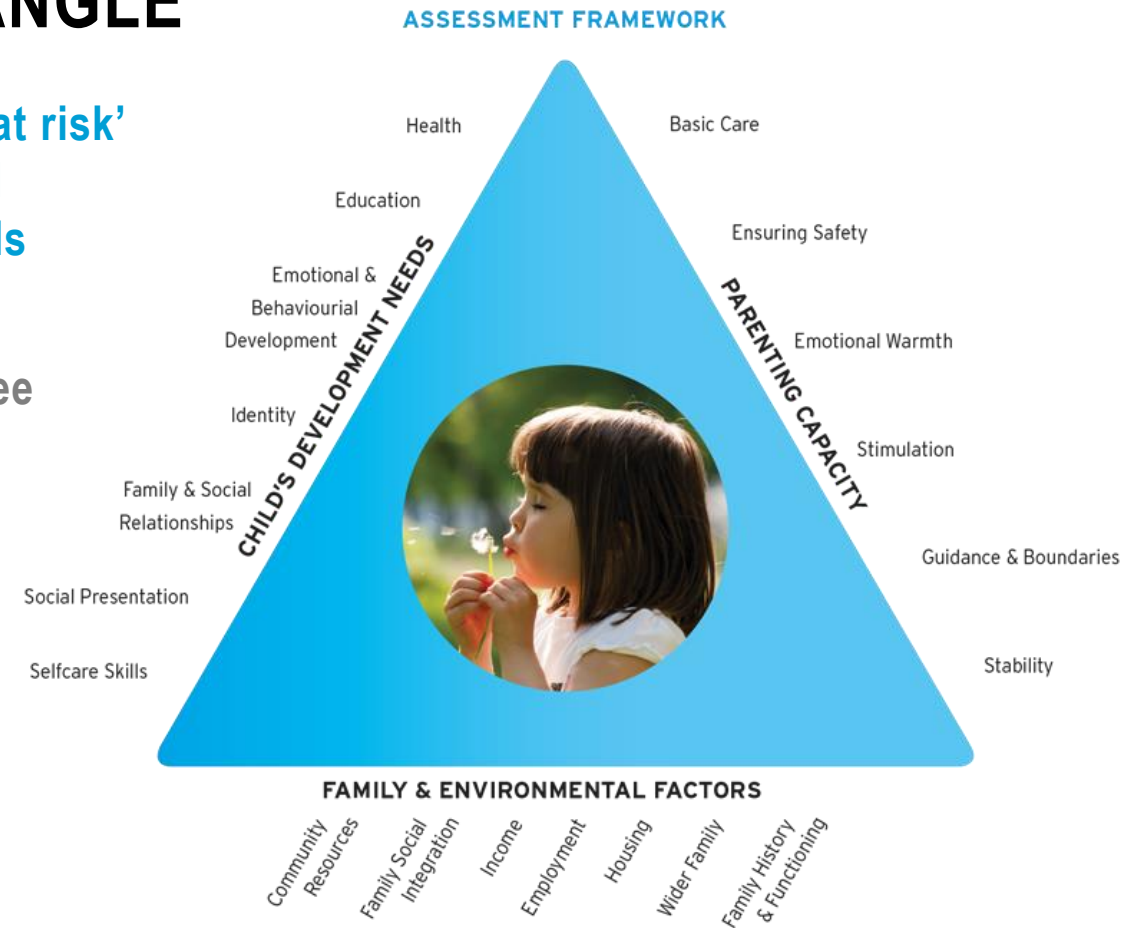


ASSESSMENT FRAMEWORK TRIANGLE

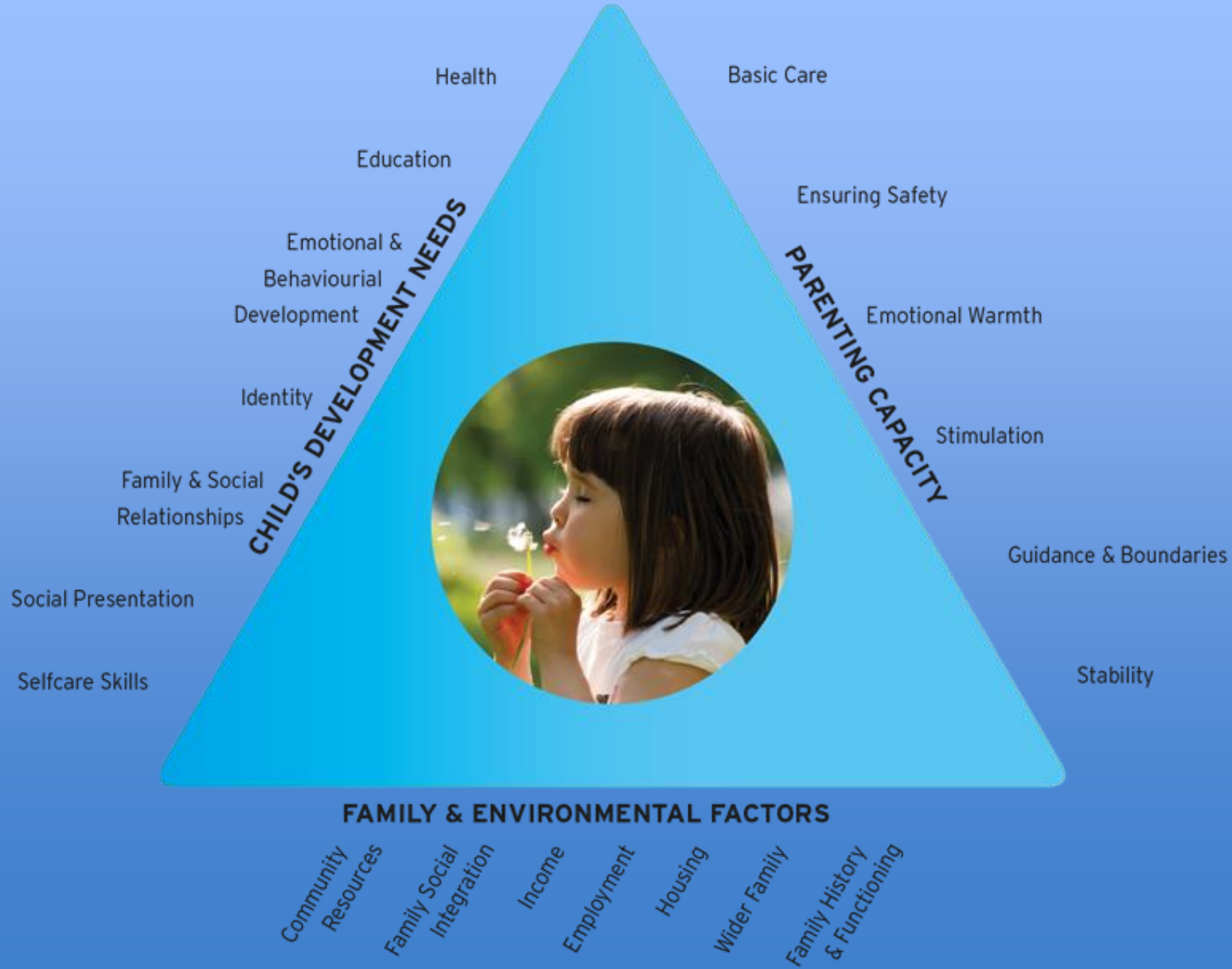
This is the framework professionals who work with 'at risk' individuals use to help them assess, understand and agree a partnership response to the individuals needs when assessing if they are a 'child or adult in need'.

A good assessment is one which investigates all three areas, represented on each side of the triangle:

- The individuals development needs, including whether they are suffering, or likely to suffer, significant harm
- Parents' or carers' capacity to respond to those needs
- The impact and influence of wider family, community and environmental circumstances



ASSESSMENT FRAMEWORK



LEGISLATION



- Over the years, several pieces of legislation have been applied to safeguard and protect children, young people and adults at risk
- England, Northern Ireland, Scotland and Wales each have their own framework, setting out the duties and responsibilities of organisations to keep children and adults at risk safe
- Visit www.gov.uk for all the acts and regulations relating to safeguarding children and adults



LEGISLATION

Children Act 1989

The Children Act 1989 is seen as the first significant law which put in place most of the child protection structures and principles we use today. The Act allocates duties to all parties involved including local authorities, the police, parents and other agencies in the United Kingdom.

Children Act 2004

The Children Act 2004 provides clear accountability and integration within children's services, to enable better joint working and to secure a better focus on safeguarding children. The idea behind the Act is to promote co-ordination between organisations to improve the overall well-being of children.



Working Together to Safeguard Children (HM Government 2018)

- The governments statutory, multi-agency child protection document for safeguarding and promoting the welfare of children
- Helps practitioners identify abuse and neglect and take appropriate action in response
- It sets out how organisations and individuals should work together and how practitioners should conduct assessments for children
- This guidance document has a robust focus on putting children at the centre of the safeguarding system and encourages every individual and agency to play their full part



THE CARE ACT 2014

- The Care Act is the most significant reform of social care in over 60 years, replacing most previous law relating to carers and adults at risk being cared for
- Sets out a clear legal framework for how local authorities and other parts of the health care system should protect adults at risk from abuse or neglect
- This Act replaces and builds on the previous 'No Secrets' guidance which was introduced by the government in 2000. The Care Act 2014 places safeguarding on a statutory footing
- The government stated that three particular concepts should underpin safeguarding adults; ***protection, justice and empowerment*** (Minister of State, 2010)



The care act is the most relevant to safeguarding



THE CARE ACT 2014

The Care Act enshrines the following principles, which underpin all adult safeguarding work:

- **Empowerment** - presumption of person led decisions and informed consent
- **Prevention** - it is better to take action before harm occurs
- **Proportionality** - proportionate and least intrusive response appropriate to the risk
- **Protection** - support and representation for those in greatest need
- **Partnership** - local solutions through services working with their communities
- **Accountability** - accountability and transparency in delivering safeguarding

Agencies can use the principles to benchmark existing adult safeguarding arrangements to see how far they support this aim and to measure further improvements.



THE MENTAL CAPACITY ACT 2005

When safeguarding and protecting adults at risk, it is important that you are aware of and understand the issues relating to consent.

The Mental Capacity Act is designed to protect and empower adults at risk who may lack the mental capacity to make their own decisions about their care and treatment. It is a law that applies to individuals aged 16 and over.

Other examples of people who may lack the capacity include those with:

- | | |
|--------------------------------|---|
| • Dementia | • A mental health condition |
| • A severe learning disability | • Unresponsiveness caused by anaesthetic or sudden accident |
| • A brain injury | |



LEGISLATION

Safeguarding Vulnerable Groups Act 2006

Created to help avoid harm, or risk of harm, by preventing people who are unsuitable to work with children or adults at risk from gaining access to them through their work.

Disclosure and Barring Service (DBS)

Do you have a DBS?

The DBS enables organisations in the public, private and voluntary sectors to make safer recruitment decisions by identifying candidates who may be unsuitable for certain work, especially that involve children or adults at risk.



RIGHTS OF A CHILD

The United Nations Convention on the rights of a child state that every child has basic fundamental rights which include:

- Life, survival and development
- Protection from violence, abuse or neglect
- An education that enables children to fulfil their potential
- Be raised by, or have a relationship with, their parents
- Express their opinions and be listened to



RIGHTS OF AN ADULT AT RISK

The Human Rights Act 1998 provides all of us with basic rights as humans. These rights include:

- Your right to life

- Your right to not be tortured or be treated in an inhuman way

- Your right to family life



MODULE 3

Roles and responsibilities



SAFEGUARDING PARTNERS

Government agencies have a significant involvement in safeguarding and promoting the welfare of individuals. This is led by three key bodies who make up the local safeguarding partnership:

- Local authorities
- Chief officers of police
- Clinical commissioning groups (Health)



OTHER AGENCIES

Other agencies should be included, but their active engagement is best agreed locally in a mutually meaningful way. These could include:

- Education including independent settings
- The probation and rehabilitation teams
- The fire service
- Community, sports, faith and charity groups



ROLES AND RESPONSIBILITIES

Local Authority Designated Officer (LADO)

The LADO is employed within social care services with the specific role to examine allegations made against volunteers or staff who work with children.

Care Quality Commission (CQC)

CQC ensures that health and social care services provide people with safe, effective, compassionate, high-quality care and encourage care services to improve.



SOCIAL CARE SERVICES

Local authority social care services support families and safeguard children, young people and adults at risk who may be at risk of abuse and neglect.

- **Children, young people and families**

This include preventative family support and child protection services, child placement, fostering, adoption, working with young offenders, children and young people who have learning or physical disabilities as well as support for families and carers.

- **Adults at risk**

This includes support for the elderly, people with mental health problems, learning or physical disabilities, those with alcohol or substance misuse problems, the homeless, prevention of abuse or neglect, domestic abuse and associated support for families and carers.



SAFEGUARDING POLICY

A safeguarding policy is a statement defining what an organisation will do to ensure the safety of children and/or adults at risk.

A safeguarding policy may include:

- | | |
|---|--|
| • Aims and objectives | • Other workplace related policies |
| • Definitions | • Equality statement |
| • Legal framework to support the policy | • Staff training requirements |
| • Organisational responsibilities | • Procedures for reporting |
| • Arrangements for implementation | • Review dates and authorising signatories |



Awareness of Safeguarding

01.06.2020



Prifysgol Cymru

Y Drindod Dewi Sant

University of Wales

Trinity Saint David

UWTSD – Safeguarding Policy – Moodle



SAFEGUARDING LEAD

The role of the Safeguarding Lead in an organisation

- Be a central point of contact in the organisation for safeguarding vulnerable individuals
- Seek support and advice from other professionals
- Being alert to the signs and indicators of abuse and neglect and to refer any concerns appropriately
- Keeping records safe and compliant in line with the Data Protection Act
- Promoting welfare and safeguarding related policies and procedures



Awareness of Safeguarding

01.06.2020



Prifysgol Cymru
Y Drindod Dewi Sant
University of Wales
Trinity Saint David

[Safeguarding | The University of Wales Trinity Saint David \(uwtsd.ac.uk\)](http://uwtsd.ac.uk)

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The 4 R's

1. **Recognise**
2. **Record**
3. **Report**
4. **Refer**

Awareness of Safeguarding

01.06.2020

Safeguarding - Appropriate behaviour **Group task**



MODULE 4

Abuse and neglect



SIGNIFICANT HARM

The term '**significant harm**' can include any form of abuse, neglect, accident or injury that is sufficiently serious to adversely affect progress and enjoyment of someone's life.

- **Abuse** is the violation of an individual's human and civil rights by any other person or persons. The abuse can vary from treating someone with disrespect in a way which significantly affects the persons enjoyment of life, to causing actual physical suffering
- **Neglect** is the persistent failure to meet a person's basic physical and/or psychological needs, likely to result in the serious impairment of a person's health or development



FORMS AND CHARACTERISTICS OF ABUSE

Although it is very difficult to accept, child and adult abuse does happen and is unfortunately an all too common occurrence across most cultures and countries. Any child or adult, regardless of their age, gender, race, religion, culture or social background may be a risk of physical, sexual or psychological harm and a potential victim of abuse.

Categories of abuse:

- | | | |
|-----------------------|------------------------|----------------------------|
| • Physical abuse | • Domestic abuse | • Organisational abuse |
| • Psychological abuse | • Financial abuse | • Neglect and self-neglect |
| • Sexual abuse | • Discriminatory abuse | • Modern slavery |



PHYSICAL ABUSE

Physical abuse means any non-accidental act or behaviour towards a person causing injury, trauma or other physical suffering or bodily harm.

May involve: Hitting; shaking; slapping; pushing; kicking; poisoning; drowning; burning or scalding, etc

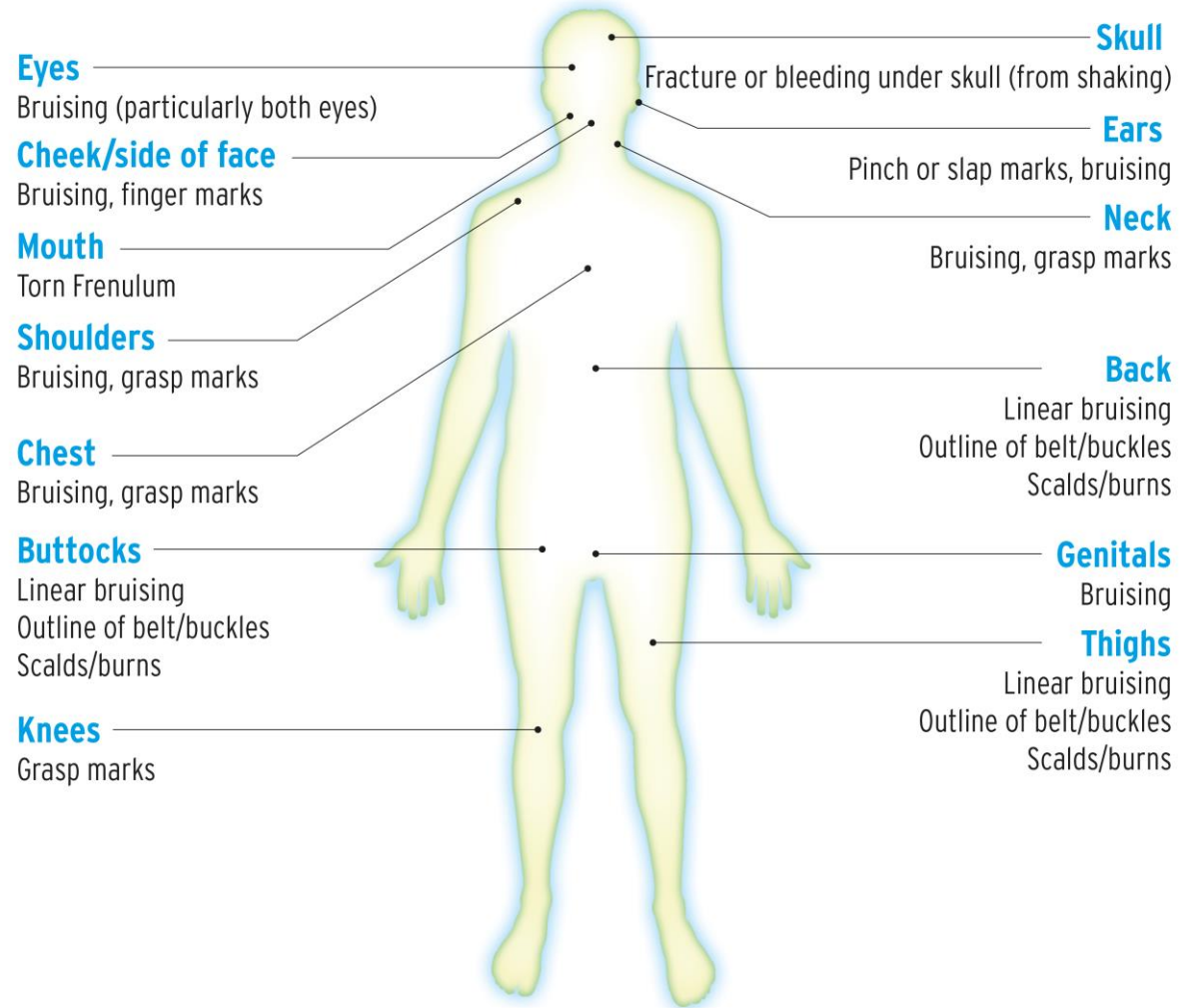
Indicators of physical abuse (non-accidental injuries):

Injuries in unusual positions (i.e. back, buttocks, behind ears, genitals etc); injuries inconsistent with the age, ability or lifestyle of the person; apparent finger marks, slap marks, bite marks, burns and fractures on the body, etc



COMMON SITES FOR NON-ACCIDENTAL PHYSICAL INJURY

Where is likely to be visible?



Physical Punishment is illegal in Wales.

It is unlawful for a parent to smack their child in England except where this may amount to 'reasonable punishment'.

From 21 March 2022

physical punishment

of children will be

illegal in Wales



SEXUAL ABUSE

Sexual abuse can involve forcing or enticing a child or adult to take part in sexual activities, not necessarily involving a high level of violence, whether or not the individual is aware of what is happening.

May involve: Physical contact including assault by penetration (rape or oral sex); non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.



Can also include non-contact activities such as involving children or adults in looking at, or in the production of sexual images; watching sexual activities; grooming a child or adult in preparation for abuse; encouraging a child to behave in sexually inappropriate ways.



Awareness of Safeguarding

01.06.2020

SEXUAL ABUSE **Group task**

POSSIBLE INDICATORS?

SEXUAL ABUSE – POSSIBLE INDICATORS

- Detailed sexual knowledge inappropriate to the age of the child
- Sexually explicit language and behaviour
- Increased frequency of visits to the toilet and bed wetting
- Behaviour that is excessively affectionate or sexual towards others
- Pregnancy, sexually transmitted diseases, indecent assault, loss of sleep
- Fear of medical examinations and being alone
- Vulnerable individuals who go missing from home or education
- Concerning behaviour by adults, for e.g. an unusual interest in a specific child



Awareness of Safeguarding

01.06.2020



**Brook sexual behaviours
traffic light tool**

<https://www.brook.org.uk/education/sexual-behaviours-traffic-light-tool/>

TEA

BREAK



Group task

EMOTIONAL ABUSE

Emotional abuse is the persistent emotional maltreatment of a person such as to cause severe adverse effects on the persons mental health, emotional development and self-esteem.

May involve making the person feel:

- Worthless
- Unloved
- Inadequate

Can also involve:

- Bullying
- Frightening the child / adult
- Exploitation
- Corruption
- Deliberately silencing a person



DOMESTIC ABUSE

May involve: physical, sexual, psychological or financial abuse between those aged 16 or over who are, or have been intimate partners or family members regardless of gender or sexuality.

Exposure to domestic abuse can include seeing or hearing the ill-treatment of others. Prolonged or frequent exposure can have a serious impact on a child's development, emotional well-being and can also have an impact on the child's education.

Children exposed to domestic abuse are seen as 'children in need' and in some cases, may be at risk of significant harm – a referral to Children's Social Care Services must be considered.



EMOTIONAL ABUSE

Possible indicators

- Physical, mental and emotional developmental delays, difficulties with trust and affection
- Negativity, hopelessness and negative view of themselves, family and society
- Lack of empathy, compassion and remorse
- Changes in appetite, poor concentration, difficulty making friends, unexplained fear
- Carer constantly rejects and ignores the vulnerable individual, depriving them of responsiveness and stimulation
- Carer isolates the vulnerable individual and prevents them building relationships and making friends
- Carer constantly criticises or humiliates the vulnerable individual and appears unable to give praise



FINANCIAL OR MATERIAL ABUSE

May involve: Theft; fraud; exploitation; pressure in connection with wills; property and inheritance; financial transactions; misuse or misappropriation of property, possessions or benefits.

Possible indicators: Unexplained sudden inability to pay bills or maintain lifestyle; unusual or inappropriate bank account activity; withholding money; recent change of deeds or title of property; unusual interest shown by family or others in the individual's assets; person managing financial affairs is evasive or uncooperative; fraud or intimidation in connection with wills and property.



DISCRIMINATORY ABUSE

May involve: Types of harassment or insults because of someone's race, gender, gender identity, age, disability, sexual orientation or religion.

Possible indicators: Lack of respect shown to an individual; signs of a sub-standard service offered to an individual; repeated exclusion from rights afforded to citizens such as health, education, employment, criminal justice and civic status.



ORGANISATIONAL ABUSE

May involve: Neglect and poor standards of care in an institution or care setting, such as a hospital or care home, or if an organisation provides care in someone's home.

Possible indicators: Repeated failures on the part of an organisation, despite warnings and agreement to improve; routine acceptance of poor practice; lack of individual care plans; inappropriate physical intervention.



MODERN SLAVERY

Encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.

Possible indicators: Poor dishevelled appearance; poor command of English or awareness of local environment; Unwillingness to provide basic information about self.



FORCED MARRIAGE

Forced marriage takes place when the bride, groom or both do not want to get married but are forced to do so by others.

People forced into marriage may be tricked into going abroad, physically threatened and/or emotionally blackmailed to do so.

Unlike arranged marriages where the bride and groom have the choice whether they want to marry, there is no freedom of choice in a forced marriage.



COUNTY LINE GANGS

County lines is a term used to describe gangs and organised criminal networks involved in exporting illegal drugs into one or more importing areas within the UK, using dedicated mobile phone lines or other form of “deal line”.

They are likely to exploit children and vulnerable adults to move and store the drugs and money, and they will often use coercion, intimidation, violence (including sexual violence) and weapons.

Home Office – Criminal Exploitation of Children and Vulnerable Adults September 2018



NEGLECT AND ACTS OF OMISSION

May involve:

- Ignoring medical or physical care needs
- Failure to provide access to appropriate health, social care or educational services
- The withholding of the necessities of life, such as medication, adequate nutrition and heating



NEGLECT AND ACTS OF OMISSION

Possible indicators:

- Failure to thrive and poor hygiene
- Constant hunger, tiredness and malnutrition
- Frequent accidental injuries, illnesses and untreated medical problems
- Developmental delays, poor state of clothing and low self-esteem
- Treated differently to others by their carer
- Apparent bed sores / pressure sores caused by unrelieved pressure to the skin (such as being confined to a bed or chair)





SELF-NEGLECT

Self-neglect covers a wide range of behaviour with a person failing to care for their personal hygiene, health or surroundings.

Possible indicators: Very poor personal hygiene; lack of essential food, clothing or shelter; malnutrition and/or dehydration; neglecting household maintenance; collecting a large number of animals in inappropriate conditions; non-compliance with health or care services; inability or unwillingness to take medication or treat illness or injury.

This excludes children who cannot self-neglect as they should have an adult or organisation responsible for their wellbeing.



BULLYING

- Bullying occurs when an individual or group of individuals show hostility towards another individual

- It can include physical abuse such as hitting or pushing, and verbal abuse including name calling and spreading rumours

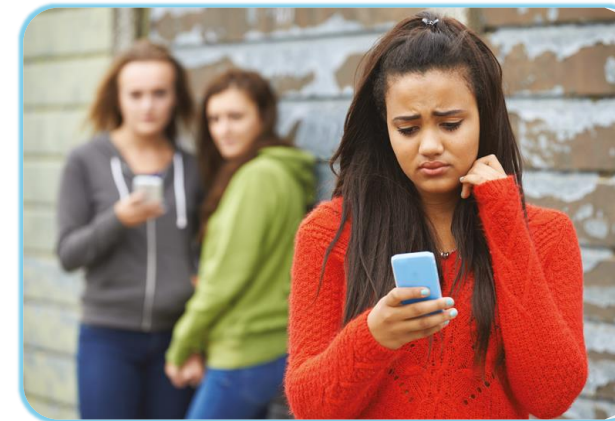
- Bullying can happen at school, at home, in the workplace or in the community. It can hurt both children and adults physically and emotionally



ELECTRONIC MEDIA ABUSE

Children and adults at risk can be abused through electronic media such as websites and social media platforms. Methods of abuse may include:

- Circulation of pictures and videos of abuse
- A person being groomed for the purposes of abuse
- Exposure to sexual and other offensive content
- The use of the internet to engage a person in extremist ideologies



HATE AND MATE CRIME

Hate crime

Discriminatory acts towards an individual motivated by another's hostility, prejudice or hatred based upon who or what they believe or perceive the other to be.

This may involve an individual being targeted because of their race, religion or belief, sexual orientation, transgender, disability etc. Such incidents may also result in an individual being discriminated against under the Equality Act 2010.

Mate crime

A form of crime in which a perpetrator befriends a vulnerable person with the intention of then exploiting the person financially, physically or sexually.

Victims of mate crime may be enticed into committing criminal acts themselves and taking the blame to protect the real perpetrator.

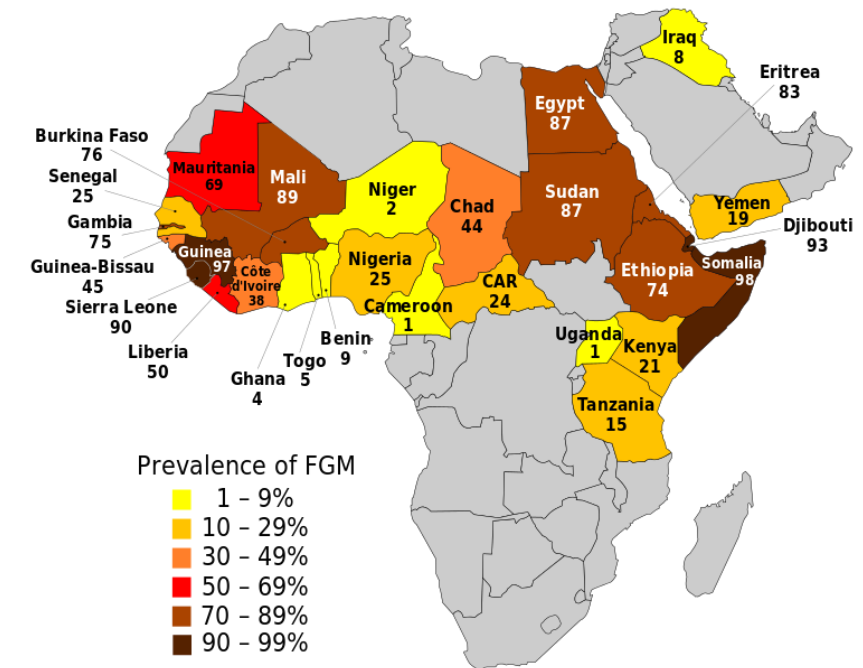


FEMALE GENITAL MUTILATION (FGM)

Also known as 'female circumcision' or 'cutting'.

It is a procedure where the female genitals are deliberately cut, injured or changed, but where there's no medical reason for this to be done. This procedure is illegal in the UK and is a form of child abuse.

There is a mandatory reporting duty placed upon teachers, social care workers and healthcare professionals to report to the police where they discover that FGM appears to have been carried out on a girl under the age of 18.



FGM prevalence in Africa, Iraqi Kurdistan and Yemen, 2015 Reference: wikipedia.org



TERRORISM, EXTREMISM AND RADICALISATION

Terrorism in the UK can involve the exploitation of adults at risk and children. People involved in extremist activity come from a range of backgrounds and experiences – **there is no such thing as a “typical extremist”.**

People may become involved in terrorism or violent extremism for many reasons, including:

- To defend their culture and beliefs
- Peer pressure by friends and family
- A lack of identity in society
- Radicalised by extremist groups
- Seeking vengeance or retaliation



INDICATORS OF RADICALISATION

- Joining or seeking to join extremist organisations
- Becoming more argumentative over their viewpoints, condemning those who disagree
- Being overly secretive about what they are accessing and viewing online
- Using extremist narratives and a global ideology to explain personal disadvantage
- Losing interest in activities they used to enjoy
- Experiencing a high level of social isolation
- Altering their style of clothing and appearance



TEA " BREAK



WHAT CAN MAKE CHILDREN MORE LIKELY TO SUFFER HARM?

Some risk factors are common across all types of abuse and neglect, but that doesn't mean abuse will definitely happen.

A child or adult who doesn't have any risk factors could be abused, and a child or adult with multiple risk factors may never experience abuse or neglect.

But we do know that having one or more of these issues can increase the risk of harm.



WHAT CAN MAKE CHILDREN MORE LIKELY TO SUFFER HARM?

Children may be more vulnerable to being harmed if they are:

- Disabled children
- Children who are picked on for being different (for e.g. asylum seeking / refugee children)
- Children who are already thought of as a problem (for e.g. children in care)
- Children who have experienced other forms of abuse



VULNERABILITY OF BABIES

All babies need to be safe, nurtured and able to thrive. The early care they receive provides the essential foundations for all future physical, social and emotional development. Whilst most parents do provide the love and care their babies need, sadly too many babies suffer abuse and neglect.

The emotional abuse, neglect or physical harm of babies is particularly shocking both because babies are totally dependent on others.

- 45 percent of serious case reviews in England relate to babies under the age of 1
- In England and Wales, babies are eight times more likely to be killed than older children



MODULE 5

Identifying concerns and disclosure



The 4 R's

1. **Recognise**
2. **Record**
3. **Report**
4. **Refer**

HOW CONCERNS ARE RAISED

You learn about how concerns may be raised through behaviours, appearances and relationships with their parents, carers or significant others.

Concerns may also be raised about a child or adult at risk by a:

- | | | |
|-------------|--|--------------------------|
| • Parent | • Sibling | • Colleague |
| • Neighbour | • Member of the public | • Another child or adult |
| • Anonymous | • Above all, the individual themselves | |



You should never agree to keeping secrets and should always let them know you may have to share what they are telling you with others, but only with others who will help to protect them and keep them safe.



HOW CONCERNS CAN ARISE

Concerns about a child or adult at risk can come to light in many ways, including:

- Disclosure from a child, adult at risk or parent
- Letter, phone call or email
- Appearance: inappropriate, dirty, ill-fitting clothing
- Behaviour of a child: emulating adult behaviour
- Behaviour of a parent/carer toward the child or adult at risk: aggressive or violent
- An observation made of an abusive incident
- Report of bullying
- Self-disclosure of an adult
- Whistleblowing by staff about a staff member



Disclosures of abuse can occur through a variety of means:

- Verbally
- Appearance
- Behaviour
- Role play or re-enacting
- Drawing pictures
- Writing stories



RESPONDING TO DISCLOSURE

If you are approached by an individual with a disclosure that they are being, or have been abused:

- Stay calm – listen carefully and do not interrupt. Always reassure the individual and be sympathetic
- Do not make jokes, disbelieving comments, change the subject or promise to keep secrets
- Tell the individual that they have done the right thing in telling you and you are treating the information seriously
- Reflect back on what you have been told, "so I can be clear and understand what you have told me; you say that..."
- Do not attempt to contact the alleged abuser for any reason.
- Explain to the individual that you will need to communicate their concerns with the appropriate person
- Record the information, including a written note of the observations, the date and time, and the persons present
- Report to the relevant person with the information you have gathered



Barriers to a child or adult at risk disclosing their concerns..



- **Having no one to turn to**
- **Fear of repercussions from the abuser**
- **Not wanting to burden others**
- **Developmental or emotional barriers**
- **Anxiety surrounding the confidentiality of the information they may provide**

RECORDING INFORMATION **Group task**

It is very important that information is recorded at the time of disclosure.

What Information might we need to record?



RECORDING INFORMATION

It is very important that information is recorded at the time of disclosure.

Information may include:

- Details of the people involved including the victim and the alleged perpetrator (if disclosed), including names, address details, date of birth, ethnic origin and any disabilities they may have
- Information regarding the nature of the allegation
- A description of any incident or injury sustained
- The time, date, location and any persons' present
- A concise account of what is said by the victim, using their own words
- Information about any action to be taken
- Details about the person recording the information
- Keep a record of any third-party correspondence (e.g. police officer, social care services etc.)



The 4 R's

1. **Recognise**
2. **Record**
3. **Report**
4. **Refer**

TEA " BREAK



MODULE 6

Making judgements



CHILD FOCUS

- It is sometimes easy to jump to conclusions about a child's upbringing or welfare if it appears different to our own
- We should be careful not to make assumptions, but to remain aware of the possible signs and indicators of abuse and to maintain a child rather than an adult focus



THE CONCERN CONTINUUM **Group task**

Statement 1

Your neighbour's 11-year-old child regularly returns home from school with her 8-year-old brother to an empty house. Their single parent father does not get back from work until 6.30pm.

Statement 2

A 12-year-old boy has a mark on his face. He tells you that he has been slapped by a religious leader. His father has told him that he must always respect his elders.

Statement 3

You often hear your neighbours fighting late into the night. They shout a lot and you have heard the woman crying. They have a baby. When you have seen the baby, she looks well and is always clean and nicely dressed.

Continued...



CASE STUDY – STATEMENTS *CONTINUED* **Group task**

Statement 4

A 6-year-old boy always comes to school late and never has the proper uniform. He looks scruffy and his hair is generally greasy and unwashed. You notice that the other children make fun of him.

Statement 5

A 10-year-old wheelchair user spends the evenings looking out of the window or watching TV on her own because she cannot get around without help. She has two younger sisters, aged 6 and 3, who are full of energy and take up a lot of their mother's attention.

Statement 6

A 14-year-old girl goes out to nightclubs on most Friday nights and comes home in the early hours so drunk that she can barely walk. She appears to have a boyfriend who is much older, drives a car and often stays over at the girl's home.



- Concerns about a child's welfare and safety are on a continuum. In most cases, it is not possible to know how serious these are without an assessment being carried out
- Children are raised in different ways and patterns of family life vary. There is no one perfect way to raise a child
- Routine, meeting basic needs, setting behavioural boundaries and discipline, keeping the child safe, loved and appropriately clothed, can appear differently in every culture



CHILDREN'S VIEWS

Some of the views of children are publicised in the current **Working Together to Safeguard Children** guidance document.

Children have said that they need:

- | | |
|----------------------------|------------------------------|
| • Vigilance | • Information and engagement |
| • Understanding and action | • Explanation |
| • Stability | • Support |
| • Respect | • Advocacy |



“No single professional can have a full picture of a child's needs and circumstances and, if children and families are to receive the right help at the right time, everyone who comes into contact with them has a role to play in identifying concerns, sharing information and taking prompt action.”

Working Together to Safeguard Children 2018



MODULE 7

Reporting concerns



SILENCING FACTORS

There are a number of silencing factors that could prevent someone communicating their worries and concerns about a child or adult at risk who may be suffering from abuse:

- Fear that you may be wrong
- Doubts about the individual's truthfulness
- Attempts to bind you to secrecy
- Uncertainty of procedures and consequences
- Not wanting to interfere in family life



BARRIERS TO SHARING WORRIES

- Feeling there is no one to talk to (who will listen and can be trusted)
- Fear of not being listened to, understood, taken seriously or being believed
- A belief in self-reliance
- A sense of futility about sharing problems and a belief that nothing will change
- Not wanting to burden others
- Adults trivialising or over-reacting and making matters worse
- Limited knowledge of formal helping services and what they do



ALLEGATIONS IN THE WORKPLACE



- In any situation where concerns are raised, you must report them immediately to either the safeguarding lead or designated manager
- If the concerns or allegations are about one of the persons you need to report to, you should report to the one which is not involved, or seek advice from social care services
- You must not discuss the concerns or allegations directly with the staff members concerned
- There should be procedures within all organisations who come into contact with children or adults at risk, to deal with any concerns or allegations made against staff

ALLEGATIONS IN PUBLIC LIFE

- If any safeguarding concerns are raised away from the workplace then these must be reported to the appropriate local safeguarding board or partnership which can be contacted through the local council
- If you believe that a child or adult at risk is in immediate danger, you should call 999
- If you believe a crime has been committed, you should call the police non-emergency number 101



SHARING INFORMATION

Everyone has a duty to share information regarding concerns about the welfare of a child or adult at risk.

- Where there are concerns about an individual, the sharing of information in a timely and effective manner between organisations is very important and can reduce the risk of harm
- No individual should assume that someone else will pass on the information which they think may be critical to keeping someone safe
- Fears about sharing information cannot stand in the way of the need to promote the welfare and protect the safety of that person
- Concerns should only be shared privately and formally with the relevant people and should not be discussed with other parents or carers, or outside of work with family and friends



Awareness of Safeguarding

01.06.2020



Prifysgol Cymru
Y Drindod Dewi Sant
University of Wales
Trinity Saint David

[Safeguarding | The University of Wales Trinity Saint David \(uwtsd.ac.uk\)](https://uwtsd.ac.uk)

Safeguarding Lead

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Awareness of Safeguarding

01.06.2020

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