



## **SAFEGUARDING POLICY**

**SUZANNE McGLADDERY**

### **INDEPENDENT SOCIAL WORKER - THERAPEUTIC LIFE STORY WORK**

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#### **Position Statement**

I am an independently commissioned practitioner committed to ensuring the safeguarding and protection of children and young people and communicating in a secure way with the Commissioning Agency should concerns arise in the course of my work. I hold an up to date, enhanced DBS check, my practice is regulated by Social Work England, and I am registered with and uphold the Data Protection requirements of the ICO. I attend training for independent practitioners run by the Local Authority Safeguarding Board in line with statutory requirements.

My aim is to communicate to the individual with whom I work my intention to operate in a respectful, transparent, and honest way always. My initial engagement will include an explanation of why this would need to be overridden in circumstances of serious concern about the welfare of a child or young person.

My practice is rooted in the principles of Safer Caring and I have relevant experience in previous social work practice. I hold a Diploma in Child Protection together with my Social Work Qualifications up to Masters in Social Work and Advance Award in Social Work practice.

#### **Information Sharing**

Effective sharing of information between practitioners and local organizations and agencies is essential for early identification of need, assessment, and service provision to keep children safe (Working Together 2018).

An open and honest stance will be shared with individuals at the commencement of work about why, what and with whom information may need to be shared, and agreement sought for this.

Safeguarding concerns would in the first instance be referred to the Commissioning Agency's Manager or Designated Safeguarding Officer. This information will be accordingly directed by them to the appropriate Safeguarding Authority as detailed below.



When a referral is deemed to be necessary in the interests of the child, and the parents have been consulted and are not in agreement, the following action would be taken:

- The reason for proceeding without parental agreement will be recorded;
- The parent's withholding of permission must form part of the Commissioning Agency's verbal and written referral to LA Children's Services;
- The parent will be contacted to inform them that, after considering their wishes, a referral has been made.

The requirements of GDPR, Data Protection and Human Rights Law do not override the paramountcy of the welfare of the child.

### **Safeguarding Principles**

The purpose of this policy is to demonstrate my understanding of and commitment to upholding the safeguarding principles below as set out within [Working Together to Safeguard Children Guidance 2018](#).

Effective safeguarding arrangements should aim to meet the following principles:

- The safety and welfare of children and young people are paramount within any decision-making process.
- Children and Young People are entitled to live a life free from abuse and neglect.
- Safeguarding is everyone's responsibility, for services to be effective, each individual and organisation should play their full part.
- A child-centred approach; for services to be effective they should be based on a clear understanding of the needs and views of children.

Working Together to Safeguard Children defines Safeguarding requires a commitment to promote:

- The paramountcy of the welfare of the child and of the child's voice being heard and receiving the most appropriate response.
- The prevention of the impairment of children's health or development.
- The expectation that children grow up in circumstances consistent with the provision of safe and effective care.
- The requirement when concern exists to ensure that proportionate and timely action is taken in line with the parameters of my role to communicate with relevant professionals.
- An up-to-date awareness of the indicators of abuse or neglect.
- An awareness of the risks which individual abusers, or potential abusers, may pose to children.
- A commitment to contribute to whatever actions are needed to safeguard and promote the child's welfare.



- A commitment to work co-operatively and respectfully with parents unless this is inconsistent with ensuring the child's safety.
- A commitment to work co-operatively and respectfully with partner agencies including health, education, and local authority partners according to local arrangements.
- A mindfulness of whether there are safeguarding or welfare considerations for any other children living in the household or associated to it.

Abuse may be reported by:

- A parent, family member or connected person.
- A child or young person in respect of themselves or others
- An associated staff member such as a teacher
- A member of the public

### **Definitions of Child abuse and Neglect**

The following definitions of abuse, physical abuse, sexual abuse, and neglect are based on those identified in Working Together to Safeguard Children:

#### **Abuse**

A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults or another child or children.

#### **Physical Abuse**

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent fabricates the symptoms of, or deliberately induces illness in a child.

#### **Emotional Abuse**

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent effects on the child's emotional development, and may involve;

- Conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.
- Imposing age or developmentally inappropriate expectations on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction.
- Seeing or hearing the ill-treatment of another e.g. where there is domestic violence and abuse.
- Serious bullying, causing children frequently to feel frightened or in danger.
- Exploiting and corrupting children.
- Emotional abuse is involved at some level in all types of maltreatment of a child, though it may occur alone.



### **Sexual Abuse**

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether the child is aware of what is happening or not. The activities may involve physical contact, including assault by penetration (e.g. rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.

Sexual abuse includes non-contact activities, such as involving children in looking at, including online and with mobile phones, or in the production of, pornographic materials, watching sexual activities or encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

In addition; Sexual abuse includes abuse of children through sexual exploitation. Penetrative sex where one of the partners is under the age of 16 is illegal, although prosecution of similar age, consenting partners is not usual. However, where a child is under the age of 13 it is classified as rape under s5 [Sexual Offences Act 2003](#).

### **Neglect**

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development.

Neglect may occur during pregnancy as a result of maternal substance misuse, maternal mental ill health or learning difficulties or a cluster of such issues. Where there is domestic abuse and violence towards a carer the needs of the child may be neglected.

Once a child is born, neglect may involve a parent failing to:

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment).
- Protect a child from physical and emotional harm or danger.
- Ensure adequate supervision (including the use of inadequate care-givers).
- Ensure access to appropriate medical care or treatment.

### **Domestic Abuse**

Children can be affected by seeing, hearing, and living with domestic violence and abuse as well as being caught up in any incidents directly, whether to protect someone or as a target. It should also be noted that the age group of 16- and 17-year-olds have been found in recent studies to be increasingly affected by domestic violence in their peer relationships.

It should therefore be considered in responding to concerns that the Home Office definition of domestic violence and abuse (2013) is as follows:

"Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence and abuse between those aged 16 or over, who are or have been intimate partners or family members regardless of gender and sexuality.

This can encompass, but is not limited to, the following types of abuse: Psychological, Physical, Sexual, Financial, Emotional.

**Controlling behaviour** is a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain,



depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

**Coercive behaviour** is an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim."

### **Child Sexual Exploitation**

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

See also [Child Sexual Exploitation: Definition and Guide for Practitioners \(DfE 2017\)](#). This advice is non-statutory, and has been produced to help practitioners to identify child sexual exploitation, disruption and prosecution of perpetrators.

There are strong links between children involved in sexual exploitation and other behaviour such as running away from home or care, bullying, self-harm, teenage pregnancy, truancy and substance misuse.

### **Children and Young People who go Missing.**

A significant number of children and young people who are being sexually exploited may go Missing from home or care, and education. Some go missing frequently; the more often they go missing the more vulnerable they are to be sexually exploited. If a child does go missing, the [Missing Child Policy](#) should be followed.

The above list is not exhaustive, please see <http://www.proceduresonline.com/swcpp> for further detailed safeguarding practice guidance on the above and other specialist areas.

Working Together 2018 highlights specifically that "practitioners should, in particular, be alert to the potential need for early help for a child who:

- is disabled and has specific additional needs
- has special educational needs (whether or not they have a statutory Education, Health and Care Plan)
- is a young carer
- is showing signs of being drawn into anti-social or criminal behaviour, including gang involvement and association with organised crime groups
- is frequently missing/goes missing from care or from home
- is at risk of modern slavery, trafficking or exploitation
- is at risk of being radicalised or exploited
- is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse
- is misusing drugs or alcohol themselves
- has returned home to their family from care
- is a privately fostered child".



## **Vulnerable Groups**

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. 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 organized crime groups such as county lines; trafficking, online abuse; sexual exploitation and the influences of extremism leading to radicalization.

Extremist groups make use of the internet to radicalize and recruit and to promote extremist materials. Any potential harmful effects to individuals identified as vulnerable to extremist ideologies or being drawn into terrorism should also be considered.

## **Female Genital Mutilation**

FGM is recognized internationally as a violation of the human rights of girls and women. It reflects deep-rooted inequality between the sexes and constitutes an extreme form of discrimination against women.

Any information or concern that a child is at immediate risk of, or has undergone, female genital mutilation should be followed up by referral to the local authority in which the child is resident and the placing authority.

Section 5B of the Female Genital Mutilation Act 2003 Act requires regulated health and social care professionals and teachers in England and Wales to report 'known' cases of FGM in under 18s which they identify in the course of their professional work to the police (the mandatory reporting duty).

If there is a concern about one child, consideration must be given to whether siblings are at similar risk. Once concerns are raised about FGM there should also be consideration of possible risk to other children in the practicing community

## **Extremism**

Young people from all backgrounds can struggle to define themselves as they enter their teenage years. Extremists exploit this confusion with a negative, distorted focus on one aspect of a young people's identity at the expense of all others.

Online radicalisation then becomes a kind of grooming, in which vulnerable young people are exposed to extremist views and made to believe they're normal.

## **Children at Risk of Radicalisation**

Radicalisation can be really difficult to spot. Signs that may indicate a child is being radicalised include:

- isolating themselves from family and friends
- talking as if from a scripted speech
- unwillingness or inability to discuss their views
- a sudden disrespectful attitude towards others
- increased levels of anger
- increased secretiveness, especially around internet use.



Children who are at risk of radicalisation may have low self-esteem or be victims of bullying or discrimination. Extremists might target them and tell them they can be part of something special, later brainwashing them into cutting themselves off from their friends and family.

### **County Lines**

County Lines is a very serious issue where criminal gangs set up a drug dealing operation in a place outside their usual operating area. Gangs will move their drug dealing from big cities to smaller towns in order to make more money. This can have a really big effect on the community who live there and bring with it serious criminal behaviour.

The Children's Commissioner estimates there are at least 46,000 children in England who are involved in gang activity. It is estimated that around 4,000 teenagers in London alone are being exploited through child criminal exploitation, or 'county lines'.

Gangs deliberately target vulnerable children such as those in care. The gangs groom threaten or trick children into trafficking their drugs for them. They might threaten a young person physically, or they might threaten the young person's family members. The gangs might also offer something in return for the young person's cooperation – it could be money, food, alcohol, clothes and jewellery, or improved status – but the giving of these gifts will usually be manipulated so that the child feels they are in debt to their exploiter.

Children become trapped in county lines, and the young people involved feel as if they have no choice but to continue doing what the gangs want.

### **Urgent Medical Attention**

If the child is suffering from a serious injury, medical attention must be immediately sought from accident and emergency services and the Commissioning Agency. All actions and decisions taking must be clearly recorded.

### **Referral Procedure and Immediate Actions**

All professionals have a responsibility to refer a child to Children's social care under section 11 of the Children Act 2004 if they believe or suspect that the child:

- Has suffered significant harm;
- Is likely to suffer significant harm;
- Has a disability, developmental and welfare needs which are likely only to be met through provision of family support services (with agreement of the child's parent) under the Children Act 1989;
- Is a Child in Need whose development would be likely to be impaired without provision of services.

**In all cases it is the responsibility of the local authority where the child/young person is currently living (resident authority) to undertake any enquiries regarding safeguarding concerns or allegations.**



The child's social worker/team manager from the 'placing authority' should also be informed about the safeguarding concern immediately or at least within one working day.

**In all circumstances referrals must be made on the same day. This includes historical allegations in respect of professionals.**

The referrer should confirm verbal and telephone referrals in writing, within 48 hours.

Where an assessment has been completed prior to referral, these details should also be conveyed at the point of referral.

The 'resident' LA children's social care should **within one working day** of receiving the referral make a decision about the type of response that will be required to meet the needs of the child. If this does not occur within three working days, the referrer should contact these services again and, if necessary, ask to speak to a line manager to establish progress.

If the referral to the 'resident' Local Authority is assessed by the Local Authority intake team as not meeting threshold for intervention the case should be reviewed by the relevant staff member and hub manager to determine whether the LSCB escalation process should be followed.

The 'placing' local authority should be kept informed of all actions, decisions and outcomes regarding any safeguarding concerns relating to a child for whom they are responsible.

**Name/Contact Details – Designated Officer for Allegations (DOFA) within each Local Authority (October 2018)**

Local Authority	Phone
BANES	01225 396810
Bristol	01179 037795
Gloucestershire	01452 426994 01452 42 6320
North Somerset	01275 888211 07795 092692
South Gloucs	01454 868508
Wiltshire	03004 560180

**For further details see:**

South West Child Protection Procedures:





<http://www.proceduresonline.com/swcpp>

Working Together to Safeguard Children 2018

<http://www.workingtogetheronline.co.uk/>

### **Review**

This policy was completed on 16<sup>th</sup> February 2021 and will be reviewed and updated each year or prior to this, in line with Statutory Safeguarding guidance, Commissioning Agency advice or significant Inquiry Report recommendations.

Suzanne McGladdery

Independent Social Worker - Therapeutic Life Story Work Practitioner, Supervisor and Trainer

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