

Cover Sheet

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Assignment title and number:

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AI statement :

I acknowledge the use of Copilot

<https://copilot.microsoft.com/chats/uWfmGxnT1d6Cv1bTnZhjv> to support me in research on the following dates, using the following prompts:

25 June 2025

- Data in relation to impact of domestic abuse
- Safeguarding in relation to domestic abuse
- Safeguarding in relation to Welsh policy and legislation

27 June 2025

- NICE Guidelines for social workers
- Role of a social worker in Wales

04 July 2025

- Safeguarding in Wales

The Five R's –

Understanding and responding to safeguarding concerns is critical when caring for others (**Wales Safeguarding Procedures, 2019; Chambers et al., 2021**). The Five R's—Recognising, Recording, Reporting, Referring and Responsibilities provide a structured approach for identifying and acting on concerns (**Knowledge academy, 2025: Online DBS, 2025: Sidebottom et al., 2016**). These are outlined below:

Recognising – **NSPCC (No Date)** stresses the importance of understanding and identifying signs of abuse, neglect, exploitation, or trauma including physical, behavioural, or relational indicators. **Part 7 of the Social Services and Well-being (Wales) Act 2014** defines **a child at risk** and outlines professional duties to recognise these confidently.

Recording - Accurate, objective timely documentation is crucial, what was observed, said and to whom it was reported. Aligned with the **Code of Practice (Part 3)** and all **Wales Safeguarding Procedures**, effective recording supports accountability, continuity of care and multi- agency communication (**Douglas and Fourie, 2021**).

Reporting – Professionals have a statutory duty to report concerns to the Designated Safeguarding Person following internal safeguarding protocols. **Ferguson (2017)** highlights how organisational pressures and the complexities of risk interpretation reinforce the need for strong internal protocols.

Referring - Where risk persists, concerns must be escalated externally. **Under Section 47 of the Children Act 1989**, local authorities are duty bound to investigate. **Wilkins (2015)** notes that referrals depend on balancing risk and protective factors, shaped by professional judgement within statutory guidance. Despite statutory guidance referral decisions remain interpretive, underscoring the need for shared thresholds and consistent protocols **Working Together to Safeguard Children (2023)**.

Responsibilities - Professionals must act immediately and reassuringly without investigating, keeping the person safe while maintaining an open mind. This is

underpinned by **Sections 130 and 131 of the Social Services and Well-being (Wales) Act 2014** and the **Working Together to Safeguard People** guidance (Smith *et al.*, 2023).

Despite its clarity the Five R's framework can be hindered by barriers such as inadequate training, fear of error, unclear thresholds, and inconsistent recording. Organisational culture, personal or cultural bias, time pressures and workload and poor inter-agency communication also obstruct timely safeguarding responses. Addressing these challenges is essential for consistent protection (NSPCC, 2024). Local safeguarding boards should clearly define and promote the **5Rs** framework to ensure coherence across sectors. Ultimately, safeguarding is a collective professional and ethical duty, requiring all staff and volunteers to feel confident in their roles and responsibilities (Ball *et al.*, 2024; Department for Education, 2025).

Self Reflection

My previous role in Paediatric Psychology within the NHS placed me on the safeguarding frontline, regularly visiting families at home and submitting Multi Agency Referral Forms. Despite the challenges of maintaining relationships with families aware of those referrals, I often found these visits the most rewarding, especially when effective support was in place. I have also attended ICPCs and core group meetings, witnessing a range of outcomes, both positive and difficult.

It was in one of these meetings that a police officer mistakenly shared a mother's prior convictions with her now supportive partner. The animalistic howl that left that mother's body will forever be one of the most harrowing things I have ever heard. In that moment, as I held her sobbing in my arms, all professionalism left me and I unashamedly cried along with her. That moment will never leave me and still affects me today as I'm absolutely sure it does them.

In previous ICPCs and core group meetings, I approached safeguarding with a strong focus on child health, wellbeing, and development. Although I had a solid foundation in safeguarding, this module has deepened my understanding beyond typical training. I found the teaching and practice ICPC engaging, enjoyed working with my fellow students, and particularly appreciated gaining deeper insight into the role of the Social Worker.

Safeguarding is an expansive topic that can often feel overwhelming. However, tools like the All Wales Safeguarding App have made vital information more accessible. It is user friendly, always with me and combined with the weekly CASPER email updates, any changes in policy or practice can now be applied promptly.

The heartbreaking deaths of children such as Logan Mwangi, Lola James, and Kaylea Titford have underscored the urgent need for reform with a more inclusive, trauma-informed safeguarding culture in Wales. These cases highlight the vulnerabilities faced by children with emerging needs and ALN, reinforcing my commitment to advocacy, inclusion and multi agency working.

This module has expanded my safeguarding knowledge, enabling me to guide families from referral to ICPC with clarity and compassion. Drawing on my current local authority role and practitioner experience, I now apply the interconnected

knowledge to support both professionals and families, fostering a safeguarding culture that is informed, empathetic, and empowering.

Thank you.

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