



# Edward's Trust

## SAFEGUARDING POLICY FOR CHILDREN AND YOUNG PEOPLE

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## PART ONE - THE POLICY

### 1. Safeguarding in Edward's Trust

- 1.1 Edward's Trust exists to create opportunities for children and young people to find hope and transformation now and fulfilment in their future. Edward's Trust wants to promote the safety and wellbeing of each child and young person in order that they have the best possible outcomes in all aspects of their lives. Edward's Trust wants children and young people to receive a quality service, so are committed to their protection, the prevention of harm, the promotion of their wellbeing and development, and their opportunity to experience optimum life chances.
- 1.2 Everyone within Edward's Trust shares the responsibility to promote the safety and wellbeing of children and young people, regardless of their position and whether they work in a paid or unpaid capacity.
- 1.3 Edward's Trust fully recognises the importance of working with parents, carers, and communities, and co-operating with other agencies in protecting children and young people.
- 1.4 All activity within Edward's Trust should consider and put measures in place to safeguard children and young people. However, during the course of our work situations will arise that raise concern regarding the safety or wellbeing of a child or young person. In response to these situations it may be necessary for a referral to be made to a Children's Services department who may need to take action to ensure the child or young person's protection.

This is referred to as Safeguarding and is part of the wider work to safeguard and promote the welfare of children.

- 1.5 Safeguarding is the activity that is undertaken to protect specific children who are believed to be suffering, or at risk of suffering, significant harm. The Children Act 1989 introduced the concept of significant harm as the threshold that justifies compulsory intervention in family life in the best interests of the child, and places a duty on Local Authorities to make enquiries to decide whether they should take action to safeguard or promote the welfare of a child who is suffering, or likely to suffer, significant harm.
- 1.6 Edward's Trust is required to follow the Safeguarding Procedures of the Local Safeguarding Children Board (LSCB) in Birmingham. Edward's Trust Safeguarding procedures are designed to augment local procedures and both must be followed.
- 1.7 In all its undertakings, Edward's Trust will:
  - Maintain a clear focus on the interests and rights of the child
  - Respect everyone who receives or provides its services;
  - Be supportive to children and their parent/s or carer/s in order to help
  - prevent abuse occurring or to mitigate its effect;
  - Co-operate with other agencies in dealing with actual or likely abuse;
  - Support ET team members (including volunteers) in working in this area of activity.

## 2. Recruitment and Selection Process

- 2.1 Edward's Trust will exercise proper care in the selection, appointment, training and support of those involved, including the use of Disclosure and Barring Service (DBS).
- 2.2 Edward's Trust will ensure that all employees (and volunteers where applicable) appointed will be trained, supported and supervised in accordance with government guidance on safe recruitment. This includes ensuring that when recruiting employees (and volunteers where applicable):
  - There is a written JD/ person specification or roles, responsibilities and requirements
  - Those shortlisted have been interviewed
  - Safeguarding has been discussed at interview where the applicant will be working with children, young people or vulnerable adults
  - Qualifications where relevant have been verified
  - Two references have been obtained including one from the most recent employer, or a recent contract.
  - A DBS check is completed where available and appropriate to the role
  - When appointed the appointee has been given a copy of Edward's Trust's safeguarding policy.
- 2.3 This policy will be reviewed annually by Trustees, or as needed in line with updates and good practice guidance.

## 3. Guiding Principles

- 3.1 The child's interests are **paramount** and his or her safety and welfare will always be given first priority.
- 3.2 Children and young people have the right to protection from neglect, abuse and exploitation (article 19 of the United Nations Convention on the Rights of the Child)
- 3.3 Safeguarding children and young people (including child protection) is everyone's responsibility.
- 3.4 A child's concern will be listened to and always taken seriously.
- 3.5 The limits of confidentiality in the context of Safeguarding will be explained to service participants at the time of their initial involvement with the organisation.
- 3.6 Care will be taken not to infringe privacy and confidentiality any more than is necessary to safeguard the welfare of the child.
- 3.7 In assessing the need for action when faced with Safeguarding concerns, Edward's Trust team members will consider the situation in the context of family relationships, religion and culture, but will not condone or ignore abusive behaviours that may be deemed acceptable to others.
- 3.8 Unless there are exceptional circumstances, ET team members will share their concerns with service participants and inform them of any action they intend to take.

- 3.9 Arrangements will be made to assist with communication in circumstances of disability or where English is not the first language.
- 3.10 Edward's Trust team members will use plain, jargon-free language appropriate to the age, understanding and culture of each person, and will explain any unavoidable technical or professional terms.
- 3.11 Edward's Trust will ensure that all team members, including volunteers, understand the agency's safeguarding procedures, and are trained to appropriate levels in safeguarding, including the latest Government guidance and requirements.
- 3.12 Edward's Trust will ensure that the safeguarding procedures for the authorities within which it operates are understood in order that good working relationships and appropriate levels of co-operation can be maintained.
- 3.13 Edward's Trust will ensure that all team members receive appropriate supervision on a regular basis and have access to a line manager in the event of the need for urgent case discussion.

#### 4. Scope of the Policy

- 4.1 Every child or young person has the right to protection. Edward's Trust is committed to practice that promotes good outcomes for children and young people and protects them from harm. Team members in Edward's Trust accept and recognise their responsibility to develop awareness of the issues that cause children and young people harm.
- 4.2 Safeguarding is everyone's responsibility. Everyone working within Edward's Trust has a responsibility to protect children and young people and to respond to any concerns about a child or young person thought to be suffering (or suffered) harm as a result of abuse or neglect. Therefore, there is no trustee, director, manager, practitioner (including full-time, part-time and casual workers), carer, administrator, domestic assistant or volunteer that falls outside the scope of this Policy.

#### 5. The Aim of the Policy

**Edward's Trust endeavours to safeguard children and young people by ensuring that every team member will:**

- **Understand their responsibility in relation to protecting children**
- **Know how to respond to concerns regarding the safety or welfare of a child or young person**
- **Know how to respond to an allegation made against a member of Edward's Trust where it is considered that a child may have been harmed or put at risk of harm.**

## 6. Roles and Accountabilities

- 6.1 Everyone working within Edward's Trust shares the responsibility to respond to concerns regarding the safety or welfare of children and young people. However, it is not the responsibility of anyone within Edward's Trust to investigate concerns, but to take their concerns to the appropriate person who has responsibility for dealing with the concerns and referring them on to the appropriate agency, if required.
- 6.2 Edward's Trust has a Designated Safeguarding Lead (DSL) Sharon Downey Bereavement Services Manager [sharon.downey@edwardstrust.org.uk](mailto:sharon.downey@edwardstrust.org.uk) who team members will go to with their concerns. In Sharon's absence the DSL IS Yvonne Gilligan CEO . [yvonne.gilligan@edwardstrust.org.uk](mailto:yvonne.gilligan@edwardstrust.org.uk) Following the receipt of information regarding a concern, the DSL is responsible for:
- Considering any immediate action required to protect the child
  - Deciding, after consultation with the team member and if necessary their clinical supervisor, whether the concerns warrant a referral to the relevant authority's Children's Services Department
  - Making the referral (or delegating this to the Edward's Trust team member if appropriate)
  - Ensuring the information has been recorded in line with Edward's Trust standards and procedures for case file recording and safeguarding incident reporting
  - Communicating any concerns to Trustees at quarterly meetings or sooner if deemed necessary
  - Following up the referral where required (for example, where there has been no response from the Children's Services Department)
- 6.3 **Failure (by anyone) to respond to, or report concerns regarding the safety or welfare of children and young people could result in disciplinary action.**
- 6.4 The DSL should follow the procedure for recording any concerns considered to be safeguarding incidents or near misses (regardless of whether or not the concerns have been referred to a Children's Services Department).
- 6.5 In order to make decisions about what action to take to protect children and young people, the DSL must be clear of their reporting structure and seek advice from the Chair of Trustees as appropriate.

## 7. Legal framework and guidance

### 7.1 Legal Framework

Edward's Trust Safeguarding Policy and Procedure is underpinned by:

- Children Act 1989
- Children Act 2004
- Children Act 2006 (EYFS Statutory Framework)
- Children and Families Act 2014
- Protection of Children Act 1999
- Safeguarding Vulnerable Groups Act 2006

- Equalities Act 2010
- The Police Act 1997
- UN Convention on the Rights of the Child
- Human Rights Act 1998
- Data Protection Act 1998 (amended 2003)
- Counter Terrorism and Security Act 2015
- Female Genital Mutilation Act 2003
- Keeping Children Safe in Education

## 7.2 Guidance

Guidance informing this Policy includes:

- Working Together to Safeguard Children 2018 – A Guide to Inter-agency working to Safeguard and Promote the Welfare of Children
- What to do if you are worried a child is being abused, DfE, March 2015
- Information Sharing – advice for practitioners providing safeguarding services to children, young people, parents and carers, March 2015
- Safeguarding Children and Safer Recruitment in Education Guidance 2007
- Data Protection: Toolkit for Schools, April 2018
- The Prevent Duty Guidance 2015
- Right Help, Right Time – delivering effective support to children and families in Birmingham, Jan 2018

## 8. Associated policies and guidance

This Policy should be read in conjunction with Edward’s Trust;

- Lone Working Policy Procedure
- Whistleblowing
- Complaints from children and young people, adult service participants and volunteers
- Health and Safety responsibilities
- Risk assessment and management
- Disciplinary policy

## PART TWO - THE PROCEDURE

### 9. What to do if you’re worried a child is being abused

9.1 A safeguarding issue may come to the notice of an Edward’s Trust team member or volunteer in several ways:

- A child may make a direct allegation or disclose abuse
- A child may make a comment that seems to suggest abuse
- A child may have bruises or marks
- A child’s behaviour may suggest the possibility of abuse

- Something in an adults behaviour may suggest that they are not a suitable person to care for children.

**Edward’s Trust team members and volunteers should know how to respond to each of these situations.**

- 9.2 Where an allegation is made relating to a member of the Edward’s Trust team or for any other reason suspicion falls on a member of the team – please refer to the procedure outlined in Section 3.
- 9.3 No member of the Edward’s Trust team should try to investigate whether or not a child has been abused; this responsibility lies with Children’s Services Departments and the police. All concerns must be taken to the Designated Safeguarding Lead (DSL) for discussion and agreement about what steps will be taken and by who. Every team member must be aware of whom to go to when their DSL is unavailable.
- 9.4 Failure (by anyone) to respond to, or report concerns regarding the safety or welfare of children and young people could result in disciplinary action.

**10. If a child makes a direct allegation or disclosure the Edward’s Trust team members should:**

- 10.1 **Let the child speak but should not ask any prompting or leading questions** (such as “did this happen last night?”). The general rule is to only ask questions that are necessary to clarify whether the child is alleging that abuse has taken place.  
*NB Remember that an allegation of child abuse or neglect may lead to a criminal investigation, so don’t do anything that may jeopardise a police investigation, such as asking a child a leading question*
- 10.2 **Communicate with the child** in a way that is appropriate to their age, understanding and preference. This is especially important for disabled children and for children whose preferred language is not English.
- 10.3 **Reassure** the child that they are doing the right thing in talking to you, but avoid interrupting a child who is freely recalling events.
- 10.4 **Listen carefully**; remembering that children may not necessarily have the vocabulary to explain clearly what it is that distresses them.
- 10.5 **Allow the child to speak** for as long as they wish; if the child is clearly alleging abuse this does not mean that you need to tell the child not to say any more.
- 10.6 **Never promise a child, young person or adult, that an allegation can be kept secret.** When an abusive or exploitative relationship exists, Edward’s Trust team members cannot agree to keep this a secret.
- 10.7 **Record what the child has said**, including any times or dates mentioned, and details of any significant marks or behaviour that were observed. Also note the names of any witnesses to what has been said or observed.



- 10.8 **Distinguish your own opinion from the facts.** Any opinion you write about the child presenting in a certain manner, for example, should be explained with evidence of what leads you to forming this opinion.
- 10.9 **Never try to question a person when a child has made a clear allegation about a specific individual.**
- 10.10 **Always take a child seriously if they make an allegation about another child or sibling.** This does not necessarily mean that you accept everything the child has said as fact, but all concerns require further enquiries to be made and it is not your responsibility to decide whether the abuse has taken place.
- 10.11 **Explain to the child what you have to do next and who you are going to speak to.**
- 9.12 **As soon as possible after the receipt of an allegation or disclosure the team member must share the information with the Edward's Trust DSL.** A discussion should agree the next steps and decide whether it is in the best interests of the child to inform the parent/s of the allegation made.
- 10.13 If a child or young person is being supported at school and the Edward's Trust team member has a safeguarding concern, either as the result of a disclosure or the child presentation (i.e. concerns around abuse or neglect) **this should be reported to the school DSL**, and where appropriate this should be done with the child present. The Edward's Trust team member should then also report this to the Edward's Trust DSL as soon as possible.
- 10.14 **A safeguarding log must be completed** (appendix 1) for all safeguarding issues and submitted to the DSL within 24 hours of a safeguarding concern.
- 10.15 In exceptional circumstances, when it is judged that the child or young person is in immediate danger, the DSL should take steps to keep them safe until appropriate action can be taken by Children's Services or the police. **A decision to take such action must be discussed immediately with the CEO, or in his/her absence the Chair of Trustees.**
- 10.16 In general, seek to discuss your concerns with the child, as appropriate to his/her age and understanding, and with their parent/s and seek agreement to making a referral to Children's Services **unless** you consider such a discussion would place the child at an increased risk of significant harm.
- 10.17 Where there are concerns that a child has been (or may be at risk of being) harmed and a parent refuses to agree to the referral being made to Children's Services, the parent/s should be informed that the referral will still be made in line with the responsibility of the Edward's Trust team members and charity to act in the best interests of the child.
- 10.18 All decisions and outcomes relating to sharing information and seeking consent to a referral being made should be fully recorded with an explanation as to how/why decisions have been reached.
11. If a child's comment seems to suggest abuse, but it is not clear, the Edward's Trust team member should follow the same procedure as in Section 9.

## **12. If a child presents with a bruise or mark, or the child's behaviour causes concern:**

- 12.1 There are a number of things that may raise questions in your mind: you may see that a child has bruises or other marks, or may notice something unusual in the child's behaviour. Often these observations could have several different explanations and you may be unsure whether you should be concerned or not. Edward's Trust team members are not expected to be experts in identifying child abuse, but they should document and report any concerns they have about a child to the Designated Safeguarding Lead.
- 12.2 If an Edward's Trust team member is concerned, they should try to be clear in their own mind about what it is that is disturbing them.
- 12.3 It may be appropriate to ask the child or the parent about a mark or unusual behaviour. Suspicion may be aroused more by an evasive or unconvincing answer than by the mark or behaviour itself.
- 12.4 If an Edward's Trust team member is concerned, they should note the names of anyone else who saw the mark or behaviour that caused the concern.
- 12.5 If you are suspicious about a particular person, do not try to question them yourself, but take all information and concerns to the DSL

## **13. In situations where an adult service participant openly refers to abuse or expresses concern about their, or a partner's treatment of a child; The Edward's Trust team members should:**

- 13.1 Check back what is being said and make it clear that he/she will need to discuss with their manager what happens next.
- 13.2 Upon receipt of any such information, the Edward's Trust team member should discuss the matter immediately with the DSL or CEO or in their absence Chair of Trustees.
- 13.3 Where, following consultation with the DSL/CEO, it is decided that an immediate child protection referral to Children's Services is required, the Edward's Trust team member should make the referral, with a written report detailing the concerns. NB: In any such circumstances it is for the Local Authority to decide and negotiate as to who undertakes the investigation.
- 13.4 Edward's Trust team members should, at all times, respect the right of parents, young people and children to be kept informed throughout the process of identifying concerns and referring them on to Children's Services. The wishes and feelings of the child or young person should, at all times, be ascertained and followed wherever possible. However, the primary consideration must always be the safety and welfare of the child or young person.

## **14. Historical Child Abuse by users of Edward's Trust services**

- 14.1 Edward's Trust has developed a set of clear criteria to determine what constitutes historical abuse, namely:

- The actual or likely abuse reported by an adult, that s/he or another person was abused as a child or young person
- An adult is defined as anyone over the age of 18
- Abuse comprises emotional abuse, neglect, physical injury and sexual abuse

14.2 Where a referral is received (from whatever source) alleging historical abuse, this should be passed to Children’s Services. Immediate telephone contact should be made (with the Children’s Services) where there is reason to believe that the alleged abuser is currently working with children and /or young people either within or outside of Edward’s Trust.

14.3 Edward’s Trust listens to, takes seriously and acts responsibly towards allegations of historical abuse and upon receiving information suggesting historical abuse, Edward’s Trust team members should:

- Inform the former service participant (or other informant) that the matter will be referred to the Appropriate Statutory Service who will respond to the referral.

**15. In making a referral to a Children’s Services Department, Service designated safeguarding persons or nominated practitioners, should ensure that:**

15.1 Any referral that is made should follow the process of the relevant Safeguarding Board in the West Midlands. <https://westmidlands.procedures.org.uk/> (See appendix 6 for more details)

15.2 An acknowledgement should be received from Children’s Services within one working day of it being received

15.3 Where no response has been received within three working days, Children’s Services should be contacted again.

15.4 Following investigation by The Local Authority, the person who has made the referral to Children’s Services may be invited to attend a Case Conference. The conference will bring together all the relevant professionals and the family, to consider whether an agreed child protection plan needs implementing. It is important that workers are supported in preparing a report for the meeting and ensuring that they attend, as they will have important information to share about the child and can contribute to agreeing the plan that may be produced as a result of the meeting.

**SECTION THREE: –**

**PROCEDURE FOR MANAGING ALLEGATIONS MADE AGAINST EDWARD’S TRUST TEAM MEMBERS**

**16. What to do when an allegation of abuse is made against a member of Edward’s Trust team**

16.1 All Edward’s Trust team members and volunteers must be familiar with and work to the principles and guidance set out in Edward’s Trust policy and procedures on Lone Working. Working to these principles and following the guidance will help ensure the protection of both children and Edward’s Trust team members. However, in rare circumstances Edward’s Trust team members working with children may become the subject of an allegation of abuse against a child in their charge.

- 16.2 In documentation from Local Safeguarding Children Boards (LSCB), ET team members working with children and young people (and/or vulnerable adults) may be referred to as “persons in a position of trust”. In addition to ET team members working directly with children and young people, this title also refers to others working within the charity. Within child care organisations, senior members (not necessarily having contact with children) have specific responsibility for ensuring the charity operates in ways that protect children and young people (for example Trustees and the Chief Executive). Owing to their specific responsibility, these individuals also fall into the group of “persons in a position of trust”
- 16.3 Whenever an allegation is made against an ET team members, a situation arises that requires the recipients of any information to remain highly professional and focused on the needs of the child. This can be very testing when faced with a situation where a member of ET team members (who will most likely be a colleague who is considered a respected and trusted member of a team) is suspected of harming a child. However, in such circumstances the recipient of any allegation must:
- Keep focused on the needs of the child
  - **Never breach confidentiality** by passing on the information to anyone other than the DSL (unless the allegation is against that person and so needs to be discussed with the Chair of Trustees)
  - Remember that an allegation of child abuse or neglect may lead to a criminal investigation, so don't do anything that may jeopardise a police investigation.
- 16.4 A concern may arise about a person in a position of trust that raises a concern as to their suitability to work with children. If the allegation is made to a member of ET team members or a volunteer (who is not the subject of the allegation), as full information as possible must be obtained from the informant, including:
- The name of the alleged abuser
  - The nature of the alleged abuse and details of the child affected
  - When it is thought to have occurred and how often
  - How the informant knows about the incident/s
- 16.5 Where a child or young person makes an allegation of abuse (relating to now or in the past) by a member of ET team members or a volunteer, the recipient of the allegation should:
- Let the child speak but should not ask any prompting or leading questions. (Remember that an allegation of child abuse or neglect may lead to a criminal investigation, so don't do anything that may jeopardise a police investigation, such as asking leading questions)
  - Reassure the child that they are doing the right thing in talking to you, but avoid interrupting a child who is freely recalling events
  - Listen carefully; remembering that children may not necessarily have the vocabulary to explain clearly what it is that distresses them
  - Never promise a child or young person that you can keep an allegation secret

- Record what the child has said, including any times or dates mentioned, and details of any significant marks or behaviour that were observed. Also note the names of any witnesses to what has been said or observed
- Explain to the child what you have to do next and who you are going to speak to.

**16.6 The concern may be received in the form of a complaint from a child, young person or parent. In these circumstances, once it has been established that a child may have been harmed (or could have been harmed due to a failure to put safeguarding measures in place) and that a member of ET team is implicated, the complaints procedure is no longer appropriate, and this procedure must be followed.**

16.7 As soon as possible after the receipt of the information the ET team member must share the information with the designated safeguarding lead to enable an assessment to be made of any immediate danger to the child.

16.8 In exceptional circumstances, when it is judged that the child or young person is viewed as being in immediate danger, the designated safeguarding lead should take steps to keep them safe until appropriate action can be taken by Children’s Services. A decision to take such action requires immediate discussion with the CEO, or the Chair of Trustees.

16.9 In the case of an allegation being made against the designated safeguarding lead the information must be taken to the CEO or Chair of Trustees.

**17 Reporting an allegation of abuse made against a member of ET team**

17.1 Local Safeguarding Children Boards (LSCB) are responsible for ensuring that allegations against people working with children and young people are managed appropriately; each LSCB appoints a designated officer (titled Local Authority Designated Officer or LADO) who is responsible for this work that includes monitoring and reviewing incidents and sharing statistical information with the LSCB. When any allegation is made against a member of ET team members), the CEO or Chair of Trustees, will decide whether or not the LADO needs to be informed.

For the LADO Team in the West Midlands contact details are available through the West Midlands Child Protection and Safeguarding Procedures Manual at ; <https://westmidlands.procedures.org.uk/>

17.2 Following receipt of a concern that a child may have been harmed by a worker or volunteer who is within their service, the designated safeguarding lead must:

- Liaise with the CEO, who will inform the Chair of Trustees
- The CEO will take the member of ET team to one side and inform them that the allegation has been made

- At this point, they must not tell the ET team member the nature of the allegation
- Where the LADO has been consulted and advised that a referral to Children’s Services is required, do this without any delay and provide relevant information required.

17.3 Where circumstances dictate, Edward’s Trust will:

- Co-operate with any investigation undertaken by the police or local authority.
- Arrange for the provision of appropriate support to the child and carers of the child
- Consider and address the impact of any such allegations upon other children and parents receiving a service from the project
- Consider and address the impact of any such allegations upon the ET team members of the charity
- Review the existing safe working and child protection procedures

## PART FOUR - APPENDICES

### Appendix 1 Safeguarding log

#### PART FOUR - APPENDICES



## Appendix 1 Safeguarding Form Guidance on completion and Log

### Safeguarding Form – Guidance on Completion

This guidance is intended to support managers and practitioners in completing the safeguarding form. Where a safeguarding incident concern is raised by a team member, the manager or a senior practitioner (designated by the manager) should help the worker through the safeguarding process, using the safeguarding form as a tool to support the process.

#### What is a Safeguarding incident or near miss?

##### A safeguarding incident can be described as:

An action (or lack of action) that caused harm or could have caused harm) to a child/young person or vulnerable adult.

##### A near miss can is considered as:

- Something that could have gone wrong but was prevented
- Something that did go wrong but no serious harm was caused

## **When do I complete a safeguarding form?**

You need to complete a safeguarding form for recording and reporting:

- **Any** Child protection incidents resulting in a referral to Children's Social Care
- A safeguarding incident that has required you to take action (such as seeking advice from Children's Social Care or reviewing a risk assessment) but has not resulted in a referral to Children's Social Care
- Near misses relating to practice or settings (where a child, young person/vulnerable adult could have been hurt but was not)
- Practice issues that arise out of safeguarding incidents that need addressing at organisational level or highlighted issues that might require an organisational response, and therefore need to come to the attention of trustees
- Where a safeguarding issue also raises a Health and Safety issue

## **How do I complete the safeguarding form?**

Please complete the form electronically, the boxes are self-explanatory and will expand to fit your text.

### **This section relates to the incident and your reporting and reviewing responsibilities:**

#### **The Safeguarding Incident:**

1. Details of the incident – an anonymised description making sure that the safeguarding issues and any likely impact on the child/ren, young person or vulnerable adult are clearly identified
2. Action taken to safeguard the child/ren, young person or vulnerable adult – details of advice and guidance sought and received within Edward's Trust or externally should be recorded on the Safeguarding Incident log as a record of the decision-making process
3. The outcome – the result of the agreed action taken (for example, Children's Social Care have suggested that your referral to them does not meet their threshold and have requested that you continue to work with the family – if this is the case, your form should outline the plan for this)

#### **E. This section relates to the management reporting responsibilities:**

1. Line management reporting – where the form is completed by a practitioner, the Clinical Lead should acknowledge that they have seen the form and add any relevant comments.
2. The Clinical Lead is responsible for reporting any safeguarding concerns to the CEO.
3. The CEO will complete the box to confirm how the incident has been reported to them.
4. Reporting any Health and Safety issues arising out of specific safeguarding incidents.

5. Any referral made to Children’s Social Care or other agency.
6. Review of practice for the organisation – your plan to address organisational issues should include the timescale and who is responsible. Any issues you think may require an organisational response can be highlighted in this box and will be considered for inclusion at the next Safeguarding discussion meeting.

**Timescale for completing form and giving to Clinical Lead**

This form must be completed electronically within 24 hours of a reported incident and emailed directly to the Clinical Lead the CEO must be copied in to the email.

**Where should the form be stored?**

The form will be stored in a Safeguarding Folder and kept securely locked in a filing cabinet on site at all times

**What happens to the form and the information?**

The form will be kept securely for reference purposes and for sharing of information to third parties as required. The information will be used anonymously for the purposes of recording statistics organisational monitoring and general reporting across the team of staff and trustees.

**How do we ensure learning is shared across the Team?**

Learning from Safeguarding incidents and near misses will be discussed within peer supervision and team meetings. Relevant information for sharing good practice will be shared across the whole team; including trustees in meetings and email circulars.

**Safeguarding Incident Reporting Form**



**THIS FORM MUST BE COMPLETED WITHIN 24 HOURS OF A REPORTED INCIDENT**

The Designated Safeguarding Lead (DSL) is Sharon Downey (Bereavement Services Manager )

**Section 1: The Safeguarding Incident**

<b>Date form filled in:</b>
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Name of person completing form	
Job Title of person completing form	

Child/Adult Client ID	Date of Birth	Parent/Carer Initials	Counsellor/Staff member involved	Notes



**Details of the Incident/concern – an anonymized description making sure that the safeguarding issues and any likely impact on the child/ren or vulnerable adult are clearly identified**

Date, time and location of incident/disclosure:

Please include where you were when the child/adult made a disclosure, what you saw, who else was there, what did the child/adult say or do, what you said in response

Was there an injury? Yes/No

If applicable, describe the injury

Action Taken to safeguard the child/ren or vulnerable adult

The Outcome of action taken

If you are not passing this form to the ET Designated Safeguarding Lead (DSL)

Who are you passing this form to?

Name:

Job Title:

### Section 2: Line Management Reporting Procedure

Line manager received Incident Report	Y/N	Date Received:
Line Manager Comments (If any)		
CEO Informed of Incident	Y/N	Date Informed:
CEO Comments (If any)		

### Section 3: Outcome of Safeguarding Incident

Action taken Date:	
Health and Safety concerns	
Review of practice and learning/recommendation for	

future	
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**Section 4: Further Action/Incident Closure Log**

Further Action required By Date:	
Date Incident Closed:	

Signed off by DSL on (Date)	
Name and Job Title	

**Appendix 2 Definitions and Impact of Abuse - Working Together To Safeguard Children – July 2018**

**Children**

Anyone who has not yet reached their 18th birthday. The fact that a child has reached 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital or in custody in the secure estate, does not change their status or entitlements to services or protection.

**Safeguarding and promoting the welfare of children**

Defined for the purposes of this guidance as: a. protecting children from maltreatment, b. preventing impairment of children's health or development, c. ensuring that children are growing up in circumstances consistent with the provision of safe and effective care, d. taking action to enable all children to have the best outcomes

**Child protection**

Part of safeguarding and promoting welfare. This refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.

**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. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults, or another child or children.

**Physical abuse**

A form of abuse which 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.

**Emotional abuse**

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 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 developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a 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 (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**

Involves forcing or enticing a child or young person 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. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

### **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.

### **Neglect**

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, neglect may involve a parent or carer failing to: a. provide adequate food, clothing and shelter (including exclusion from home or abandonment) b. protect a child from physical and emotional harm or danger c. ensure adequate supervision (including the use of inadequate caregivers) d. ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

### **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. We also regard calls for the death of members of our armed forces as extremist.

### **Young carer**

A young carer is a person under 18 who provides or intends to provide care for another person (of any age, except generally where that care is provided for payment, pursuant to a contract or as voluntary work).

### **Parent carer**

A person aged 18 or over who provides or intends to provide care for a disabled child for whom the person has parental responsibility.

Education, Health and Care Plan

A single plan, which covers the education, health and social care needs of a child or young person with special educational needs and/or a disability (SEND). See the Special Educational Needs and Disability Code of Practice 0-25 (2014).

### **Local authority designated officer**

County level and unitary local authorities should ensure that allegations against people who work with children are not dealt with in isolation. Any action necessary to address corresponding welfare concerns in relation to the child or children involved should be taken without delay and in a coordinated manner. Local authorities should, in addition, have designated a particular officer, or team of officers (either as part of multi-agency arrangements or otherwise), to be involved in the management and oversight of allegations against people who work with children. Any such officer, or team of officers, should be sufficiently qualified and experienced to be able to fulfil this role effectively, for example qualified social workers. Any new appointments to such a role, other than current or former designated officers moving between local authorities, should be qualified social workers. Arrangements should be put in place to ensure that any allegations about those who work with children are passed to the designated officer, or team of officers, without delay.

### **Safeguarding partners**

A safeguarding partner in relation to a local authority area in England is defined under the Children Act 2004 as: (a) the local authority, (b) a clinical commissioning group for an area any part of which falls within the local authority area, and (c) the chief officer of police for an area any part of which falls within the local authority area. The three safeguarding partners should agree on ways to co-ordinate their safeguarding services; act as a strategic leadership group in supporting and engaging others; and implement local and national learning including from serious child safeguarding incidents. To fulfil this role, the three safeguarding partners must set out how they will work together and with any relevant agencies as well as arrangements for conducting local reviews.

### **Child death review partners**

A child death review partner in relation to a local authority area in England is defined under the Children Act 2004 as (a) the local authority, and (b) any clinical commissioning group for an area any part of which falls within the local authority area. The two partners must make arrangements for the review of each death of a child normally resident in the area and may also, if they consider it appropriate, make arrangements for the review of a death in their area of a child not normally resident there. They must also make arrangements for the analysis of information about deaths reviewed under this section. The purposes of a review or analysis are (a) to identify any matters relating to the death or deaths that are relevant to the welfare of children in the area or to public health and safety, and (b) to consider whether it would be appropriate for anyone to take action in relation to any matters identified.

## **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 (a) in exchange for something the victim needs or wants, and/or (b) for the financial or other advantage of the perpetrator or facilitator and/or (c) 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.

## **Appendix 3 Edward's Trust Code of Behaviour for Edward's Trust**

Edward's Trust seeks to have a child-centred approach to its work and recognises the need to:

- Listen to the children
- Value and respect children as individuals
- Involve children in decision making, as appropriate
- Encourage and praise children

It is also important for the protection of all concerned that ET team members and children and young people have guidelines on what is expected, and what is not accepted, with respect to their behaviour.

### ***Guidelines for ET team members***

- ET team members should not spend excessive amounts of time alone with children, away from others.
- Meetings with individual children or young people should take place as openly as possible.
- If privacy is needed, the door should have a see-through glass panel and other ET team members informed of the meeting.
- ET team members and volunteers are advised not to make unnecessary physical contact with children and young people.
- However, there may be occasions when physical contact is unavoidable, such as providing comfort and reassurance for a distressed child, or physical support, for example in sports activities.
- In all cases, physical contact should only take place with the consent of the child or young person.
- It is not good practice to take children alone in a car on journeys, however

short. Where this is unavoidable, it should be with the full knowledge and consent of the parents/carers and the DSL or CEO.

- ET team members should not meet with children outside organised activities, unless it is with the knowledge and consent of parents/carers and the CEO/Chair of Trustees.
- ET team members and volunteers should never:
  - engage in rough physical games, including horseplay apart from structured sports activities
  - allow the use of inappropriate language to go unchallenged
  - make sexually suggestive comments about, or to, a child, even in fun
  - let allegations a child makes, go without being addressed and recorded
  - do things of a personal nature for children that they can do themselves

#### Appendix 4 Information Sharing

Effective sharing of information between practitioners and local organisations and agencies is essential for early identification of need, assessment and service provision to keep children safe. Serious case reviews (SCRs13) have highlighted that missed opportunities to record, understand the significance of and share information in a timely manner can have severe consequences for the safety and welfare of children.

Practitioners should be proactive in sharing information as early as possible to help identify, assess and respond to risks or concerns about the safety and welfare of children, whether this is when problems are first emerging, or where a child is already known to local authority children's social care (e.g. they are being supported as a child in need or have a child protection plan). Practitioners should be alert to sharing important information about any adults with whom that child has contact, which may impact the child's safety or welfare.

Information sharing is also essential for the identification of patterns of behaviour when a child has gone missing, when multiple children appear associated to the same context or locations of risk, or in relation to children in the secure estate where there may be multiple local authorities involved in a child's care. It will be for local safeguarding partners to consider how they will build positive relationships with other local areas to ensure that relevant information is shared in a timely and proportionate way.

Fears about sharing information must not be allowed to stand in the way of the need to promote the welfare, and protect the safety, of children, which must always be the paramount concern. To ensure effective safeguarding arrangements:

- all organisations and agencies should have arrangements in place that set out clearly the processes and the principles for sharing information. The arrangement should cover how information will be shared within their own organisation/agency; and with others who may be involved in a child's life.
- all practitioners should not assume that someone else will pass on information that they think may be critical to keeping a child safe. If a practitioner has concerns about a child's welfare and considers that they may be a child in need or that the child has suffered or is likely to suffer significant harm,

then they should share the information with local authority children's social care and/or the police. All practitioners should be particularly alert to the importance of sharing information when a child moves from one local authority into another, due to the risk that knowledge pertinent to keeping a child safe could be lost

- all practitioners should aim to gain consent to share information, but should be mindful of situations where to do so would place a child at increased risk of harm. Information may be shared without consent if a practitioner has reason to believe that there is good reason to do so, and that the sharing of information will enhance the safeguarding of a child in a timely manner. When decisions are made to share or withhold information, practitioners should record who has been given the information and why.

Practitioners must have due regard to the relevant data protection principles which allow them to share personal information, as provided for in the Data Protection Act 2018 and the General Data Protection Regulation (GDPR). To share information effectively:

- all practitioners should be confident of the processing conditions under the Data Protection Act 2018 and the GDPR which allow them to store and share information for safeguarding purposes, including information which is sensitive and personal, and should be treated as 'special category personal data'
- where practitioners need to share special category personal data, they should be aware that the Data Protection Act 2018 contains 'safeguarding of children and individuals at risk' as a processing condition that allows practitioners to share information. This includes allowing practitioners to share information without consent, if it is not possible to gain consent, it cannot be reasonably expected that a practitioner gains consent, or if to gain consent would place a child at risk

Whenever a Subject Access Request is made by an individual requesting that Edward's Trust discloses the personal data held about that individual, Edward's Trust' Data Protection Officer must be informed immediately. The Data Protection Officer is responsible for any decision as to whether or not to disclose data, and will generally liaise directly with the individual making the request. Edward's Trust' Data Protection Officer is the CEO.

(Also see Edward's Trust' policy on GDPR)

## Appendix 5 Review

The Board of Trustees has responsibility for reviewing this Policy on an annual basis.

## Appendix 6 West Midlands Child Protection and Safeguarding Procedures

Alongside this Policy the organisation must also give consideration to the West Midlands Child Protection and Safeguarding Procedures Manual which can be found at:

<https://westmidlands.procedures.org.uk/http/>

This Manual contains the child protection and safeguarding procedures for nine Local Safeguarding Children Boards in the West Midlands and are effective from 31<sup>st</sup> March 2017.

“It should be noted that whilst every attempt has been made to quote the correct statute and/or legislation, you should be aware that we may not have checked the current status of the statute/legislation quoted in this document and subsequent changes may also have been legislated. Consequently, you may wish to make your own checks, if you have any case of doubt or difficulty.”