**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

**Last Reviewed:**

**July 2023**

**Last Amended:**

**November 2022**

**Next Planned Review:**

**12 months or sooner if**

**indicated earlier**

Business

Impact

**MEDIUM**

**Changes are important and consistent implementation is**

**required, incorporate into your existing workflow.**

Reasons for

Review

**Following Ofsted Registration Visit**

Any changes **Yes**

made

Summary

**This Policy has been reviewed and remains appropriate to the**

**area of Safeguarding Children, Child Protection and**

**Safeguarding Adults. This Policy forms an integral part of the**

**Safeguarding Policies and Procedures. Additional links have**

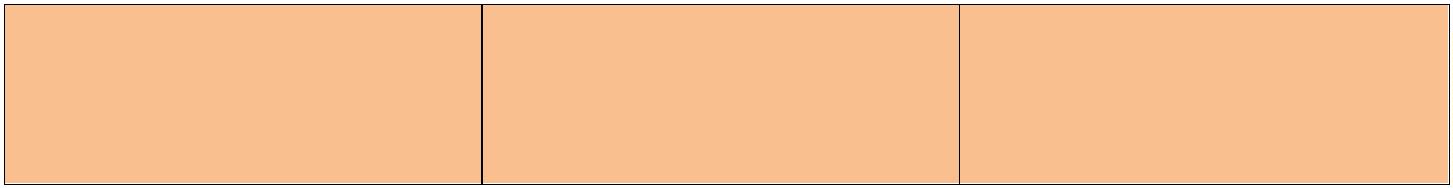
**been added and Underpinning Knowledge and Further Reading**

**links have also been reviewed and updated.**

1

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

**SECTION**

**COMPONENT OF POLICY**

**1**

**2**

**3**

**4**

**5**

Purpose

Scope

Objectives

Definitions and Recognition of abuse

Policy & Procedure

**6**

**7**

Audit

References and Guidelines

2

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

**1. PURPOSE:**

• The purpose of this policy and procedure is to ensure that appropriate action

is taken when a young person is suspected of either being abused or at risk of

abuse from parents, guardians, carers, adult visitors, other responsible adults

or other young people.

• The Safeguarding Children and Vulnerable Adults Policy and Procedure

at Nestlings Care recognises that the safeguarding and protection of children

and vulnerable adults is paramount and has priority over all other interests.

• The purpose of this policy is to protect any children or young adults who receive

our services or who we may come in to contact with during our daily work. It

also includes the children or child relatives of adults who may be receiving our

services.

• We recognise that everyone working with children has a responsibility for

keeping them safe and we have a statutory duty to ensure that robust

procedures are in place.

• This policy refers to all children up to 18 years of age (including the unborn),

regardless of nationality, culture or religion. If the child has ‘learning disabilities’

or is a care leaver, their needs may extend to their 21st birthday (Section 9

Children Act 2004). The term ‘children’ will be used throughout this policy to

refer to children and young people.

• The Care Act 2014 sets out a clear legal framework for the protection of adults

at risk of abuse or neglect, specifying that adult safeguarding duties apply to

any person aged 18 years or older who:

o Has care and support needs.

o Is experiencing, or is at risk of, abuse or neglect.

o Is unable to protect themselves because of their care and support needs.

3

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

• The Care Act Statutory Guidance 2014 sets out six principles on which to base

any actions taken in relation to an adult safeguarding concern:

o Empowerment: People being supported and encouraged to make their

own decisions and informed consent.

o Prevention: It is better to take action before harm occurs.

o Proportionality: The least intrusive response appropriate to the risk

presented.

o Protection: Support and representation for those in greatest need.

o Partnerships: Local solutions through services working with their

communities. Communities have a part to play in preventing, detecting

and reporting neglect and abuse.

o Accountability: Accountability and transparency in delivering

safeguarding.

• To support Nestlings Care in meeting the following Key Lines of Enquiry:

**SAFE**

*Protection of Children*

*Standard*

S1: How do systems, processes and practices keep people

safe and safeguarded from abuse?

**SAFE**

*Protection of*

S2: How are risks to people assessed and their safety

*Children Standard* monitored and managed, so they are supported to stay safe

and their freedom is respected?

**RESPONSIVE**

*Wishes Views and*

*Feelings Standard*

R2: How are people’s concerns and complaints listened

and responded to and used to improve the quality of

care?

**WELL – LED**

*Leadership and*

*Management*

*Standard*

W4: How does the service continuously learn, improve,

innovate and ensure sustainability?

**WELL – LED**

*Leadership and*

*Management*

*Standard*

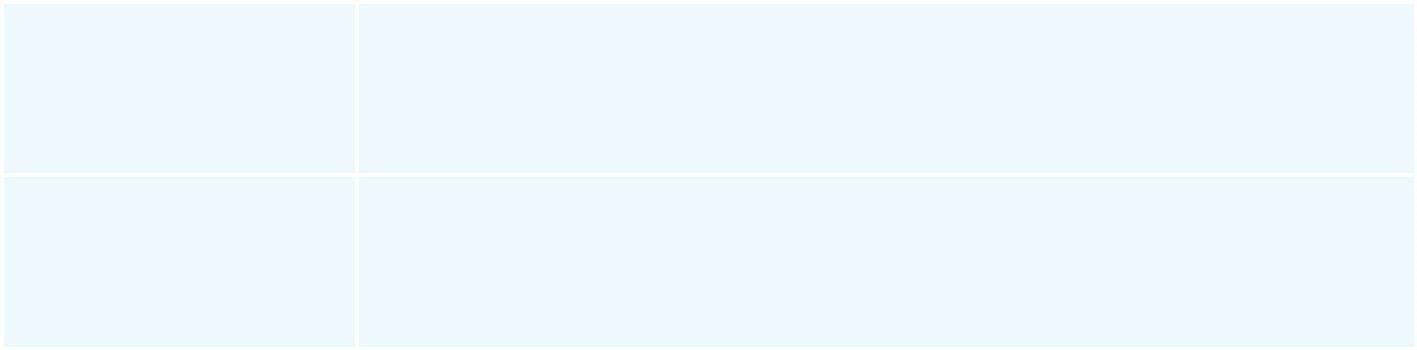
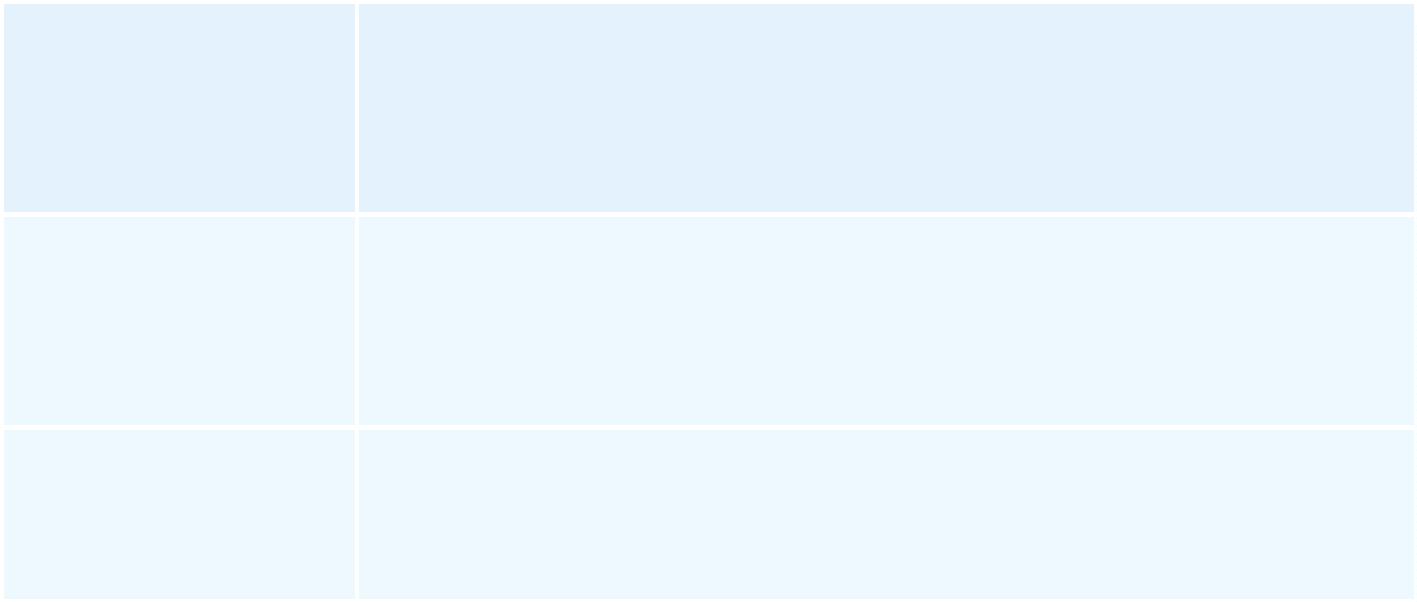
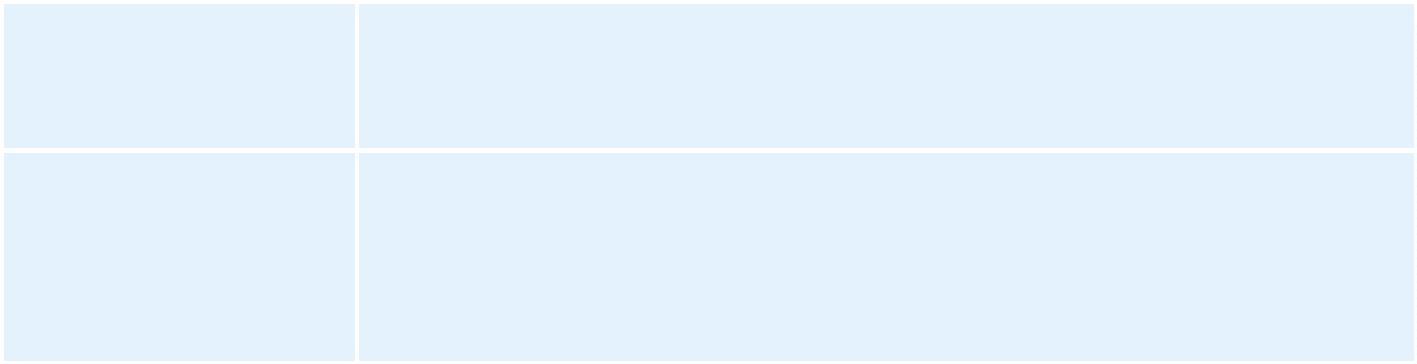
W5: How does the service work in partnership with other

agencies?

4

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

**2. SCOPE:**

• This policy applies to all young people and adults at risk, looked after within

Nestlings Care provisions. This policy must be followed by all staff in direct

contact with young people and adults at risk and outlines the procedures to

follow should concerns that an individual has suffered, or may be at risk of harm

by:

o A parent or person with parental responsibility.

o An adult known to the resident (relative, family friend, neighbour).

o A professional person who has contact through their employment.

o Another young person or people.

o People involved in organised abuse/exploitation.

• To meet the legal requirements of the regulated activities that Nestlings Care

is registered to provide:

o Counter-Terrorism and Border Security Act 2019

o Counter- Terrorism and Security Act 2015

o The Young Carers' (Need Assessment) Regulations 2015

o Chronically Sick and Disabled Persons Act (CSDPA) 1970

o Children and Social Work Act 2017

o Female Genital Mutilation Act 2003

o Serious Crime Act 2015

o Borders, Citizenship and Immigration Act 2009

o Adoption and Children's Act 2002

o Digital Economy Act 2017

o Modern Slavery Act 2015

o United Nations Convention Rights of the Child 1989

o The Sexual Offences Act 2003

o The Police Act 1997

o Children and Families Act 2014

o The Care Act 2014

5

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

o Children Act 1989

o Children Act 2004

o Equality Act 2010

o Human Rights Act 1998

o Public Interest Disclosure Act 1998

o Safeguarding Vulnerable Groups Act 2006

o Data Protection Act 2018

o UK GDPR

o CQC Key Lines of Enquiry

o Ofsted Quality Standards and Children’s Home regulations 2015

• The following roles may be affected by this policy:

o All staff

o Anyone working on behalf of Nestlings Care LTD.

o Mental health professionals

o Directors

o Students, Trainees, Apprentices, Work Experience participants

o Contractors

o Agency Staff

• The following group may be affected by this policy:

o Children

o Young Adults

• The following stakeholders may be affected by this policy:

o Family

o Commissioners

o External Health Professionals

o Local Authority

o NHS

**3. OBJECTIVES:**

•

To ensure that all young people cared for at Nestlings Care provisions have

upheld their unconditional right to be kept safe and free from harm.

6

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

•

•

To ensure that individuals cared for in any of Nestlings Care provisions are

protected from harm.

Nestlings Care to have a coordinated approach to child protection and

safeguarding and to ensure that the procedures dovetail with policies and

procedures published by the Local Safeguarding Partners.

•

To ensure that Nestlings Care meets the expectations set out by the Children

Act 1989 and 2004, Education Act, Working Together to Safeguard Children

2018, the United Nations Convention of Human Rights of the Child 1989, The

Care Act 2014, The Care Act Statutory Guidance 2014, Making Safeguarding

Personal, The Health & Social Care Act 2008, The Human Rights Act 1988

(Article 3) and Children’s home National Minimal Standards.

**4. DEFINITIONS AND RECOGNITION OF ABUSE AND CSE:**

• Abuse can be described as maltreatment of a child or vulnerable adult.

Somebody may abuse or neglect a child or vulnerable adult by inflicting harm,

or by failing to act to prevent harm. Harm can include ill treatment that is not

physical as well as the impact of witnessing ill treatment of others.

• Guidance categorises abuse of children in four types:

o Physical.

o Sexual.

o Emotional.

o Neglect.

• Ten categories of abuse are defined in regard to adults. It is recognised that

abuse takes many forms. Abuse can be described as maltreatment of a child

or vulnerable adult. Somebody may abuse or neglect a child or vulnerable adult

by inflicting harm, or by failing to act to prevent harm. Harm can include ill

treatment that is not physical as well as the impact of witnessing ill treatment

of others.

• Recognised major categories of abuse include:

(a)

(b)

Neglect and acts of Omission

Physical Abuse

7

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

(c)

(d)

(e)

(f)

Sexual Abuse

Emotional Abuse

Self Neglect

Financial abuse

Discriminatory abuse

Modern Slavery

Institutional abuse

Domestic abuse

(g)

(h)

(i)

(j)

• **Neglect and acts of omission**- This is the persistent failure to meet basic

physical and psychological needs, likely to result in the serious impairment of

health and development. It may involve failing to provide adequate food,

clothing and shelter, protection from physical or emotional harm, adequate

supervision or access to medical care or treatment. Following are examples of

neglect and acts of omission:

■ Failure to provide or allow access to food, shelter, clothing, heating,

stimulation and activity, personal or medical care.

■ Providing care in a way that the person dislikes.

■ Failure to administer medication as prescribed.

■ Refusal of access to visitors.

■ Not taking account of individuals’ cultural, religious or ethnic needs.

■ Not taking account of educational, social and recreational needs.

■ Ignoring or isolating the person.

■ Preventing the person from making their own decisions.

■ Preventing access to glasses, hearing aids, dentures, etc.

■ Failure to ensure privacy and dignity.

• Signs may include:

■ poor muscle tone/prominent joints.

■ poor skin: sores, rashes, flea bites.

■ thin or swollen tummy.

8

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

■ poor hygiene, like being dirty or smelly.

■ untreated health problems, such as bad teeth.

■ unwashed clothing.

■ inadequate clothing, like not having a coat in winter.

• The effects of neglecting an individual’s mental development may include:

■ Difficulties with school work.

■ Missing school.

• The effects of neglecting an individual’s emotional development may include:

■ Being anxious about, or avoiding people.

■ Difficulty in making friends.

■ Being withdrawn.

• The effects of neglecting an individual’s behavioural development may include:

■ Anti-social behaviour.

■ Early sexual activity.

■ Drug or alcohol misuse.

• **Physical Abuse -** Any form of injury such as hitting, shaking, throwing,

poisoning, burning, scalding, suffocating or otherwise causing physical harm is

physical abuse. Physical harm may also be caused when a parent or carer

fabricates the symptoms of or deliberately induces illness in a child a vulnerable

adult. It is a criminal offence to physically assault another individual, and should

be reported to the Local safeguarding board and to the police by a senior

member of staff for appropriate investigation. Other examples:

■ Assault, hitting, slapping, punching, kicking, hair-pulling, biting, pushing

9

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

■ Rough handling.

■ Scalding and burning.

■ Physical punishments.

■ Inappropriate or unlawful use of restraint.

■ Making someone purposefully uncomfortable (e.g. opening a window

and removing blankets).

■ Involuntary isolation or confinement.

■ Misuse of medication (e.g. over-sedation).

■ Forcible feeding or withholding food.

■ Unauthorised restraint, restricting movement (e.g. tying someone to a

chair).

• Signs may include:

■ Discrepancy between injury and explanation, conflicting explanations,

or no explanation for an injury, or Injuries of different ages.

■ Delay in seeking treatment.

■ Bruising (including bruising which could be deliberately applied or

multiple bruising).

■ Bites, burns, ligature marks, scalds, fractures, head injuries or

poisoning that are inconsistent with an accident.

■ Constant diarrhoea or voracious appetite.

■ Listlessness or fixed watchfulness.

■ Alopecia.

• **Sexual Abuse -** This involves forcing or enticing an individual to take part in

sexual activities, including prostitution or sexual exploitation, whether or not the

child or vulnerable adult is aware of what is happening. The activities may

involve physical contact, including penetrative activities (e.g. rape, buggery or

oral sex) or non-penetrative acts. Also included would be non-contact activities

such as involving children or vulnerable adults in looking at or the production

of sexual photographic or digital images, watching sexual

10

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

activities, or encouraging children or vulnerable adults to behave in sexually

inappropriate ways.

• Signs may include:

■ Sexually transmitted infections or soreness or injury in genital/anal area.

■ Recurrent urinary tract infections.

■ Vaginal discharge/bleeding or pregnancy.

■ Changes in behaviour – e.g. wetting/soiling.

■ Sleep disturbance.

■ Inappropriate sexual language/knowledge.

■ Excessive masturbation or promiscuous affection seeking.

■ Running away.

■ Drug/alcohol abuse or eating disorders.

■ Psychosomatic illness.

• Sexual exploitation can take many forms; from the seemingly ‘consensual’

relationship where sex is exchanged for attention/affection, accommodation or

gifts, to serious organised crime and child trafficking. What marks out

exploitation is an imbalance of power within the relationship. The perpetrator

always holds some kind of power over the victim, increasing the dependence

of the victim as the exploitative relationship develops.

• Sexual exploitation of children and young people has been identified throughout

the UK, in both rural and urban areas, and in all parts of the world. It affects

boys and young men as well as girls and young women from any and of any

ethnicity. It is a type of Sexual Abuse and can have a serious impact on every

aspect of the lives of children involved. Child sexual exploitation (CSE) is the

organised and deliberate exploitation of a child purely for the sexual

gratification of adults.

• The sexual exploitation of children is described in the Government's guidance

as "involving exploitative situations, contexts and relationships where young

people (or a third person or persons) receive 'something' (e.g. food,

accommodation, drugs, alcohol, cigarettes, affection, gifts, money) because of

their performing, and/or another or others performing on them, sexual

11

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

activities. It can occur using technology without the child's immediate

recognition; e.g. being persuaded to post sexual images on the internet/mobile

phones without immediate payment or gain. In all cases, those exploiting the

child have power over them by their age, gender, intellect, physical strength

and/or economic or other resources. Violence, coercion and intimidation are

common, involvement in exploitative relationships being characterised in the

main by the child's limited availability of choice resulting from their

social/economic and/or emotional vulnerability."

• Sexual exploitation results in children and young people suffering harm and

causes significant damage to their physical and mental health. It can also have

profound and damaging consequences for the child's family. Parents and

carers are often traumatised and under severe stress. Siblings can feel

alienated and their self-esteem affected. Family members can themselves

suffer serious threats of abuse, intimidation and assault at the hands of

perpetrators.

• There are strong links between children involved in sexual exploitation and

other behaviours such as running away from home or care, bullying, self- harm,

teenage pregnancy, truancy and substance misuse. In addition, some children

are particularly vulnerable, for example, children with special needs, those in

residential or foster care, those leaving care, migrant children, unaccompanied

asylum-seeking children, forced marriage and those involved in gangs.

• Many sexually exploited children are hidden from public view. They are unlikely

to be loitering or soliciting on the streets. Research and practice has helped to

move the understanding away from a narrow view of seeing sexual exploitation

as a young person standing on a street corner selling sex.

• There is also often a presumption that children are sexually exploited by people

they do not know. However, evidence shows that this is often not the case and

children are often sexually exploited by people with whom they feel they have

a relationship, e.g. a boyfriend/girlfriend.

12

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

• Due to the nature of the grooming methods used by their abusers, it is very

common for children and young people who are sexually exploited, not to

recognise that they are being abused. Staff should be aware that, particularly

young people aged 17 and 18, may believe themselves to be acting voluntarily

and will need support to work with them so they can recognise that they are

being sexually exploited.

• There are three main types of CSE:

■ Inappropriate relationships – this usually involves one perpetrator who

has inappropriate power or control over a young person. There is often

a significant age gap and the victim may believe they are in a loving

relationship.

■ ‘Boyfriend’ model – the perpetrator befriends and grooms the young

person into a ‘relationship’ and then convinces or forces them to have

sex with friends or associates. This is sometimes associated with gang

activity.

■ Organised sexual exploitation – young people are passed through

networks where they are forced into sexual activity with multiple men.

This often occurs at ‘sex parties’ and the young people may be used to

recruit others into the network.

• Even something that seems like normal teenage behaviour could be a sign that

a child is being sexually exploited. Some of the visible signs include:

■ Change in physical appearance - new clothes, more/less makeup, poor

self-image, weight gain/loss.

■ Having increased health/sexual health-related problems.

■ Having marks or scars on their body which they try to conceal by refusing

to undress or uncover parts of their body.

■ Expressions of despair (self-harm, overdose, eating disorder,

challenging behaviour, aggression, appearing drunk or under the

influence of drugs/alcohol, suicidal tendencies, looking tired or ill,

sleeping during the day).

■ Sexually transmitted infections/pregnancy.

13

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

■ Multiple miscarriages or terminations.

■ Indicators of CSE in conjunction with chronic alcohol and drug use.

■ Indicators of CSE alongside serious self-harming behaviour.

■ Being defensive about where they have been and what they have been

doing.

■ Volatile/criminal behaviour.

■ Use of the internet that causes concern including possible use of

webcams.

■ Becoming involved in criminality/repeat offending.

■ Exclusion and/or unexplained absences from school or not engaged in

education or training. Non-school attendance or excluded due to

behaviour.

■ Sexualised risk-taking including on the Internet and mobile phone.

■ 'Sexting’ (the act of sending sexually explicit messages or photographs,

primarily between mobile phones).

■ Increased use of online gaming including Xbox.

■ Association with gangs.

■ Removed from known ‘red light’ district by professionals due to

suspected CSE.

■ Child under 16 meeting different adults and exchanging or selling

sexual activity.

■ Being hostile or physically aggressive in their relationship with

parents/carers or other family members.

■ Getting into cars with unknown adults or associating with known CSE

adults.

■ Child under 13 engaging in penetrative sex with another over 15 years.

■ Associating/developing a sexual relationship with older men or women.

■ Reports of being involved in CSE through being seen in hotspots (i.e. in

certain flats, recruiting grounds, cars or houses and maybe in the

company of known CSE adults).

■ Becoming disruptive at home or school or using offensive language.

14

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

■ Being secretive or withdrawn.

■ Older ‘boyfriend/girlfriend’ or relationship with a controlling adult.

■ Physical or emotional abuse by that ‘boyfriend/girlfriend’ or controlling

adult.

■ Associating with other sexually exploited children.

■ Regularly coming home late or going missing overnight or longer.

■ Returning home after long intervals but appearing well cared for\Being a

victim of honour-based violence.

■ Unsuitable or inappropriate accommodation (including street

homelessness, staying with adults known to be involved in CSE and

living in a place where needs are not met).

■ Being involved in witchcraft.

■ Isolated from peers and social networks; not mixing with their usual

friends.

■ Lack of positive relationship with a protective, nurturing adult.

■ Living independently and failing to respond to attempts by workers to

keep in touch.

■ Unusual association with taxi drivers/firms.

■ Breakdown of residential placements due to behaviour.

■ Having money, mobile phones, credit for mobile phones, sim cards,

clothes, jewellery or other items without a plausible explanation and not

given by parents/carers.

■ Having multiple mobile phones, sim cards or use of a mobile phone that

causes concern; multiple callers, more texts than usual.

■ Overtly sexualised dress.

■ Disclosure of physical/sexual assault and then refusing to make or

withdrawing a complaint.

■ Having possession of hotel keys/key cards or keys to unknown

premises.

■ Receiving rewards of money or goods for recruiting peers into CSE or

just introducing peers to known adults.

15

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

■ Knowledge of towns and cities they have no previous connection with.

■ Being taken to clubs and hotels by adults and engaging in sexual

activity.

■ Disappearing from the ‘system’ with no contact or support.

■ Abduction and forced imprisonment.

■ Being bought/sold for sexual acts.

• Possible Indicators Specific to Boys and Young Men are:

■ Health - physical symptoms (e.g. bruising or sexually transmitted

infections); drug or alcohol misuse; self-harm or eating disorders.

■ Education - truancy, deterioration of schoolwork or part-time

timetable.

■ Emotional and behavioural development - secretive e.g. about

internet use; anti-social behaviour; sexualised language; sexually

offending behaviour.

■ Family and social relationships - associating with other children and

young people at risk of sexual exploitation; missing from home or

staying out late; getting into cars of unknown people; contact with

adults outside normal social group.

■ Identity - low self-esteem, poor self-image or lack of confidence.

■ Social presentation - wearing an unusual amount of clothing.

■ Income - social activities with no explanation of how it has been

funded; possession of abnormal amounts of money, gifts, new mobile

phones, credit on mobile phone, number of SIM cards.

■ Social integration - frequenting known high-risk areas or going to

addresses of concern; seen at public toilets known for cottaging;

seen at adult venues.

• **What are the Vulnerabilities?**

■ Once engaged, offenders are likely to employ a series of sequential

steps to erode the free will of the victim and trap them into a lifestyle

which is not a choice but to which they can see no

16

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

alternative as it has become all they know. These incremental steps

may take the form of:

o Chilling - Generally associating with the child, supplying them

with drink or drugs, listening to them, making them feel good and

appearing to be the only one who understands them. Commonly,

this phase may extend for a protracted period e.g. 12 months.

o Presents - The victim will be provided with gifts e.g. jewellery,

electronic items or money.

o Physical - The offender will begin to ask for them to enter a

sexual relationship.

o Pestering - Whether they have had a sexual relationship to date

the pressure to do so or to expand it will be increased.

o Threats - To the victim and/or other people e.g. their family.

o Orders - The victim is essentially challenged to refuse what is

being demanded of them.

o Force - Whether they consent the victim is physically forced to

engage in sexual acts.

• **Emotional and Psychological Abuse** - This is the severe adverse effect on

behaviour and development caused by persistent coldness, hostility, rejection,

or severe over-protection towards the child or vulnerable adult. It may involve

conveying to the child or vulnerable adult that they are worthless or unloved,

inadequate or valued only insofar as they meet the needs of another person. It

may feature age or developmentally inappropriate expectations or limitations

on exploration and learning and the prevention of normal social interaction. It

involves seeing or hearing the ill-treatment of others or serious bullying,

(including cyber-bullying via electronic media) causing the individual to feel

frightened or in danger. Signs may include:

■ Failure to thrive (could include appearance and development not

consistent with age).

■ Deliberate self-harm.

17

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

■ Psychosomatic illness.

■ Wetting and soiling.

■ Withdrawn, aggressive, or bizarre behaviour.

■ Attention seeking behaviour or inappropriate seeking of affection.

■ Running away.

■ Under achievement.

■ Difficulty in formulating friendships.

• Individuals from all cultures are subject to abuse and neglect, so staff are

required to make sensitive and informed judgements about a young people ’s

needs and the parents’ (where applicable) capacity to respond to their child’s

needs. It is important that professionals are sensitive to differing family lifestyles

and to child-rearing patterns that may vary across different racial, ethnic and

cultural groups. At the same time, they must be clear that abuse cannot be

condoned for cultural or religious reasons.

• **Self Neglect-**

■ Lack of self-care to an extent that it threatens personal health and

safety.

■ Neglecting to care for one’s personal hygiene, health or

surroundings.

■ Inability to avoid self-harm.

■ Failure to seek help or access services to meet health and social

care needs.

■ Inability or unwillingness to manage one’s personal affairs.

• Signs may include:

■ Very poor personal hygiene.

■ Unkempt appearance.

■ Lack of essential food, clothing or shelter.

■ Malnutrition and/or dehydration.

■ Living in squalid or unsanitary conditions.

■ Neglecting household maintenance.

■ Hoarding.

18

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

■ 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.

• Financial abuse-

■ Theft of money or possessions.

■ Fraud, scamming.

■ Preventing a person from accessing their own money, benefits or

assets.

■ Employees taking a loan from a person using the service.

■ Undue pressure, duress, threat or undue influence put on the

person in connection with loans, wills, property, inheritance or

financial transactions.

■ Arranging less care than is needed to save money to maximise

inheritance.

■ Denying assistance to manage/monitor financial affairs.

■ Denying assistance to access benefits.

■ Misuse of personal allowance in a care home.

■ Misuse of benefits or direct payments in a family home.

■ Someone moving into a person’s home and living rent free without

agreement or under duress.

■ False representation, using another person's bank account, cards

or documents.

■ Exploitation of a person’s money or assets, e.g. unauthorised use

of a car.

■ Misuse of a power of attorney, deputy, appointeeship or other legal

authority.

• Sign may include:

■ Missing personal possessions.

■ Unexplained lack of money or inability to maintain lifestyle.

■ Unexplained withdrawal of funds from accounts.

19

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

■ Power of attorney or lasting power of attorney (LPA) being obtained

after the person has ceased to have mental capacity.

■ Failure to register an LPA after the person has ceased to have

mental capacity to manage their finances, so that it appears that

they are continuing to do so.

■ The person allocated to manage financial affairs is evasive or

uncooperative.

■ The family or others show unusual interest in the assets of the

person.

■ Signs of financial hardship in cases where the person’s financial

affairs are being managed by a court appointed deputy, attorney or

LPA.

■ Recent changes in deeds or title to property.

■ Rent arrears and eviction notices.

■ A lack of clear financial accounts held by a care home or service.

■ Failure to provide receipts for shopping or other financial

transactions carried out on behalf of the person.

■ Disparity between the person’s living conditions and their financial

resources, e.g. insufficient food in the house.

■ Unnecessary property repairs.

• **Discriminatory Abuse:**

■ Discouraging visits or the involvement of relatives or friends.

■ Run-down or overcrowded establishment.

■ Authoritarian management or rigid regimes.

■ Lack of leadership and supervision.

■ Insufficient staff or high turnover resulting in poor quality

care.

■ Abusive and disrespectful attitudes towards people using the

service.

■ Inappropriate use of restraints.

■ Lack of respect for dignity and privacy.

■ Failure to manage residents with abusive behaviour.

20

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

■ Not providing adequate food and drink, or assistance with eating.

■ Not offering choice or promoting independence.

■ Misuse of medication.

■ Failure to provide care with dentures, spectacles or hearing aids.

■ Not taking account of individuals’ cultural, religious or ethnic needs.

■ Failure to respond to abuse appropriately.

■ Interference with personal correspondence or communication.

■ Failure to respond to complaints.

• Signs may include:

■ Lack of flexibility and choice for people using the service.

■ Inadequate staffing levels.

■ People being hungry or dehydrated.

■ Poor standards of care.

■ Lack of personal clothing and possessions and communal use of

personal items.

■ Lack of adequate procedures.

■ Poor record-keeping and missing documents.

■ Absence of visitors.

■ Few social, recreational and educational activities.

■ Public discussion of personal matters.

■ Unnecessary exposure during bathing or using the toilet.

■ Absence of individual care plans.

■ Lack of management overview and support.

• **Modern Slavery includes:**

■ Human trafficking.

■ Forced labour.

■ Domestic servitude.

■ Sexual exploitation, such as escort work, prostitution and

pornography

21

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

■ Debt bondage – being forced to work to pay off debts that

realistically they never will be able to.

• Signs may include:

■ Signs of physical or emotional abuse.

■ Appearing to be malnourished, unkempt or withdrawn.

■ Isolation from the community, seeming under the control or

influence of others.

■ Living in dirty, cramped or overcrowded accommodation and or

living and working at the same address.

■ Lack of personal effects or identification documents.

■ Always wearing the same clothes.

■ Avoidance of eye contact, appearing frightened or hesitant to talk

to strangers.

■ Fear of law enforcement.

**5. PROCEDURE:**

• **Recognising Children who May Need Early Help:** We will ensure that staff

understand that they must be alert to the potential need for early help as stated

in 'Working Together to Safeguard Children' (2020) for a child who:

o Is disabled and has specific additional needs.

o Has special educational needs (whether or not they have a statutory

Education, Health and Care Plan).

o Is a young carer.

o Is showing signs of being drawn into anti-social or criminal behaviour,

including gang involvement and association with organised crime

groups.

o Is frequently missing/goes missing from care or from home.

o Is at risk of modern slavery, trafficking or exploitation.

o Is at risk of being radicalised or exploited.

22

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

o Is in a family circumstance presenting challenges for the child, such as

drug and alcohol misuse, adult mental health issues and domestic

abuse.

o Is misusing drugs or alcohol themselves.

o Has returned home to their family from care.

o Is a privately fostered child.

• **Local Procedures:**

o All staff, including contracted or agency staff working with children, will

familiarise themselves with the local child safeguarding policies,

procedures and guidelines and work within them. Nestlings Care will

ensure that all staff within a service are aware and understand their local

child protection policies and their localised reporting procedures. Copies

of the local policy and procedure for must be appended to this policy.

• **Management of Allegations Against People in Positions of Trust:**

o Nestlings Care to have clear policies for dealing with allegations against

people who work with children and young adults.

o Nestlings Care will make a clear distinction between an allegation, a

concern about the quality of care or practice or a complaint. An allegation

may relate to a person who works with children who has:

■ Behaved in a way that has harmed a child, or may have harmed a

child.

■ Possibly committed a criminal offence against or related to a child.

■ Behaved towards a child or children in a way that indicates they may

pose a risk of harm to children.

o If an allegation arises it will:

■ Be reported immediately to Registered Manager and Safeguarding

Compliance Manager and Managing Director.

23

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

■ Be addressed as quickly as possible with a consistent and a fair and

thorough investigation. Where it appears that a criminal offence may

have been committed, the Police will be contacted immediately by

the appropriate Senior Manager.

■ Children's or Adult Social Care Team must be informed within one

working day of all allegations that come to the attention of Nestlings

Care or that are made to the Police regarding an employee or

someone in a position of trust working with, or on behalf of, or who is

known to Nestlings Care who may have caused harm to a child. It is

the responsibility of Registered Manager to ensure that the Children's

or adult Social Care Team is notified.

• **Referral to DBS:**

o If Nestlings Care removes an individual (paid worker or unpaid volunteer)

from work in regulated activity with children (or would have, had the person

not left first) because the person poses a risk of harm to children, it must

make a referral to the Disclosure and Barring Service to consider whether

to add the individual to the barred list. Where an individual is a registered

practitioner such as a Registered Nurse, they will also be referred to their

Registered Body, such as the Nursing and Midwifery Council, irrespective

of whether they were working as a registered practitioner for Nestlings Care.

• **Safeguarding Disabled Children:**

o Research suggests that disabled children are at increased risk of abuse,

and that the presence of multiple disabilities appears to increase the risk of

both abuse and neglect. A child could be considered to be disabled if they

have significant problems with communication, comprehension, vision,

hearing or physical functioning. A failure to recognise disabled children's

human rights can lead to abusive situations and practices. Organisational

culture and 'custom and practice' can contribute to institutional abuse or

harm.

24

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

■ Nestlings Care will not underestimate how poor practice can become

pervasive in influencing staff to behave inappropriately.

■ The Care Worker will be given the opportunity to reflect on their

practice and promote a positive risk taking culture to enhance the

quality of life for young people.

■ Nestlings Care will ensure that its services will readily seek the views

of young people, parents and other professionals in reviewing their

practice.

o Particular attention will be paid to promoting a high level of awareness of

the risks of harm, to high standards of practice, and to strengthening the

ability of children and families to help themselves.

■ Make it common practice to enable disabled children to make their

wishes and feelings known in respect of their care and treatment.

■ Ensure that disabled children receive appropriate personal, health

and social education (including sex education).

■ Make sure that all disabled children know how to raise concerns and

give them access to a range of adults with whom they can

communicate. This could mean using interpreters and facilitators who

are skilled in using the child's preferred method of communication.

■ Recognise and utilise key sources of support, including staff in

schools such as support workers, friends and family members where

appropriate.

■ Ensure that there is an explicit commitment to and an understanding

of disabled children's safety and welfare among all providers of

services used by disabled children.

■ Develop the safe support services that families want, and a culture of

openness and joint working with parents and carers on the part of

services.

■ Provide guidelines and training for staff on good practice in intimate

care; working with children of the opposite sex; managing behaviour

25

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

that challenges families and services; issues around consent to

treatment; anti-bullying and inclusion strategies; sexuality and safe

sexual behaviour among young people; monitoring and challenging

placement arrangements for young people living away from home .

■ Where a child is unable to tell someone of the abuse, they may

convey anxiety or distress in some other way, e.g. behaviour or

symptoms, and the Care Worker must be alert to this.

• **Child Sexual Exploitation (CSE):**

o As a result of nationwide cases CSE has become a national priority for

health and social care. Staff have a significant contribution to make in

identifying children and young people at risk of sexual exploitation. Where

there are concerns about the welfare of a child, Nestlings Care will:

■ Remember the child or young person’s welfare is of paramount

importance.

■ Make sure the Care Worker is alert to the signs of Child Sexual

Exploitation as above.

■ The Care Worker will seek immediate advice from their manager, and

Nestlings Care will refer to our internal safeguarding and to EDT and/or

allocated social worker.

■ Children’s Social Care or the Police if there is a suspicion that a child is

at risk of harm or is in immediate danger

■ Nestlings Care will ensure that staff know and understand the

organisational and multi-agency safeguarding arrangements and

processes.

■ Information must be shared on a need-to-know basis.

• **Domestic Violence and Abuse:**

o There is a strong link between domestic abuse and all types of significant

harm to children and young people. Witnessing domestic violence is a

26

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

form of emotional abuse to a child/young person which may result in long-

lasting implications for their future wellbeing.

o The Care Worker must follow local child protection reporting procedures if

they are concerned that a child is witnessing domestic violence, is at risk of

being harmed or is being harmed as a result of domestic violence or abuse.

• **Forced Marriage and Honour Based Abuse/Violence:**

o Children and young people can be subjected to domestic abuses

perpetrated in order to force them into marriage or to 'punish' them for

'bringing dishonour on the family'.

o Duress cannot be justified on religious or cultural grounds, and forced

marriage is an abuse of human rights. Whilst honour-based violence can

culminate in the death of the victim, this is not always the case.

o The child or young person may be subjected, over a long period, to a variety

of different abusive and controlling behaviours ranging in severity. The

abuse is often carried out by several members of a family including mothers,

and female relatives/community members and may, therefore, increase the

child's sense of powerlessness and be harder for professionals to identify

and respond to. Forced marriages of children must be regarded as a child

protection issue.

o Nestlings Care must not contact the parents in this situation and must make

a referral direct to the Safeguarding Team and follow local reporting

procedures. Further advice can be obtained from the Forced Marriage Unit

here**[: www.gov.uk/stop-forced-marriage.](http://www.gov.uk/stop-forced-marriage)**

o If Staff Know Someone is at Risk Contact the Forced Marriage Unit (FMU)

if staff know someone who has been taken abroad to be forced into

marriage. Give as many details as possible, for example:

■ Where the person has gone

■ When they were due back

■ When you last heard from them

27

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

■ The FMU will contact the relevant Embassy. If the person is a British

National, the Embassy will try to contact the person and help them get

back to the UK, if that is what they want.

• **Female Genital Mutilation (FGM):**

o FGM is an illegal practice which affects a girl’s genital area, and which can

impact on their emotional or physical wellbeing. FGM is a criminal offence

and carries a maximum penalty of 14 years imprisonment.

o If a Care Worker is aware of any who has had FGM or of any female children

who are at risk of FGM, they must discuss this with their manager or the

Safeguarding Team.

o If there is an immediate risk the police must be contacted.

o Staff must understand their responsibilities to report concerns. Free E-

Learning training is available through the Home Office.

• **Contextual Safeguarding:**

o Nestlings Care will ensure that staff training includes Contextual

Safeguarding. Nestlings Care will ensure that staff understand that, as

well as threats to the welfare of children from within their families,

children may be vulnerable to abuse or exploitation from outside their

families.

o These extra-familial threats might arise at school and other educational

establishments, from within peer groups, or more widely from within the

wider community and/or online. These threats can take a variety of

different forms and children can be vulnerable to multiple threats,

including: exploitation by criminal gangs and organised crime groups

such as county lines; trafficking; online abuse; sexual exploitation and

the influences of extremism leading to radicalisation.

o Training must highlight that extremist groups make use of the Internet

to radicalise and recruit and to promote extremist materials.

o Any potential harmful effects to individuals identified as vulnerable to

extremist ideologies or being drawn into terrorism must also be

considered and Nestlings Care will ensure that staff know how to refer

28

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

any concerns to local safeguarding partners and that they have an

understanding of Channel referrals and processes.

• **Confidentiality:**

o Nestlings Care will ensure that staff working with children and young

people have read and understand the 'Information sharing - Advice for

practitioners providing safeguarding services to children, young people,

parents and carers (2018)' and understand that UK GDPR must not be

a barrier to sharing information**.**

• **Whistleblowing:**

o Safeguarding children is complex and can frequently be under review.

It is important to remember that safeguarding is everyone’s

responsibility, and a culture must be promoted where staff are able to

raise concerns and whistle blow without fear.

• **Training:**

o Safeguarding Children and Young People should be included within the

mandatory induction and include familiarisation with child protection

responsibilities and the procedures to be followed should anyone have

any concerns about a child's safety or welfare.

o Training will be delivered to the level specified in the 'Safeguarding

children and young people: roles and Competencies for Health Care

Staff Intercollegiate Document' and be in line with any contractual

requirements.

• **Consent:**

o Where Nestlings Care needs to share special category personal data,

Nestlings Care will be aware that the UK GDPR and Data Protection Act

2018 includes ‘safeguarding of children and individuals at risk’ as a

condition that allows practitioners to share information without consent.

o Information can be shared legally without consent if Nestlings Care is

unable to or cannot be reasonably expected to gain consent from the

individual, or if to gain consent could place a child at risk.

• **RECORDING AND REPORTING:**

29

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

o If a young person or adult at risk chooses to disclose abuse or

exploitation to staff, it should be managed as follows:

■ Listen to the young people and take everything seriously.

■ Remind the young people that staff will have to share this information

with relevant individuals and cannot keep it a secret or confidential.

■ If the allegation is from a third party source, then the source of

information can remain anonymous.

■ Inform the young people that they were right to inform the staff.

■ Explain that staff would have to get help to keep the individual safe.

■ Not to ask any direct or leading questions.

■ Not to interrupt or stop the young people and allow them to talk.

■ Not to ask the young people to repeat their account to anyone.

■ Not to translate or write opinions or interpretations, only factual

information as near as possible to verbatim account of the young

people.

■ Report the disclosure to the Registered Manager as soon as possible.

■ Make accurate record of information including time, date and

signature no later than the end of the day.

■ The recording should be clear, legible and concise with no use of

abbreviations.

o If the information is received through a third party, the same recording

procedure to be followed.

o If the staff are concerned about possible abuse or exploitation through

observations of young peoples’ interactions, they should record as

above but also circumstances in which the concerns arose and what it

was about interaction that caused concern.

o Any information gained from any source, which may indicate that a

young person has experienced abuse or exploitation or may be at risk of

such, places a duty on staff to report this to their line manager or

30

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

Registered Manager of the service who would then inform the local

Safeguarding team and as appropriate, the Police. If the concerns are

about the Registered Manager, the information should be passed to

another Manager within the service, the Designated Safeguarding

Officer (Safe Guarding Compliance Manager) within the service or the

Director. The Local Designated Safeguarding Officer can also be

contacted directly.

o Staff at Nestlings Care will take steps to ensure confidentiality of

information by safe and secure record keeping.

• **MANAGEMENT:**

o All allegations or reports of suspected abuse will be taken seriously and

managed in line with the Local Safeguarding procedures. All allegations

relating to a member of staff or anyone working with children and young

people will be referred to the Local Authority Designated Officer and their

advice recorded and followed. Allegations relating to a member of staff

or anyone working with adults at risk will be referred to the relevant Local

Authority Adult Safeguarding Team, and their advice recorded and

followed.

o The Registered Manager will be the point of contact for all matters

concerning a particular case and he/she will liaise with the Local

Safeguarding Authority and co-ordinate any actions that they prescribe

or recommend.

o Staff may be required to contribute to an initial case conference set up

by the Local Safeguarding Authority either by providing a report or by

attendance. The designated safeguarding lead will assist staff in this

process and provide the necessary guidance where required.

o Historical abuse will always be discussed with the local Safeguarding

Team as the perpetrator could still be in a position to abuse. The

individual who disclosed this may require support.

o If the concern or allegation has come from a staff member, whistle

blowing procedures apply in respect of the concern being raised.

o Concerns may arise when the person who works with young people

31

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

and/or adults at risk has:

■ Behaved in a manner that has or may have caused harm to a young

person or adult at risk.

■ Possible commitment of criminal offence against or related to a

young person or adult at risk.

■ Behaved towards a young person or adult at risk in a way that

indicates the person is unsuitable to work with young people or adults

at risk, or they would pose a risk of harm if they work regularly or

closely with same.

o If there is an allegation against staff member, then the staff member

should be suspended immediately pending further safeguarding

investigation to safeguard young person in question and other young

people at risk. This may lead to the following possible lines of actions:

■ Police investigation of a possible criminal offence.

■ Social Care enquiry and investigation as to whether the child or adult

at risk is in need of protection or need of further support or service.

■ Disciplinary action by employer in respect to person.

o In some cases, it will be necessary to make a referral to the Disclosure

and Barring Service (DBS) in line with the guidance provided by the DfE

on regulated activity with children and by the DH on regulated activity

with adults.

o If the staff member is suspended, it should not in itself be taken as

disciplinary action, but a precautionary measure to protect all concerned

and to avoid compromising any investigation. During suspension, the

staff are prohibited from attending the work place, any meetings or

investigative hearings relating to the allegations and should not make

any contact with work colleagues or young people s except for

nominated support, which in most cases will be with senior

management.

o If the matter under investigation is in relation to safeguarding or child

protection, information might not be divulged until the investigation

32

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

meeting and the staff member will be given an opportunity to consider

the matters being raised.

o If the matter under investigation is alleged physical abuse (where no

visible injuries to young people and no third party witness) then following

consultation with Local Authority Designated Officer (LADO), senior

management and in some cases Ofsted/CQC, the staff member may be

re-deployed into another provision and expected to undertake

supervised activities not involving interaction with young people s on a

one to one basis.

o If the staff member tenders their resignation or ceases to provide their

services, this must not prevent an allegation being followed up in

accordance with the above procedures.

**6. AUDIT:**

• An Audit of Safeguarding processes will be carried out on all sites at least every

3 months. The results of the audit will be discussed at Integrated Governance

Meetings and an action plan will be developed as required.

**7. REFERENCES AND GUIDELINES:**

• NHS

[https://www.nhs.uk/conditions/female-](http://www.nhs.uk/conditions/female-genital-mutilation-fgm/)genita[l-mutilation-fgm/](http://www.nhs.uk/conditions/female-genital-mutilation-fgm/)

• HM Government, (2021), Children: child arrangements orders safeguards when

domestic abuse issues arise (England and Wales).

https://commonslibrary.parliament.uk/research-briefings/cbp-8764/

HM Government, (2009), Reference guide to consent for examination or

treatment (second edition).

Choices,

(2019),

Female

Genital

Mutilation

(FGM).

•

[https://www.gov.uk/government/publications/reference-](http://www.gov.uk/government/publications/reference-guide-to-consent-)guide[-to-consent-](http://www.gov.uk/government/publications/reference-guide-to-consent-)

forexamination-or-treatment-second-edition

• NICE, (2017), Child Abuse and Neglect (NG76).

https:/[/www.nice.org.uk/guidance/ng76](http://www.nice.org.uk/guidance/ng76)

33

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

• Contextual Safeguarding Network - University of Bedfordshire, (2019),

Contextual Safeguarding https://contextualsafeguarding.org.uk/about/what-is-

contextual-safeguarding

• NSPCC, (2018), Definitions and signs of child abuse.

https:/[/www.nspcc.org.uk/globalassets/documents/information-](http://www.nspcc.org.uk/globalassets/documents/information-)

service/definitions-signschild-abuse.pdf

• HM Government, (2018), Information Sharing - Advice for practitioners

providing safeguarding services to children, young people, parents and

carers.:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/

attachment\_data/file/72

• UK Parliament, (2018), Domestic Violence in England and Wales - Briefing

paper.

<http://researchbriefings.files.parliament.uk/documents/SN06337/SN06337.pdf>

• HM Government, (2017), Tackling Child Sexual Exploitation: Progress report.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/

attachment\_data/file/59\_Progress\_Report web\_.pdf

• Home Office, (2016), Domestic Violence Disclosure Scheme (DVDS)

Guidance.

https:/[/www.gov.uk/government/uploads/system/uploads/attachment\_data/file/](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/)

575361/DVDS\_guidanc

• HM Government, (2020), Multi-agency statutory guidance on female genital

mutilation. https:/[/www.gov.uk/government/publications/multiagency-statutory-](http://www.gov.uk/government/publications/multiagency-statutory-)

guidance-on-female-genital-mutilation

• HM Government, (2020), Working Together to Safeguard Children: A guide to

inter-agency working to safeguard and promote the welfare of children.

https:/[/www.gov.uk/government/publications/working-together-tosafeguard-](http://www.gov.uk/government/publications/working-together-tosafeguard-)

children--2

34

**© Nestlings Care Limited**

**BR01**



**CHILD PROTECTION AND SAFEGUARDING CHILDREN**

**AND ADULTS POLICY AND PROCEDURE**

• Royal College of Nursing, (2019), Safeguarding Children and Young People:

Roles

https:/[/www.rcn.org.uk/professional-development/publications/pub-007366](http://www.rcn.org.uk/professional-development/publications/pub-007366)

• The Children's Society Child protection and safeguarding:

and

Competences

for

Healthcare

Staff:

-

https:/[/www.childrenssociety.org.uk/child-protection-and-safeguarding](http://www.childrenssociety.org.uk/child-protection-and-safeguarding)

• NSPCC: Child Protection System in the UK:

https:/[/www.nspcc.org.uk/preventing-abuse/child-protection-system/](http://www.nspcc.org.uk/preventing-abuse/child-protection-system/)

• Care

https:/[/www.cqc.org.uk/publications/themed-work/not-seen-not-heard](http://www.cqc.org.uk/publications/themed-work/not-seen-not-heard)

• HM Government - What to do if you're worried a child is being abused -

Advice for practitioners:

Quality

Commission

-

Not

Seen,

Not

Heard

Report:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/

attachment\_data/file/419604/What\_to\_do\_if\_yo

•

GOV.UK - Promoting the health and wellbeing of looked-after children:

https:/[/www.gov.uk/government/publications/promoting-the-health-and-](http://www.gov.uk/government/publications/promoting-the-health-and-)

wellbeing-of-looked-after-children--2

• **In addition to those specifically mentioned in these guidelines the**

**Government has published the following:**

■ Preventing and Tackling Bullying: Advice for head teachers, staff and

governing bodies DfE (2012)

■ Health & safety: Advice on legal duties and powers. For local authorities,

school leaders, school staff and governing bodies DfE (2012)

■ Use of Reasonable Force: Advice for head teachers, staff and governing

bodies DfE (2012).

■ Safeguarding Children: A Joint Chief Inspectors’ Report on Arrangements

to Safeguard Children (published by the Department of Health 2003)

■ The Common Assessment Framework for Children and Young People

2007

■ Safeguarding policies and procedures published by Local Authority.

■ Ofsted Quality Standards and Children’s Home Regulations 2015

35

**© Nestlings Care Limited**

**BR01**

