Introduction to Safeguarding Children for Volunteers
Learning outcomes:

Define the different types of abuse.

What you should do if you have concerns about children, those who are suffering, or at risk of suffering, significant harm?

What you should do if you have concerns about a member of staff or volunteers?

What will happen once you have informed someone about those concerns?
Importance of Safeguarding Children Training

Nothing is more important than children’s welfare (Children Act 1989) 

Children who need help and protection deserve high quality and effective support as soon as a need is identified 

Safeguarding children and promoting their welfare is everyone’s responsibility 

Everyone who comes into contact with children and families has a role to play. 

Important to consider needs of the whole family = Think Family
What is safeguarding?

**Safeguarding Children** is defined as:

- Protecting children from maltreatment
- Preventing impairment of children’s health or development
- Ensuring that children are growing up with safe and effective care
- Taking action to enable all children to have the best outcomes

E.g. Are children registered with GP & dentist, able to see HV, School Nurse? Are they meeting development milestones?

E.g. Are children supported to be Safe / Healthy / Able to Enjoy & Achieve? Able to make a positive contribution?

Inc Physical / Sexual / Emotional Abuse and Neglect
Culture and Diversity

- Child abuse is present through all society and in all cultures
- Child abuse is not acceptable in any culture
- Harmful child-rearing practices must be challenged and reported e.g. beating a child, FGM
- Consider other forms of child / domestic / adult abuse e.g. forced marriage and so-called honour-based violence

- Are there other harmful practices you are aware of?
What are the signs and indicators of the four main categories of 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 or carer fabricates the symptoms of, or deliberately induces, illness in a child.
Common accidental injuries

Head injuries tend to involve the parietal bone, occiput or forehead

Elbows

Forehead
Nose
Chin
Palm of hand
Knees
Shins

REMEMBER
Accidental injuries typically:
- involve bony prominences
- match the history
- are in keeping with the development of the child
Ears – especially pinch marks involving both sides of the ear

The “triangle of safety” (ears, side of face, and neck, top of shoulders): accidental injuries in this area are unusual

Inner aspects of arms

Back and side of trunk, except directly over the bony spine

Black eyes, especially if bilateral

Soft tissues of cheeks

Intra-oral injuries

Forearms when raised to protect self

Chest and abdomen

Any groin or genital injury

Inner aspects of thighs

Soles of feet

Possible non-accidental injuries.

REMEMBER
Concerns are raised by:
• injuries to both sides of the body
• injuries to soft tissue
• injuries with particular patterns
• any injury that doesn’t fit the explanation
• delays in presentation
• untreated injuries
Sexual abuse

Involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening.

The activities may involve physical contact, including penetrative (e.g. rape, buggery or oral sex) or non-penetrative acts. They may include non-contact activities, such as involving children in looking at, or in the production of, sexual on-line images, watching sexual activities, or encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse.
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 abuse.

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.

It may also include neglect of, or unresponsiveness to, a child’s basic emotional needs.
Emotional abuse

Is the persistent emotional maltreatment of a child.

Making a child feel worthless or unloved, inadequate.

Overprotection, or preventing the child participating in normal social interaction.

Seeing or hearing the ill-treatment of another.

Serious bullying.

Causing children frequently to feel frightened or in danger.

Exploitation or corruption of children.
Other forms of harm to consider

Child sexual / criminal exploitation
Missing Children
Radicalisation
Child trafficking
Private fostering
Private Fostering

A child/young person is privately fostered if s/he meets both of the following criteria:

- Is aged under 16 (or 18 if he/she has a disability)
- Is cared for by and living with someone for more than 28 days who is not his/her parent, does not have parental responsibility or is not a close relative

But a child or young person is not privately fostered if:

- S/he is looked after under the Children Act 1989 (i.e. in the care of the local authority)
- The person caring for him/her has done so for less than 28 days and does not intend to do so for longer than that

Please note that ALL instances of private fostering must be referred to Children’s Services Front Door and if you are unsure, consult.
Common situations in which children are privately fostered include:
• Children with parents or families overseas
• Children with parents working or studying in the UK
• Asylum seekers and refugees
• Trafficked children
• Local children living apart from their families
• Adolescents and teenagers
• Children attending language schools
• Children at independent boarding schools who do not return home for holidays
• Children brought in from abroad with a view to adoption
Why refer?

https://youtu.be/dYnLzSUQc6U
What is your responsibility?

Talk to your manager and other professionals: always share your concerns, and discuss any differences of opinion.

Record full information about the child at first point of contact, all concerns, discussions about the child, decisions made, and the reasons for those decisions.

Concerns may lead to a criminal investigation, so don’t jeopardise a police investigation, such as asking a child ‘leading questions’.

Always follow up discussions to other professionals in writing and ensure your message is clear.
Information Sharing

General Data Protection Regulation (GDPR) – public duty and legal requirement to share information when concerned about a child.

Share accurate and up-to-date information, only with those people who need to know it, and share securely.

Record the reasons for your decision – whether it is to share information or not.

Child Safeguarding Practice Reviews and Serious Case Reviews have shown that there are sometimes failures to record information, to share, and to take appropriate action to keep children safe.

Remember the child’s safety is paramount – please do not delay referring.

Information Sharing: A Guide for Safeguarding Practitioners
Obstacles to making a referral

Fear you may be wrong
Doubting the child’s story
Anger and distress
Child trying to bind you into secrecy
Uncertainty about procedures
Unresolved feelings
Not wanting to interfere
People might not take you seriously
Thinking nothing will change
Getting someone into trouble
Stigma
Fear of lack of control
What to do when a child discloses to you?

**DO**
- Stay calm.
- Listen and be aware of non-verbal messages.
- Allow the child to talk freely in their narrative.
- Take it seriously.
- Reassure them they have done the right thing.
- Explain what will happen next.
- Record verbatim: sign and date.

**DON’T**
- Ask leading questions.
- Make promises you can’t keep.
- Jump to conclusions.
- Speculate or accuse.
Making a decision about needs of a child

Do you have concerns about a child or feel they have an unmet need?

Yes

Discuss with your Safeguarding Lead

Still have concerns about a child or feel they have unmet need?

Yes

Contact the Single Point of Access team on 020 8547 5008 or call 020 8770 5000 for out of hours

No

Record your discussions and reasons / review
Concerned about a Child?

If you have concerns about a child in Kingston & Richmond please contact:

Single Point of Access (SPA) Team
020 8547 5008
Out of hours: 020 8770 5000
What will happen next?

Social Worker and manager should decide on the next step, within one working day, and record this decision.

Social Worker and manager decision must be shared with professional referrer within one day of decision being made.

If there are concerns that the child is or may be suffering harm, then a decision is made to have a strategy discussion.

Social Worker and manager consider whether a crime has been committed. If so, discuss the case with the police - it is their responsibility to carry out any criminal investigation.
Flow Charts

Child Protection Concern

- Referral to Social Services
- Strategy discussion
- S47
- Child Protection Conference
- Review
Guidelines for Safer Practice

- Practitioners and volunteers should follow the following **GOOD PRACTICE GUIDELINES**:

- Be careful about forming personal relationships with parents/carers. This could make it difficult to report allegations/suspicions of abuse. Remember your duty of care is to the child/young person.

- Physical contact should be open and initiated by the child’s needs, e.g. for a hug when upset. Always prompt children to carry out personal care themselves and if they cannot manage ask if they would like help.

- Exercise caution about being alone with a child or young person. In situations where this may be needed (for example where a young person wants to speak in private) think about ways of making this seem less secret. For example by telling another worker or volunteer what you are doing and where you are or leaving a door open. Keep a record of your conversation.

- Remember you set an example to children and young people - dress appropriately, use appropriate language and show respect to your colleagues, parents/carers, children and young people at all times.
Guidelines for Safer Practice

Practitioners and volunteers SHOULD NOT:

- Use any kind of physical punishment or chastisement such as smacking or hitting (even if parents/carers have given permission).
- Do not kiss or cuddle children, do not allow children to sit on your lap and do not give them presents.
- Do not invite a young person to your home or arrange to see them outside the set activity times.
- Do not engage in any sexual activity (this would include using sexualised language) with a young person you meet through your duties or start a personal relationship with them, this would be an abuse of trust, even if they are aged 16 or over.
- Do not add children/young people onto social networking sites e.g. Facebook, Snapchat. Also be aware of your online profile and check your privacy settings.
- Never let allegations, made by anyone, go unacknowledged, unresolved or not acted upon - Talk to your Safeguarding lead or Manager.
Allegations against professionals / volunteers

If you have a concern about the behaviour of a professional or volunteer, speak to your safeguarding lead

Safeguarding Lead may then consult / refer to the LADO – Local Authority Designated Officer

Referrals to LADO must happen where a professional or volunteer 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; or
- behaved towards a child or children in a way that indicates he or she could pose a risk of harm to children.
LADO
Local Authority Designated Officer

To contact the LADO please phone the Single Point of Access Team on 020 8547 5008
Further Resources

Local Safeguarding Children Partnership (Hammersmith & Fulham, Kensington and Chelsea, Westminster)

- **Working together to Safeguard Children 2018** – Key Statutory Guidance
- **London Child Protection Procedures**
- **Framework for the Assessment of Children in Need and their Families 2000**
- **Information sharing: advice for practitioners providing safeguarding services to children, young people, parents and carers 2018**
- **What to do if you’re worried a child is being abused - Advice for practitioners (2015)**

Thank you!