

The Source Young People's Charity

Name of policy: Safeguarding the Welfare of Children Policy and Procedures

Date approved by Board of Trustees: April 2022

Date this policy will be reviewed: April 2024

Person responsible for this policy: Director

Statement on Safeguarding the Welfare of Children

The Source believes that it is always unacceptable for a child or young person to experience abuse of any kind and recognises its responsibility to safeguard the welfare of all children and young people, by a commitment to practice that protects them.

We recognise that:

- The welfare of the child/young person is paramount
- All children, regardless of age, disability, gender, racial heritage, religious belief, sexual orientation, or identity, have the right to equal protection from all types of harm or abuse.
- Hidden Harm and the risk of abuse can exist through domestic violence and substance abuse in the home to children and young people. We need to work to engage those at risk to safeguard against harm.
- Working in partnership with children, young people, their parents, carers and other agencies is essential in promoting young people's welfare.

The Source will:

- Identify children or young people who may be at risk of abuse and alert the appropriate agency
- Take steps to ensure that all those who work with children and young people are safe to do so by adhering to our Recruitment and Induction Policy.
- Enable staff and volunteers to work with children and young people to identify, manage and report risk to children and young people to relevant agencies through a comprehensive induction, training programme, supervision and appraisal process.
- Ensure that our services are welcoming, friendly and accessible to children and young people and enable them to access help when they need it.
- We will undertake a child-centred approach to effective safeguarding.
- Identify a named person who has overall responsibility for child protection within the agency to ensure that policy and procedures are followed.

Introduction

The principles in this policy are consistent with the Government publication 'Working Together to Safeguard Children' (2015 – with updates to 2020) as well as 'The Children Act' (1989, 2004), 'UNCRC' (1989), 'The Human Rights Act' (1998), 'What to do if you're worried a child is being abused - Advice for practitioners' (March 2015) and 'The Prevent Duty' (June 2015). The Procedures included in this document are consistent with those outlined by Hampshire's Local Safeguarding Children's Board (www.hampshiresafeguardingchildrenboard.org.uk).

Scope of the policy

This policy applies to all employees, volunteers, trustees and students. They will be referred to as 'staff members' for the purpose of this document.

Person led safeguarding

This policy adopts the principle of 'no decision about me without me', and means that the child or young person, their families and carers are working together with agencies to find the right solutions to keep the person safe and to support them in making informed choices.

A person led approach leads to services which are:

- person centred and focused on the outcomes identified by the individual;
- planned and delivered in a joined up way between organisations;
- responsive and which can be changed when required.

Aim of Policy

The aim of this policy is:

- To provide protection for the children and young people who receive The Source's services or who The Source becomes aware of through its work (including the children of service users and family friends of service users).
- To provide staff members with guidance on procedures they should adopt in the event that they suspect a child or young person may be experiencing, or be at risk of, harm from abuse/neglect.

Definitions

"Child protection is a part of safeguarding and promoting welfare. It refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm" (Department for Education 2011).

This document relates to Children and Young People, defined as those aged under 18 years.

What is abuse? The following is taken from the Government Guidance 'What to do if you are worried a child is being abused' (2015): "Abuse and neglect are forms of maltreatment – a person may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children and young people may be abused in a family or in an institutional or community setting; by those known to them or, more rarely, by a stranger."

Categories of abuse

Abuse and neglect are forms of maltreatment – a person may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm.

Child welfare concerns may arise in many different contexts, and can vary greatly in terms of their nature and seriousness. As stated above, children may be abused in a family or in an institutional or community setting, by those known to them or by a stranger, including via the internet. In the case of female genital mutilation, children may be taken out of the country to be abused. They may be abused by an adult or adults, or another child or children. An abused child will often experience more than one type of abuse, as well as other difficulties in their lives. Abuse and neglect can happen over a period of time, but can also be a one-off event. Child abuse and neglect can have major long-term impacts on all aspects of a child's health, development and well-being.

The warning signs and symptoms of child abuse and neglect can vary from child to child. Disabled children may be especially vulnerable to abuse as they may have an impaired capacity to resist or avoid abuse. Speech, language and communication needs may make it difficult to tell others what is happening.

Children develop and mature at different rates so what appears to be worrying for a younger child might be normal behaviour for an older child.

Parental behaviours may also indicate child abuse or neglect, so you should also be alert to parent-child interactions which are concerning and other parental behaviours. This could include parents who are under the influence of drugs or alcohol, or if there is a sudden change in their mental health. Inability to keep a child safe may result in them prioritising buying drugs, or alcohol, over food, clothing or warmth for the child. Neglect may occur during pregnancy as a result of maternal drug or alcohol abuse.

There are a number of warning indicators which might suggest that a child may be being abused or neglected. By understanding the warning signs, one can respond to problems as early as possible and provide the right support and services for the child and their family. It is important to recognise that a warning sign doesn't automatically mean a child is being abused.

Some of the following signs might be indicators of abuse or neglect:

- Children whose behaviour changes – they may become aggressive, challenging, disruptive, withdrawn or clingy, or they might have difficulty sleeping or start wetting the bed
- Children with clothes which are ill-fitting and/or dirty
- Children with consistently poor hygiene
- Children who make strong efforts to avoid specific family members or friends, without an obvious reason
- Children who don't want to change clothes in front of others or participate in physical activities
- Children who are having problems at school, for example, a sudden lack of concentration and learning or they appear to be tired and hungry

- Children who talk about being left home alone, with inappropriate carers or with strangers
- Children who reach developmental milestones late, such as learning to speak or walk, with no medical reason
- Children who are regularly missing from school or education
- Children who are reluctant to go home after school
- Children with poor school attendance and punctuality, or who are consistently being picked up late
- Parents who are dismissive and non-responsive to practitioner's concerns
- Parents who collect their children from school when drunk, or under the influence of drugs
- Children who drink alcohol regularly from an early age
- Children who are concerned for younger siblings without explaining why
- Children who talk about running away
- Children who shy away from being touched or flinch at sudden movements.

Always remember the toxic trio and the effects they have on children and young people - substance misuse, mental health and domestic violence.

Physical abuse

Physical abuse is deliberately hurting a child physically. It might take a variety of different forms, including hitting, pinching, shaking, throwing, poisoning, burning or scalding, drowning or suffocating a child. It includes female genital mutilation. Physical abuse can happen in any family, but children may be more at risk if their parents have problems with drugs, alcohol and mental health, or if they live in a home where domestic abuse happens. Babies and disabled children also have a higher risk of suffering physical abuse. Physical harm may be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. Physical abuse can also occur outside of the family environment.

Some of the following signs may be indicators of physical abuse:

- Children with frequent injuries
- Children with unexplained or unusual fractures or broken bones
- Children with unexplained: bruises or cuts, burns or scalds, or bite marks.

Emotional Abuse

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children 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 being imposed 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. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying, causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level

of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Sexual abuse and exploitation

Sexual abuse is any sexual activity with a child. You should be aware that many children and young people who are victims of sexual abuse do not recognise themselves as such. A child may not understand what is happening and may not even understand that it is wrong. Sexual abuse can have a long-term impact on mental health.

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, including prostitution, 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 such as masturbation, kissing, rubbing and touching outside clothing. 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 (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can commit acts of sexual abuse, as can other children.

Some of the following signs may be indicators of sexual abuse:

- Children who display knowledge or interest in sexual acts inappropriate to their age
- Children who use sexual language or have sexual knowledge that you wouldn't expect them to have
- Children who ask others to behave sexually or play sexual games
- Children with physical sexual health problems, including soreness in the genital and anal areas, sexually transmitted infections or underage pregnancy.

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 abuse. Once a child is born it 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
- Respond to a child's basic emotional needs.

Some of the following signs may be indicators of neglect:

- Children who are living in a home that is indisputably dirty or unsafe
- Children who are left hungry or dirty
- Children who are left without adequate clothing, e.g. not having a winter coat

- Children who are living in dangerous conditions, i.e. around drugs, alcohol or violence
- Children who are often angry, aggressive or self-harm
- Children who fail to receive basic health care
- Parents who fail to seek medical treatment when their children are ill or are injured.

Working Practice - Making Safeguarding Personal

Making Safeguarding Personal is about responding to safeguarding situations in a way that enhances involvement, choice and control, as well as improving quality of life, wellbeing and safety. It is about seeing people as experts in their own lives and working alongside them with the aim of enabling them to resolve their circumstances and support their recovery. Making Safeguarding Personal is also about collecting information about the extent to which this shift has a positive impact on people's lives. It is a shift from a process supported by conversations to a series of conversations supported by a process.

Reporting Procedures

Members of Staff must:

- Ensure that they know the child protection procedures at The Source and which staff member is responsible for child protection issues
- Keep up to date with any changes to child protection policy or procedures and ensure that they attend child protection training
- Report any concerns they have about a child or young person immediately to the Designated Safeguarding Officer following the procedures set out below
- Report any concerns they have about a colleague immediately in adherence with The Whistle Blowing Policy and Procedures.

The Designated Safeguarding Officers within The Source are Elliot Little elliott.little@thesourceforyou.co.uk; 07518 020524 and Rachel Ninnis rachel.ninnis@thesourceforyou.co.uk ; 07518 019425

The following procedures should be followed if any staff member is concerned that a child or young person is at risk of or being harmed.

We aim to do this in a way that respects the rights of children and young people and keeps them informed about what is happening where possible.

If any staff member is concerned about a child or young person they should talk with the Designated Safeguarding Officer. They will discuss your concerns about the child or young person and offer advice regarding an appropriate course of action to take.

If a child or young person is deemed to be at risk of harm from abuse and/or neglect, then you should speak to the Designated Safeguarding Officer straight away and a referral to Children's Social Care should be made.

What to do if a child or young person tells you that they, or someone they know, is being abused, or tells you something which gives you cause for concern:-

- Believe what the person is saying and take it seriously
- Reassure the child or young person who has made the disclosure to you that they have done the right thing
- Explain that you are worried about them (or the other person) and tell them why you are worried
- Give the child or young person time to talk and do not probe or ask leading questions. Investigation is not your responsibility
- Do not promise to keep secrets. All allegations of harm or potential harm must be acted upon
- Explain to the child or young person that you need to share this information with a senior member of staff who will ensure the appropriate procedures will be followed, ideally with their consent. Where possible and appropriate share the information with the child or young person present.
- Explain to the child or young person that The Source will keep them informed of what is happening and will support them.
- Under no circumstances should you speak to or confront the abuser.
- Speak to the Designated Safeguarding Officer straight away to tell them about your concerns (this should be done in front of the child or young person if possible).
- Record all work done and complete one of The Source's Serious Incident Forms
- All documentation must be stored securely and confidentially.

If a child or young person contacts you through e-mail, text message or answer phone message:

- E-mails, phone or text messages received detailing suspected abuse should be responded to within 24 hours of being received by contacting the young person to obtain further information.
- When contact is made follow the steps above as if you were working with the young person in front of you, including making full and appropriate records.
- If no further contact with the young person can be made then speak with the Designated Safeguarding Officer who will arrange to pass this information on to the relevant authorities.

To refer to the Police:

- If there is an immediate risk of harm, phone 999.
- The Source will make a Police referral regarding abuse/exploitation/dangerous individuals when we have disclosures from young people. If we are concerned, we need to phone 101 and ask for the Child Abuse Investigation Unit or the Public Protection Unit. The police will ask the caller for all their own personal details, including DOB, address and work phone number.

The Source's Safeguarding Procedures

Where appropriate, the Designated Safeguarding Officer may delegate specific tasks in these procedures to experienced team members.

When to refer to Children's Social Care/ Multi-Agency Safeguarding Hub (MASH)

Referrals must always be made to MASH by The Source, if there are signs that a child under the age of 18 years, or an unborn baby:

- Is suffering or has suffered abuse and/or neglect
- Is likely to suffer abuse and/or neglect
- Would be likely to benefit from family support services (with agreement of a person with parental responsibility)
- If a pregnant person is using substances, under risk of harm to the unborn child.

Your concern could be about a child or young person that you are working with directly, or about one of their friends, family members or any other child or young person that you become aware of through your work.

Referrals to MASH should be made by the Designated Safety Officer, and reflect the perceived risk, and should normally be made within one working day of recognition. If, for any reason, you cannot contact the Designated Safeguarding Officer and your concern cannot wait until the next working day then either contact emergency services (for an emergency) or contact MASH/Children's Social Care yourself.

For young people who live in Hampshire Call: 0300 555 1384 during office hours (8.30am – 5:00pm). At all other times call the out-of-hours service 0300 555 1373.

For young people who live in Surrey Call 0300 470 9100 during office hours (9am – 5pm). At all other times call the out-of-hours service 01483 517 898.

Confirm verbal and telephone referrals in writing, within 24 hours.

- For Hampshire use the secure online referral form via:
hampshiresafeguardingchildrenboard.org.uk/report-a-concern/
- For Surrey Email csmash@surreycc.gov.uk.

When a referral is made to Children's Social Care the Designated Safeguarding Officer must agree with Children's Social Care what the young person and parents will be told, by whom and when.

- Any assessments that have been undertaken should be attached to the referral. MASH should acknowledge the written referral within one working day of receiving it. If a response has not been received within 3 working days, the Designated Safeguarding Officer should contact them again.

When there is concern that a young person may be at risk of harm, but that the level is not high enough to warrant a referral to MASH/Social Care (or if the young person is already being supported by Social Care), you should discuss this with the

Designated Safeguarding Officer. It may be appropriate to pass on information to Social Care instead of making a referral.

For passing on information to Social Care in this way:

- Use the secure online form
- Describe the relationship with the child or young person
- List any other agencies that are supporting the child or young person
- State clearly this is passing on information (and not making a referral).
- Highlight any action you would like them to take (if any)
- Record all information passed to Police or Social Care.

Response to a referral (Working together to Safeguard children)

Once the referral has been accepted by local authority children's social care, the lead professional role falls to a social worker.

The social worker should clarify with the referrer the nature of the concerns and how and why they have arisen.

Within one working day of a referral being received a local authority social worker should make a decision about the type of response that is required.

This will include determining whether:

- The child requires immediate protection and urgent action is required,
- The child is in need, and should be assessed under section 17 of the Children Act 1989
- There is reasonable cause to suspect that the child is suffering, or likely to suffer, significant harm, and whether enquires must be made and the child assessed under section 47 of the Children Act 1989,
- Any services are required by the child and family and what type of services,
- Further specialist assessments are required in order to help the local authority to decide what further action to take.

Action to be taken:

The child and family must be informed of the action to be taken by the Designated Safeguarding Officer

Local authority children's social care should see the child as soon as possible if the decision is taken that the referral requires further assessment.

Where requested to do so by local authority children's social care, professionals from other parts of the local authority, such as housing and those in health organisations, have a duty to cooperate under section 27 of the Children Act (1989) by assisting the local authority in carrying out its children's social care functions. This duty also applies to other local authorities.