



# Safeguarding Children Procedure

## *Fostering, Adoption & Children's Services*

We provide opportunities for children to achieve their full potential and to live fulfilling lives in the community. All staff, foster parents, adopters and prospective adopters have a duty and a responsibility to promote and safeguard the welfare of children, including unborn children. We care about all children and must take appropriate action if we become aware of allegations or concerns about any child's welfare and safety, or allegations or concerns about inappropriate behaviour towards children by adults or children.

This procedure applies to the following services: Foster Care Associates (FCA), Foster Care Associates Scotland (FCAS), Fostering People (England and Scotland), Orange Grove Foster Care, Clifford House Fostering, ISP, FosterPlus (England and Scotland), ACS, AfA, and PCS. The term 'service' used throughout the procedure refers to these individual services.

The term 'foster parent' is preferred but it is recognised that 'foster carer' is also used in legislation and within the community.

**The term 'child' or 'children' is used to refer to all children under the age of 18 years** (where the context specifically relates only to older children, the term 'young person' is used).

The term 'adult' in Scotland legally refers to anyone aged 16 and over, however the [Children and Young People \(Scotland\) Act 2014](#) defines a "child" as someone who has not attained the age of 18, therefore both Child & Adult Protection Procedures apply to all 16-18 year olds in Scotland. Following consultation with local authorities, the service should implement Child Protection Procedures for all young people aged 16-18 in Scotland unless instructed by the relevant Local Authority or Trust that Adult Protection Legislation is more appropriate in an individual case.

This procedure forms part of the Polaris Quality Management System in line with ISO-9001:2015 standards

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## **Procedure details**

Safeguarding means promoting a child's welfare and protecting the child from harm, risk of harm or exploitation.

This procedure applies to all who work with or care for children on behalf of the service, regardless of jurisdiction and employment type including volunteers.

This procedure sets out the action to be taken if there are concerns that a child may be being abused or harmed. Staff should also consider the safety of any siblings or other children where a potential risk has been identified.

Separate safeguarding procedures set out the process for safeguarding in other specific circumstances; for example, if a child is at risk of criminal or sexual exploitation or there are concerns about extremism or radicalisation.

## **Safeguarding Principles**

The service believes that all children have a right to protection from exploitation, neglect, physical, emotional and sexual abuse. The welfare of children will always override other considerations. The Safeguarding Policy should be read in conjunction with this procedure as it provides a statement of intent.

## **Statutory Framework**

Under the Children Act 1989 and s11 Children Act 2004 and Working together to Safeguard Children 2018, we have a duty to safeguard and promote the welfare of children and young people by:

- Identifying where there are child welfare concerns and taking action to address them, in partnership with other organisations where appropriate;
- Being familiar with our procedures for promoting and safeguarding the welfare of children.

Safeguarding and promoting the welfare of children and young people, and in particular protecting them from abuse and harm, is a shared responsibility and depends on effective joint working between all staff, foster parents, prospective adopters and the relevant agencies and professionals. We have a responsibility to safeguard children and work within legislative guidelines, placing local authorities' protocols and host local authorities' protocols.

All local authorities have a duty to promote and safeguard the welfare of children in their area, to investigate and take necessary action to protect all children and young people from abuse and harm. As a Community, we strive to work in partnership with Local Authorities to ensure the best outcome for children and young people.

The Wales Safeguarding Procedures (2020) states that ‘if any person has knowledge, concerns or suspicions that a child is suffering, has suffered or is likely to be at risk of harm, it is their responsibility to ensure that the concerns are referred to social services or the police who have statutory duties and powers to make enquiries and intervene when necessary’.

The National Guidance for Child Protection in Scotland 2014 provides key national guidance for agencies and practitioners at local level to agree processes for working together to safeguard and promote children’s well-being.

The Safeguarding Board for Northern Ireland (SBNI) co-ordinates and ensures the effectiveness of work to protect and promote the welfare of children.

## Definitions

### Definition of harm

- Harm means the ill-treatment or the impairment of health or development, including for example, impairment suffered from seeing or hearing the ill-treatment of another.
- Development means physical, intellectual, emotional, social or behavioural development.
- Health means physical or mental health.
- Ill-treatment includes sexual abuse and forms of ill-treatment which are not physical.

### Definitions of Child Abuse

There are 4 types of abuse that are commonly understood:

- Physical abuse;
- Emotional abuse;
- Neglect;
- Sexual abuse

A child may suffer or be at risk of suffering from one or more types of abuse and abuse may take place on a single occasion or may occur repeatedly over time.

### Physical abuse

Physical abuse may involve:

- Hitting
- Shaking
- Throwing
- Poisoning
- burning or scalding,
- drowning
- suffocating
- poisoning

- shutting in dark spaces
- 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. Female genital mutilation is considered to be a form of physical abuse.

Physical abuse involves injury that is a deliberate attack or due to a failure to take responsible steps to protect any child, young person or a vulnerable person.

### **Emotional Abuse**

- Emotional abuse is the most common element in all forms of abuse. Neglect, physical or sexual harm all involve damage to a child's emotional and social development;
- Emotional abuse is the persistent emotional maltreatment of a child which is inflicted with the intent to cause severe and persistent adverse effects on the child's emotional development;
- It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmental capacity, 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 (including cyber 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**

- Sexual abuse involves forcing or enticing a child to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, 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.

- Sexual exploitation of children under 18 can involve gangs or individuals luring them into sexual activities in exchange for gifts like money, food, drugs or alcohol.
- It can also happen through grooming using technology – for example, children being persuaded to post sexual images on the internet or mobile phones.
- The boundary between what is abusive and what is part of normal childhood or youthful experimentation can be blurred. Decisions about whether behaviour is developmental, inappropriate or abusive will consider the related concepts of consent, power imbalance and exploitation. This may include children who exhibit a range of sexually problematic behaviour such as indecent exposure, obscene telephone calls, fetishism, bestiality and sexual abuse against adults, peers or children.

*Developmental Sexual Activity* encompasses those actions that are to be expected from children and young people as they move from infancy through to an adult understanding of their physical, emotional and behavioural relationships with each other. Such sexual activity is essentially information gathering and experience testing. It is characterised by mutuality and of the seeking of consent.

*Sexual Behaviour* can be inappropriate socially, inappropriate to development, or both. In considering whether behaviour fits into this category, it is important to consider what negative effects it has on any of the parties involved and what concerns it raises about a child or young person. It should be recognised that some actions may be motivated by information seeking, but still cause significant upset, confusion, worry, physical damage etc. It may also be that the behaviour is “acting out” which may derive from other sexual situations to which the child or young person has been exposed.

### **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. Children may be malnourished or starving. They may have poor clothing or bedding and unheated bedrooms; they could be infected or infested with parasites and deprived of medical care.
- Children who are often neglected are sometimes described as showing faltered growth or failure to thrive.
- Neglect may occur during pregnancy as a result of maternal substance abuse.

A person 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 a stranger.

**Other forms of abuse include:**

***Extremism***

Extremism goes beyond terrorism and includes people who target the vulnerable – including the young – by seeking to sow division between communities on the basis of race, faith or denomination; justify discrimination towards women and girls; persuade others that minorities are inferior; or argue against the primacy of democracy and the rule of law in our society.

Extremism is defined in the Counter Extremism Strategy 2015 as the vocal or active opposition to our fundamental values, including the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs.

***County Lines***

As set out in the Serious Violence Strategy, published by the Home Office, a term used to describe gangs and organised criminal networks involved in exporting illegal drugs into one or more importing areas within the UK, using dedicated mobile phone lines or other form of 'deal line'. They are likely to exploit children and vulnerable adults to move and store the drugs and money, and they will often use coercion, intimidation, violence (including sexual violence) and weapons.

***Child Criminal Exploitation***

As set out in the Serious Violence Strategy, published by the Home Office, where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity:

- In exchange for something the victim needs or wants, and/or
- For the financial or other advantage of the perpetrator or facilitator; and/or
- Through violence or the threat of violence.

The victim may have been criminally exploited even if the activity appears consensual. Child criminal exploitation does not always involve physical contact; it can also occur through the use of technology.

***Children with Disabilities***

Research has shown that children with additional care needs and disabilities are significantly more vulnerable to abuse than children who do not have additional needs.

Research also indicates that children with disabilities are more likely than non-disabled children to be looked after by local authorities because of neglect or abuse.

We are aware that this should be borne in mind when considering whether a child with disabilities is subject to abuse, and guidance should be sought regarding how this should be explored. Communication with the child or young person and how this is achieved is of critical importance. Close liaison with all professionals involved with the child is also vital to ensuring that information is shared and decisions made regarding safe care practice are agreed by all given the likelihood of the child or young person's medical and intimate care needs being met by their foster parents/prospective adopters.

## Who is Responsible for Safeguarding and Child Protection Concerns?

### Key Principles

Effective safeguarding arrangements are underpinned by two key principles:

- **Safeguarding is everyone's responsibility:** for services to be effective each professional and organisation should play their full part; and
- **A child-centred approach:** for services to be effective they should be based on a clear understanding of the needs and views of children.

Therefore, everyone who works with children, including teachers, GPs, nurses, midwives, health visitors, early year's professionals, youth workers, Police, Accident and Emergency staff, paediatricians, voluntary and community workers and social workers all have a responsibility for keeping children safe.

As a Community we promote an open and transparent policy to 'Whistleblowing' and believe that no single professional/person can have a full picture of a child's needs and circumstances and, if children and families are to receive the right help at the right time, everyone who comes into contact with them plays a role to identifying concerns and must take prompt action to sharing information with the relevant parties. (See Procedure Flowchart).

We have a duty to safeguard and promote the well-being of children and young people and to achieve this objective we will:

- prevent unsuitable people working with children and young people;
- promote safe practices and challenge poor and unsafe practice;
- identify concerns about a child's welfare and take appropriate action;



- contribute to effective partnership working;
- Monitor and review this in line with continuous development and improvement of the service.

Therefore, all staff, foster parents, prospective adopters must report any concerns or suspicions they have that someone may have:

- behaved in a way that has harmed a child; and/or
- possibly committed a criminal offence against a child or related to a child; and/or
- behaved towards a child in a way that indicates that they may pose a risk of harm to children.
- behaved or may have behaved in a way that indicates they may not be suitable to work with children.

All such allegations must be taken seriously, and reported immediately (see Procedure Flowchart). This is an individual responsibility of each and every member of staff and foster/prospective adopter parent. Reports should be made in the first instance to one of the following:

- Registered Manager/Head of Service/Line Manager ;
- OOH Worker;
- An independent person such as the child's social worker, Police, Regulatory Authority.

The procedures for reporting concerns regarding safeguarding and child protection concerns are mandatory and any failure to comply with them may result in disciplinary action being taken.

We have a duty to refer safeguarding matters and therefore all allegations appearing to meet the criteria outlined must be reported to the Designated Officer (formerly LADO)/or equivalent. The LADO/or equivalent will provide advice and guidance on what should happen next. On the conclusion of any investigation a clear and comprehensive summary of any allegation made against a particular member of the fostering/adoptive

household, or staff member, including details of how the allegation was followed up and resolved will be kept. This record of any action taken and the decision reached will be placed on the person's confidential file.

We strive to work in partnership with the children's local authorities as well as the local authorities in which our foster parents live. We work to safeguard and promote the welfare of children and young people in our care.

### **Safe Practice**

A commitment is given to assessing each child moving into the family to maximise the opportunity for each child at risk of harm to be protected. Risk Assessments are completed on all children and are reviewed.

During the placement planning process a risk assessment in respect of any child who is vulnerable to going missing, running away or sexual exploitation will be undertaken and measures will be put into place to respond promptly to these events if they occur. This risk assessment considers the vulnerability of the child or young person to going missing and what practices can be implemented to reduce the risk such as for example, reducing unsupervised time with the use of a mobile phone or computer and locking applications to prevent access to some sites. Any matters such as this should always be discussed at the placement planning process and agreed in line with the placing local authority and consideration of the needs of the child.

### **Behaviour Support and Physical Intervention**

We acknowledge that, as part of our behaviour support of children, physical intervention may occur. This must be done in line with behaviour support training eg Price, which is Bild accredited.

Please refer to your own individual service policy/procedure relating to behaviour support and intervention.

### **Mental Health**

Children have rights under article 5 of the European Convention of Human Rights not to be deprived of their liberty without legal authorisation. However the Deprivation of Liberty Safeguards only apply to people who are over 18 or over and is lawful if warranted under statute for eg Mental Health Act.

## Recognising Abuse

Recognising child abuse is not easy, and it is not for staff, foster parents, prospective adopters or volunteers to take on the responsibility for deciding whether or not child abuse has taken place or if a child is at significant risk. However, everyone has a responsibility to act and report concerns to appropriate parties (see Procedure Flowchart).

## Contextual Safeguarding

Contextual safeguarding recognises that as children grow and develop they are influenced by a whole range of environments and people outside of their family. For example in school or college, in the local community, in their peer groups or online (contexts). Children may encounter risk in any of these environments. Sometimes the different contexts are inter-related and can mean that children and young people may encounter multiple risks. Contextual safeguarding seeks to understand how practitioners can best assess these risks, engage with children and young people and help to keep them safe.

It's an approach that's often been used to apply to adolescents, though the lessons can equally be applied to younger children, especially in today's changing world.

Contextual Safeguarding can encompass many risks including, but not limited to:

- child exploitation
- trafficking
- child on child abuse
- bullying and harassment
- online abuse

It is important that practitioners familiarise themselves with the places and spaces where children spend their time and consider with safeguarding partners, what interventions could be possible in these environments where there are threats to a child or multiple children's safety.

## Signs and Indicators

Every child is unique and it is difficult to predict how their behaviour will change as a result of adverse childhood experiences of abuse. Listed below are some physical and behavioural indicators that may be commonly seen in children who are abused, but remember they may only be an indication and not confirmation that abuse is taken place.

It is also important to consider the impact of adultification. The concept of adultification bias is where adults perceive children of ethnic minorities as being older than they are. It is a form of bias where black, asian and minoritised ethnic communities are perceived as being more 'streetwise', more 'grown up', less innocent and less vulnerable than other

children. This particularly affects black children, who might be viewed primarily as a threat rather than as a child who needs support.

<b>Physical Abuse</b>	
<b>Physical Signs</b>	<b>Behavioural Indicators</b>
<ul style="list-style-type: none"> <li>• Unexplained bruising, marks or injuries on any part of the body;</li> <li>• Bruises which reflect hand marks or fingertips (from slapping or pinching);</li> <li>• Cigarette burns;</li> <li>• Bite marks;</li> <li>• Broken bones;</li> <li>• Scalds.</li> </ul>	<ul style="list-style-type: none"> <li>• Fear of parents being approached for an explanation;</li> <li>• Aggressive behaviour or severe temper outbursts;</li> <li>• Flinching when approached or touched;</li> <li>• Reluctance to get changed, for example wearing long sleeves in hot weather;</li> <li>• Depression;</li> <li>• Withdrawn behaviour;</li> <li>• Running away from home</li> </ul>
<b>Emotional Abuse</b>	
<b>Physical Signs</b>	<b>Behavioural Indicators</b>
<ul style="list-style-type: none"> <li>• A failure to thrive or grow;</li> <li>• Sudden speech disorders;</li> <li>• Developmental delay, either in terms of physical or emotional progress.</li> </ul>	<ul style="list-style-type: none"> <li>• Neurotic behaviour, e.g., hair twisting, rocking;</li> <li>• Being unable to play;</li> <li>• Fear of making mistakes;</li> <li>• Self-harm;</li> <li>• Fear of parent being approached regarding their behaviour.</li> </ul>

## Sexual Abuse

Physical Signs	Behavioural Indicators
<ul style="list-style-type: none"><li>• Pain or itching in the genital/anal areas;</li><li>• Bruising or bleeding near genital/anal areas;</li><li>• Sexually transmitted infection;</li><li>• Vaginal discharge or infection;</li><li>• Stomach pains;</li><li>• Discomfort when walking or sitting down;</li><li>• Pregnancy.</li></ul>	<ul style="list-style-type: none"><li>• Sudden or unexplained changes in behaviour, e.g., becoming aggressive or withdrawn;</li><li>• Fear of being left with a specific person or group of people;</li><li>• Having nightmares;</li><li>• Running away from home;</li><li>• Sexual knowledge which is beyond their age or development age;</li><li>• Sexual drawings or language;</li><li>• Bedwetting;</li><li>• Saying they have secrets they cannot tell anyone about;</li><li>• Self-harm or mutilation, sometimes leading to suicide attempts;</li><li>• Eating problems such as overeating or anorexia.</li><li>• Unexplained gifts and money</li><li>• Secretive behaviour with for e.g. friends</li></ul>

Neglect	
Physical Signs	Behavioural Indicators
<ul style="list-style-type: none"> <li>• Constant hunger, sometimes stealing food from others;</li> <li>• Constantly dirty or 'smelly';</li> <li>• Loss of weight, or being constantly underweight;</li> <li>• Inappropriate dress for the conditions.</li> </ul>	<ul style="list-style-type: none"> <li>• Complaining of being tired all the time;</li> <li>• Not requesting medical assistance and/or failing to attend appointment;</li> <li>• Having few friends;</li> <li>• Mentioning they are being left alone or unsupervised.</li> </ul>

It is important to remember that many children and young people will exhibit some of these signs and indicators at some time, and the presence of one or more should not be taken as proof that abuse is occurring.

There may well be other reasons for changes in behaviour such as death, or the birth of a new baby in the family, relationship problems between parents/carers, etc.

### Domestic Abuse

Domestic abuse can encompass a wide range of behaviours and may be a single incident or a pattern of incidents. Domestic abuse is not limited to physical acts of violence or threatening behaviour, and can include emotional, psychological, controlling or coercive behaviour, sexual and/or economic abuse. Types of domestic abuse include intimate partner violence, abuse by family members, teenage relationship abuse and adolescent to parent violence. Anyone can be a victim of domestic abuse, regardless of gender, age, ethnicity, socio-economic status, sexuality or background and domestic abuse can take place inside or outside of the home.

Domestic abuse continues to be a prevalent risk factor identified through social care assessments for children in need. Domestic abuse has a significant impact on children. Children may experience domestic abuse directly, as victims in their own right, or indirectly due to the impact, the abuse has on others such as the non-abusive parent.

### Reporting Concerns of Abuse

Nothing in this procedure should prevent the application of common sense and if a member of staff, foster parent, prospective adopter or volunteer comes across a child in distress or obvious physical need, they should ensure the child's immediate needs are met by calling in

the appropriate professional help, which may include the Police or ambulance service if necessary. Once the child's immediate needs have been met then the basic response procedures as detailed in the Procedure Flowchart should be followed.

Please note that disclosures made as part of a therapeutic intervention or counselling session should also be reported, unless there is clear, written evidence in the child's file that the matter has been formally dealt with. Any new information relating to an historical matter should be reported in order that there is an opportunity for this to be formally investigated if appropriate and it should not be assumed that this information has already been shared as part of a previous child protection investigation.

**Remember the needs of the child or young person should always come first. It is not for individuals to judge.**

### **GDPR/Information Sharing**

The Polaris Community complies with GDPR and this will not be a barrier to sharing Child Protection or Safeguarding information.

### **Reporting Procedure**

All concerns, disclosures, suspicions or allegations should be reported immediately regardless of time or day of the week. This includes 'historical abuse' that may have occurred at some time in the past but which may not have been reported or investigated, or where there is no written outcome to the allegation.

These procedures inform all staff, foster parents, prospective adopters and volunteers of the action they should take if they have concerns or encounter a case of alleged or suspected child abuse, or a safeguarding concern, i.e. disclosure.

It is important that all staff, foster parents, prospective adopters and volunteers are aware that the first person that has concerns or encounters a case of alleged or suspected abuse is not responsible for deciding whether abuse has occurred.

### **Guidance on using this procedure**

- When a child protection or safeguarding matter comes to your attention, always follow this procedure. Whilst it is, of course, appropriate to ensure that a child is immediately safe, and that any urgent health needs, which have arisen, are attended to, other than reporting, no further steps should be taken. **No one should attempt to investigate the matter, or question anyone involved but should allow the child to disclose freely.**

- Always report the matter immediately (by telephone or in person), regardless of, for instance, time of night, it being a weekend or public holiday, or being on holiday at the time the matter arises. Please refer to Outside Office Hours in the section below.
- If you are uncertain as to whether the matter which has come to your attention is a 'child protection' matter, still use this procedure. When uncertain, it is more appropriate to take advice and guidance by use of this procedure, than using other informal sources of advice.
- Do not assume that someone else has, or will report the matter, even if more than one person becomes aware of the matter when it first arises.
- Having reported the matter by phone or in person, always complete a written account of your concerns and actions as soon as possible and complete a Significant Event/Incident/Monitoring Form (staff).
- The child's Local Authority Social Worker and the local area social care services will be informed via phone or e-mail by the person raising the concern or by the Supervising Social Worker, Out-of-Hours officer or Registered Manager.
- The inspectorate for the jurisdiction is responsible for overseeing services for children including Independent Fostering Agencies and Voluntary Adoption Agencies will be notified of the instigation of any Child Protection matters by the Registered Manager, Line Manager, Supervising Social Worker or Out of Hours officers.
- All staff/foster carers /prospective adoptive parents should immediately report to the relevant person for instance, Supervising Social Worker, Line Manager as listed on the Procedure Flowchart.
- As soon as possible after reporting the matter by telephone, the person who made the report (the referrer) should also send/email a written report of the child protection matter to the person in the local authority/trust they reported the matter to by telephone.

**Outside office hours:**

- All staff/foster/adoptive parents should immediately report to the Out-of-Hours officer, as per the Procedure Flowchart.
- The next working day after reporting the matter, the person who made the report (the referrer) should also send/email a written report of the child protection matter to the LA service involved with the child.



### **Liaison with Appropriate External Agencies**

The service will liaise and co-operate with any Local Authority, which is, or may be making child protection enquiries in relation to any child previously or currently within the agency.

It is the statutory responsibility of the Local Authority Children's Services Department where the child lives to undertake Child Protection enquiries into allegations of abuse or neglect. If the allegations concern a child who is living outside of their home Local Authority, it is the responsibility of the Local Authority in which the child is currently living to undertake an enquiry. However, there may be occasions when the responsible authority (that which is the corporate parent to the child) is deemed to be the most appropriate people to undertake enquiries. This will be discussed and agreed between the two local authorities.

It is never the responsibility of the service to investigate allegations or suspicions of abuse or neglect. If a decision has been made by the Designated Officer (formerly LADO) or equivalent for the service to undertake an investigation and inform the Designated Officer (formerly LADO) or equivalent of the outcome, this must be confirmed in writing.

Upon receipt of a report regarding a Child Protection matter, the Registered Manager or the Line Manager/Supervising Social Worker/Staff Member will immediately inform the placing authority and Designated Officer (formerly LADO) or equivalent (where the allegation is against staff or foster/prospective adoptive parents) as per the Procedure Flowchart and follow the reporting procedure.

The Registered Manager/Line Manager or Supervising Social Worker/Staff member will ensure that the local residing area Children's Social Care Department is promptly informed, providing all pertinent information including the name of the child, the child's foster parents, the child's Local Authority Social Worker and the circumstances of the allegation or concerns.

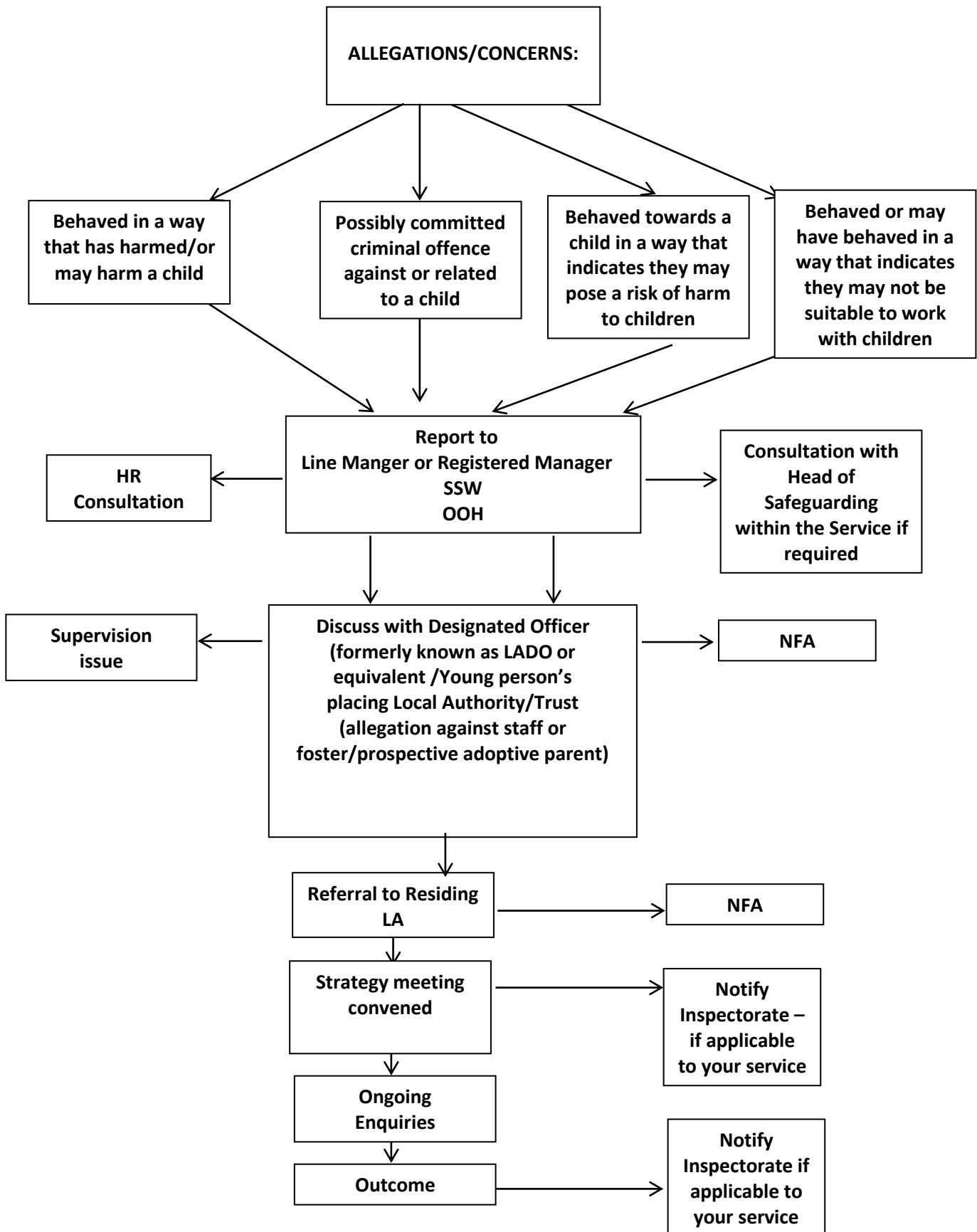
Where other children are cared for from different placing authorities, the Registered Manager/Line Manager or Supervising Social Worker/Staff Member will inform these authorities of the Child Protection/Safeguarding enquiry within the family.

A written account of the process following an allegation of abuse or neglect or concerns raised will be maintained by the designated social worker/staff member. This will detail any action taken including phone calls, visits and meetings. The service will request minutes of any strategy meetings held by Children's Social Care, with final decisions, recommendations and outcomes. A formal outcome of the Strategy Meeting should always be recorded. This may record that the outcome is Substantiated, Unsubstantiated, Malicious or Unfounded.

Once a strategy meeting/discussion has been convened, the Registered Manager/Head of Service/Line Manager will notify the inspectorate in writing (and possibly by telephone) - (this applies to regulated services). Further updates and the outcome of any such enquiries will be communicated to the inspectorate in writing. The service will be responsible for ensuring this is uploaded to Charms or the database used by the service.

# Reporting Safeguarding or Child Protection Concerns

Procedure flowchart when allegations are made



### **Protection of Child Following an Allegation of Abuse or Neglect**

Following a referral of alleged abuse or neglect, the Supervising Social Worker/Staff Member or Registered Manager/Line Manager will continue to liaise with the child's local authority social worker. At this stage, the child's welfare and protection will be discussed and a plan devised to ensure the child's physical and emotional safety and well-being. The plan may involve a visit by the child's Local Authority Social Worker.

Where allegations have been made in relation to the foster/prospective adoptive family, consideration will be given to the measures, which may be necessary to protect other children living with the foster/prospective adopters parents. This could include birth children and grandchildren.

### **For Fostering Agencies Only:**

If the child has to move to another foster home, the child's Local Authority Children's Services Department will decide whether it is appropriate for this to be provided by the Service. If provided by the service it is preferable that the two foster families should not be closely acquainted. No contact between the two foster families would be permitted during the course of the enquiry in order to avoid any interference or collusion in the process.

It is essential that children are helped to understand the process and are assured that adults are concerned with their safety and wellbeing.

If an allegation is made in relation to a staff member (e.g., social worker, therapist, teacher) then arrangements will be made, where appropriate, to ensure that there is no direct contact during the course of the enquiry. Consideration will be given by the Head of Service/Registered Manager to suspending the member of staff where necessary. Any action will be discussed with, and guidance sought from, the relevant children's services departments and Human Resources. Disciplinary procedures may be invoked where appropriate.

At this stage, the reporting person must not alert the person(s) who may have caused or be implicated in causing the abuse or harm, of any action taken.

The Registered Manager/Head of Service/Line Manager will endeavour to ensure any allegation is dealt with in a timely manner and within given timeframes.

### **Receiving Concerns or Allegations of Abuse or Harm**

All allegations, however insignificant, must be reported to the child's social worker. Any allegations of concern about the standard of care should be separated from allegations of harm. The level of concern will determine how information is shared and dealt with. The Service will

want to explore concerns with the residing Designated Officer (formerly known as LADO or equivalent) and placing local authority.

The following is considered as good practice to which the service will adhere:

Foster parents/prospective adopters or staff members seeing, hearing or being told anything that causes them to become concerned that a child may be at risk of, or is being or has been abused must report it immediately to their Supervising Social Worker/staff member or the Registered Manager/Line Manager or Out of Hours service. This is the case, regardless of whether the child or young person is being cared for by the service or not.

Inaction is not an option in the protection of children, and all foster/prospective adoptive parents and staff have a duty to act regardless of whether the concern is current or a historic safeguarding matter.

Children will sometimes disclose abuse to an adult whom they have come to feel that they can trust. If a child or young person discloses abuse, it is important that foster/prospective adoptive parents or staff respond appropriately by remaining calm and receptive; listening without interrupting; only asking questions for clarification; acknowledging the child's courage in telling.

It is not the responsibility of foster/ prospective adoptive parents or staff members to investigate or in any way make judgement about what is reported to them. Investigations, if necessary, must be undertaken by properly trained, independent professionals; this is usually carried out by the local authority. A decision around who will investigate is agreed at the Strategy Meeting.

If a disclosure or allegation of abuse or harm has been made, foster/ prospective adoptive parents or staff should discuss with whomever has made the disclosure / allegation what steps they would like taken, to protect them. Those wishes should be shared and, if not in conflict with procedures, followed. This may mean that if the allegation is made against a member of staff or foster/prospective adoptive parent, they may be suspended until the allegation has been fully investigated and concluded (see Procedure Flowchart).

Where the allegation is of an historical nature, e.g., relating to abuse or harm that may have been perpetrated in another home environment or by family members, allegations must be taken seriously and must be reported in the same way as any other allegation. This is likely to include making a Notification to the Inspectorate for some of the agencies. It should not be assumed that this allegation has been investigated and dealt with by relevant safeguarding partners.

Foster/ prospective adoptive parents or staff must not give absolute guarantees of confidentiality to those who report possible abuse or harm, but they should guarantee that they

will take steps to ensure that appropriate action is taken, and that the child or young person is protected.

### **Specific Response Procedures regarding Children**

More specifically the following procedures should be followed in each situation.

Abused children will only tell people they trust and with whom they feel safe. By listening and taking seriously, what the child is saying you are already helping the situation. The following points are a guide to help you respond appropriately.

1. Stay calm;
2. Listen carefully to what is said;
3. Find an appropriate early opportunity to explain that it is likely that the information will need to be shared with others – **do not promise to keep secrets**;
4. Allow the child to contribute at their own pace;
5. At all times **avoid asking questions** that suggest a particular answer (leading questions);
6. Reassure the child or young person that they have done the right thing in telling you;
7. Tell them what you will do next and with whom the information will be shared;
8. Record in writing what you have been told with all the details that you are aware of and what was said using the child's own words, as soon as possible;
9. Report to and inform your Registered Manager/Line Manager or Supervising Social Worker or the Out Of Hours worker
10. Report to the placing local authority and the Local Authority Designated Officer/or equivalent if the allegation relates to a foster/prospective adoptive parent or person working directly with children (and possibly the Police if the allegation relates to an incident in the community).

### **Specific Response to an Allegation Made Against Staff, Volunteers or from Members of the Community**

*NB There is a separate procedure when allegations are made against Foster Parents/Prospective Adopters*

## **Allegations Management**

The service must have a clear and comprehensive summary completed of any allegation against staff member, foster parent or member of the fostering household. This should include how the allegation was followed up and resolved and the outcome which must be placed on the foster parent's or staff member's file.

This Procedure applies to a wider range of allegations than those that are likely to cause a child significant harm. It also caters for cases of allegations that may indicate the alleged perpetrator may be unsuitable for working with children in his/her present or any other capacity. In the event of an investigation concluding that a staff member is not suitable to work with children and young people then a referral to the Disclosure and Barring Service or equivalent may be required.

This procedure should be used in all cases in which it is alleged that a member of staff, volunteer or a member of the community has:

- Behaved in a way that has harmed a child; and/or
- Possibly committed a criminal offence against a child or related to a child; and/or
- Behaved towards a child in a way that indicates that they may pose a risk of harm to children.
- Behaved or may have behaved in a way that indicates they may not be suitable to work with children.

### **There may be up to three strands in the consideration of an allegation:**

- A Police investigation of a possible criminal offence;
- Enquiries and assessment by the host Local Authority Designated Officer about whether a child is in need of protection or in need of services;
- Consideration by the service, following an internal investigation, of disciplinary action in respect of the individual.

If a child, or parent, makes an allegation of harm against a member of staff or volunteer, the person receiving the report must take it seriously and immediately inform the Registered Manager/Head of Service. If the allegation involves the Registered Manager/Head of Service/Line Manager, then the recipient of the report should inform the Managing Director/Head of Safeguarding.

The person receiving the report should clarify and record what is alleged, and should not tell the person about whom the allegation is being made.

The Registered Manager/Head of Service, in liaison with the HR Manager will make a decision, based upon the facts received, whether the member of staff be suspended with immediate effect.

### **Strategy Meeting**

#### **Protocol for England, Wales and NI**

Whenever social work and/or police are in receipt of a Child Protection referral, there should be a Strategy Meeting. Once a decision is made for a Strategy Meeting to be arranged, the Registered Manager/Head of Service should notify the Inspectorate where relevant.

The Strategy Meeting or discussion will be convened and chaired by the residing Local Authority and should involve all other agencies as appropriate (e.g., the child's nursery/school and health) and in particular any referring service. It may take place following a referral or at any other time if concerns about significant harm emerge about the child. Any service or individual can refer a safeguarding or child protection concern to the police and/or social care.

A Strategy Meeting may involve a face-to-face meeting or be conducted by telephone, but will always take place under child protection procedures and minutes are always recorded and distributed to relevant professionals. Strategy Meetings will normally take place within 24 hours of the referral being made.

The purpose of a Strategy Meeting is to share information, to plan and co-ordinate an appropriate response to the allegation or concern that has led to convening of the Initial Strategy Discussion.

During the Strategy Meeting, agreement should be reached on whether the threshold has been met for a S47 (child protection investigation). If the threshold is met, the meeting will consider whether further action will be progressed on a single service basis (Police or social worker) or a joint investigation by Police and Social Care.

An action plan will be produced from the Strategy Meeting. This will clearly state:

- Tasks and responsibility for completing these;
- Time-scales for completion;
- Contingency plans;



- Arrangements for Review Strategy Meetings.

The plan should take account of the need to assess the child's welfare as well as safety needs, and the need for assessment of any siblings.

The plan should also contain clear arrangements around accountability for action.

If the threshold for a S47 (child protection investigation) has not been met, then no further action is required under Child Protection procedures. However, the service may be asked to carry out an internal investigation and a clear formal outcome should be agreed upon at the strategy meeting.

The outcome of an investigation must be followed up even if the young person has left the organisation.

### **Protocol for Scotland**

Once a referral has been made, the responsible Local Authority will decide how it will progress the child protection process. The process has a number of steps, including initial information gathering, decision to launch investigation, planning, child protection conference and child protection plan (implemented by the core group). You may be asked to contribute to each step in some way.

### **Supporting Staff and Children**

The service recognises that children, young people and staff who are involved with a child who has suffered, or may suffer harm, may find the situation stressful or upsetting.

For each individual case, consideration will be made around the level and type of support offered.

### **Children**

The Head of Service/Registered Manager/Line Manager should ensure that a child is supported during any investigation. They may feel humiliated, blame themselves, and find it difficult to develop and maintain a sense of self-worth. This may necessitate the involvement of an independent person.

Where significant risks have been raised and a child may be suffering harm, a decision may be taken that the child needs to be cared for by a different family until the concerns have been fully investigated and concluded.

### **Adult children of foster parents**

There are numerous foster families where young adult children live at home and “baby-sit” for their parents. Thus they would benefit from having a basic understanding of child protection and the actions to be taken if they become aware of any concerns or if children disclose to them. Adult children of foster parents are able to attend all safeguarding training and will be offered guidance.

### **Recording**

Foster parents/ prospective adopters and staff must, as soon as possible, make a written record of their concerns, what they have been told, any questions they asked and the replies given, and the actions taken and by whom. They must give the report to the Registered Manager/Head of Service

Records should include specific and objective accounts, the date, year and time of the incident, the name of the child or young person with their date of birth and address.

The record should be placed on the child’s file and or the foster parent’s/ prospective adopter’s or equivalent file on the CHARMS/equivalent database system, except where a colleague is implicated or there is any risk to the child as a result, in which case notes and reports should be given to the manager dealing with the matter.

Foster parents, prospective adopters and staff must not discuss the matter with others, including other foster parents, prospective adopters, staff or birth parents, unless asked to do so by those responsible for dealing with any subsequent investigation or enquiry.

Your records should include:

- The date and time;
- The child or young person’s name, address and date of birth;
- The nature of the allegation;
- A description of any visible injuries – you should never examine the child especially if it’s sexual abuse;
- Your observations – e.g., a description of the child or young person’s behaviour and physical and emotional state. Making sure that you state it is in your opinion that....or it appeared that the child was.....;
- Exactly what the child or young person said and what you said. Record the child or young person’s account of what has happened in the child’s words;

- Any action you took as a result of your concerns, e.g., who you spoke to and resulting actions. Include names, addresses, and telephone numbers;
- Signing and dating what you have recorded;
- Storing the information in accordance with CHARMS/or equivalent database.

### Safeguarding in Parent & Child Arrangements (Fostering)

The service has a specific policy and procedures in relation to Parent & Child arrangements. It is essential to remember that the welfare of the child is paramount and that, in the event of a risk to the child including a risk from the child's parent, immediate steps must be taken to protect the child. Prior to any child and parent joining a fostering household, appropriate risk assessments must be carried out to ensure that the parent is not at risk to other foster children/children who live within the household. In the event of a safeguarding or child protection concern arising in relation to the child, the same process will be followed as with any child. The foster parent will ensure the immediate safety of the child and report the incident immediately to their Social Worker. Staff will respond immediately and report the matter to the responsible Local Authority or Trust and the child's Social Worker. In the event of an allegation being made against the foster parent, the process set out in the 'Managing Allegations against Foster Parents' procedure must be followed.

### Case Reviews

Occasionally, the service may be asked to contribute to Child Safeguarding Practice Reviews (England), Significant Case Reviews (Scotland) Extended Practice Reviews (Wales), Case Management Reviews (Northern Ireland) or other multi-service reviews about specific cases identified by safeguarding partners or equivalent.

In these circumstances, an Independent Manager will be identified to contribute information to the review. Advice and support for this process should be obtained from the Head of Safeguarding or Central Quality Assurance Team.

### Whistleblowing

The Service recognises that the decision to report a concern can be a difficult one to make, and especially if the concern is regarding a Senior Manager or is one of institutional abuse. If the person coming forward in raising the concern does not feel comfortable or able to approach, an employee or manager of, they could approach their host Local Authority or the Regulatory body, Ofsted.

Cultural norms developed over long periods of time can become powerful and behaviours can develop which are discriminatory, inappropriate and abusive. It is these circumstances, which can lead to feelings of disempowerment and a lack of ability to report such behaviours.

The service will not tolerate any harassment, bullying or victimisation (including informal pressures) and will take appropriate action to protect you when you raise a concern, which is in the interest of our children and young people. (Please see the Polaris Procedure on Whistleblowing).

## Where can I find out about local processes and procedures?

England – Multi-agency Safeguarding Arrangements (Working Together 2018)

[Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children \(PDF\)](#)

### Wales

All Local Authorities are covered by the 'Wales Safeguarding Procedures' available online at:

[Wales Safeguarding Procedures](#)

### Northern Ireland

The Safeguarding Board for Northern Ireland remains responsible for local procedures:

<https://www.safeguardingni.org/>

### Scotland

[Links to Area Child Protection Committees](#)

National Guidance for Child Protection in Scotland <https://www.gov.scot/publications/national-guidance-child-protection-scotland/>

## Important Contacts for Safeguarding Children

### **NSPCC – 24 Hour Helpline**

Tel: 0808 800 5000

For confidential advice and CP referrals

### **Ofsted (Regulatory Authority)**

Tel: 0300 123 4234

[enquiries@ofsted.gov.uk](mailto:enquiries@ofsted.gov.uk)

### **Disclosure and Barring Service**

Tel: 0870 90 90 811

[GOV.UK website](#)

[Disclosure](#) Scotland

**Fostering Network**

Tel: 020 7401 9582 (Mon – Fri, 10 am – 3 pm)

[info@fostering.net](mailto:info@fostering.net)

**Child line**

Tel: 0800 1111

**Employee Assistance Programme**

A 24-hour confidential helpline is open to all staff.

Call 0800 015 7287 for help with any issues or visit [www.colleaguesupport.co.uk](http://www.colleaguesupport.co.uk)