



Bristol Safeguarding  
Children Board

making safeguarding everybody's business

# Single Agency Foundation Safeguarding Training

# 2018

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This document serves as both a source of information for delegates, and a workbook to be completed during the training itself.

## Introduction

“Practitioners working in both universal services and specialist services have a responsibility to identify the symptoms and triggers of abuse and neglect, to share that information and provide children with the help they need. To be effective, practitioners need to continue to develop their knowledge and skills in this area....” *Working together to safeguard children, 2018, chp1 para5*

**Learning Log: Prior to starting the course, please write here one thing you hope to have learnt by the end of the training:**

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**My Key Learning Points are: (the most important things you have learnt during the session, as they occur to you).**

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**My Key Action Points are: (specific things you will do as a result of coming on the training e.g. reading, additional training, discussing concerns about a particular child with a colleague).**

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## Why am I doing this training?

Everyone who works with children has a responsibility for keeping them safe. If you are doing this training that there are times in your work when you have contact with children. It might not be a lot of contact for some of you, but children choose who they will ask for help, and if they see you as someone they can trust, it could be you. You also need to know what to do if you have a concern about the way a child is being treated, about a colleague, or about whether an organisation is keeping children safe.

## Safeguarding & Child Protection

A **child** is anyone who has not yet reached their 18th birthday. 'Children' refers to both children & young people. It also includes unborn babies who come under child protection even though not legally a human until birth. It means pre-birth assessments can be done.

**Safeguarding** is defined as:

- protecting children from maltreatment;
- preventing impairment of children's health or development;
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care; and
- taking action to enable all children to have the best outcomes.

This means that it applies to all the things we do to prevent harm from occurring to children – whether it is a practical measure such as securing a building, to wellbeing lessons to help them develop good emotional health.

**Child Protection** is defined as:

The activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.

This means that we are often reacting to harm that has already happened (or likely to happen) and we are taking actions to stop the harm from carrying on or happening again. This refers to those times where there is an acute, high risk situation where Child Protection proceedings need to be considered.

## Learning from our Mistakes

In 2011 Eileen Munro presented her review of Child Protection in England and suggested a very different focus: "Beyond the blame – not who, but why?" This has led to recent changes in Serious Case Review (SCR) methods to examine the systems at work and identify lessons we can learn, rather than look for an individual who failed to act.

Another contributor to changing the way we investigate what went wrong was that research and serious case reviews have repeatedly shown that ineffective action has resulted in danger to children. It specifically draws on what poor practice can include, such as:

- failing to act on and refer the early signs of abuse and neglect;
- poor record keeping;
- failing to listen to the views of the child;
- failing to re-assess concerns when situations do not improve;
- sharing information too slowly;
- lack of challenge to those who appear not to be taking action.

In other words – we were not learning lessons from our previous SCR's, so we need to try something different.

## Information Sharing

Sharing information too slowly, or not at all, has been a finding from many SCR's over the last 15 years. In a bid to reverse this trend the government is clear in Working Together to Safeguard Children 2018 that everyone should be sharing information as early as possible to safeguard children. Listed below are the 7 rules that allow us to share information:

1. Remember that the General Data Protection Regulations and human rights law are not barriers.
2. Be open and honest with the individual (and/or their family) from the outset about why, what, how and with whom information will, or could be shared.
3. Seek advice from other practitioners if you are in any doubt about sharing the information concerned,
4. Share with informed consent where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information.
5. Consider safety and well-being:
6. Necessary, proportionate, relevant, adequate, accurate, timely and secure.
7. Keep a record of your decision and the reasons for it.

In addition to these rules, Working Together to Safeguard Children 2018 (pg20) also includes a myth busting guide for information sharing, which is included below:

### **Data protection legislation is a barrier to sharing information**

No – the Data Protection Act 2018 and GDPR do not prohibit the collection and sharing of personal information, but rather provide a framework to ensure that personal information is shared appropriately. In particular, the Data Protection Act 2018 balances the rights of the information subject (the individual whom the information is about) and the possible need to share information about them.

### **Consent is always needed to share personal information**

No – you do not necessarily need consent to share personal information. Wherever possible, you should seek consent and be open and honest with the individual from the outset as to why, what, how and with whom, their information will be shared. You should seek consent where an individual may not expect their information to be passed on.

When you gain consent to share information, it must be explicit, and freely given. There may be some circumstances where it is not appropriate to seek consent, because the individual cannot give consent, or it is not reasonable to obtain consent, or because to gain consent would put a child's or young person's safety at risk.

### **Personal information collected by one organisation/agency cannot be disclosed to another**

No – this is not the case, unless the information is to be used for a purpose incompatible with the purpose for which it was originally collected. In the case of children in need, or children at risk of significant harm, it is difficult to foresee circumstances where information law would be a barrier to sharing personal information with other practitioners.

### **The common law duty of confidence and the Human Rights Act 1998 prevent the sharing of personal information**

No – this is not the case. In addition to the Data Protection Act 2018 and GDPR, practitioners need to balance the common law duty of confidence and the Human Rights Act 1998 against the effect on individuals or others of not sharing the information.

### **IT Systems are often a barrier to effective information sharing**

No – IT systems, such as the Child Protection Information Sharing project (CP-IS), can be useful for information sharing. IT systems are most valuable when practitioners use the shared data to make more informed decisions about how to support and safeguard a child.

## **Types of Child Abuse**

We have four main categories of abuse – in Bristol one of these is selected to categorise a case under for Child Protection processes, however each category contains many different types of mistreatment. It is common to find evidence of more than one category of abuse.

It is important to remember that a child can be abused by one, or many, adults, or by other children. They are most commonly abused by people known to them, but it could also include abuse by strangers. The risk to children does not just come from family members – children are also at risk of exploitation (criminal or sexual), trafficking and radicalisation, referred to as “contextual safeguarding” we must know about these types of abuse too.

## Physical abuse

This 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 those 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, including violence within families. It may also involve serious bullying (including cyber bullying).

## 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 (including via the internet).

Children can be sexually abused by adults (men or women) or by other children.

## Neglect

This is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- protect a child from physical and emotional harm or danger
- ensure adequate supervision (including use of adequate care-givers)
- ensure access to appropriate medical care or treatment
- It may also include neglect of or unresponsiveness to a child's basic emotional needs.

## Contextual Safeguarding

These are the types of abuse where the risk comes from other children/young people or adults outside of the family. They can also happen online. Children can suffer one, or multiple forms of this type of abuse. Examples of these types of abuse include:

- Gang involvement – including county lines
- Trafficking
- Online abuse
- Sexual exploitation
- Attempts to radicalise

## Peer on Peer Abuse

It is important to remember children can be abused by other children (their peers). The child who hurts others could be the same age, or younger, than the child being harmed. Peer on peer abuse could involve physical or sexual abuse, exploitation, and online abuse.

This can be a complex area as the children who harm others may also be in need of help and protection themselves. It is vital that any concerns are reported promptly so that all children involved can be kept safe.

## Signs, Symptoms, Indicators of possible Abuse

No one sign on its own can be a definitive indicator. It is more important to look for changes in a child's normal demeanour and behaviour. A cluster of signs is clearly a cause for concern and reporting. Records should be kept of all concerns to see if a pattern emerges and to help the designated person decide when to refer to Social Care.

It is often the case that the same symptoms can be present for different categories of abuse, and some children will not show any symptoms. If you notice any of the below then share your concerns with your line manager or safeguarding lead:

- Low self-esteem, self-disgust
- Unusually fearful of certain adults
- Withdrawn/flinching at physical touch/closeness
- Aggression to others
- Unnatural compliance /unusually acquiescent with parents/carers/staff
- Depression
- Self-harm, suicidal thoughts/attempts
- Wearing cover up clothing inappropriate to weather
- Refusal to discuss injuries or a story that doesn't make sense for the injury
- Inexplicable decline in school performance
- Lack of concentration, restlessness, aimlessness
- Sudden changes in personality
- Eating disorders - significantly under or overweight

- Age inappropriate clinging, insecure behaviour
- Regressive behaviours
- Non-attendance, lateness, arriving early/ leaving late running away from home
- Destructive tendencies
- Drug/ alcohol/ solvent misuse
- Abnormal, persistent unexplained tiredness
- Persistent poor personal hygiene

## Parents & Carers Smacking Their Own Children – The Law

In England (and at the moment Wales) parents (and others who have care of a child, unless otherwise restricted by law) can raise the defence of “reasonable punishment” for a common assault on a child (S58 Children Act 2004).

This defence is not available for injuries which cause actual bodily harm (ABH - or more serious than that).

This can make it difficult to identify what level of corporal punishment is acceptable – to help us we look at the CPS charging standards for different levels of assault and they tell us that where there is more than “reddening of the skin, the charge will normally be assault occasioning actual bodily harm, although prosecutors must bear in mind that the definition of ABH requires the injury to be more than transient and trifling.

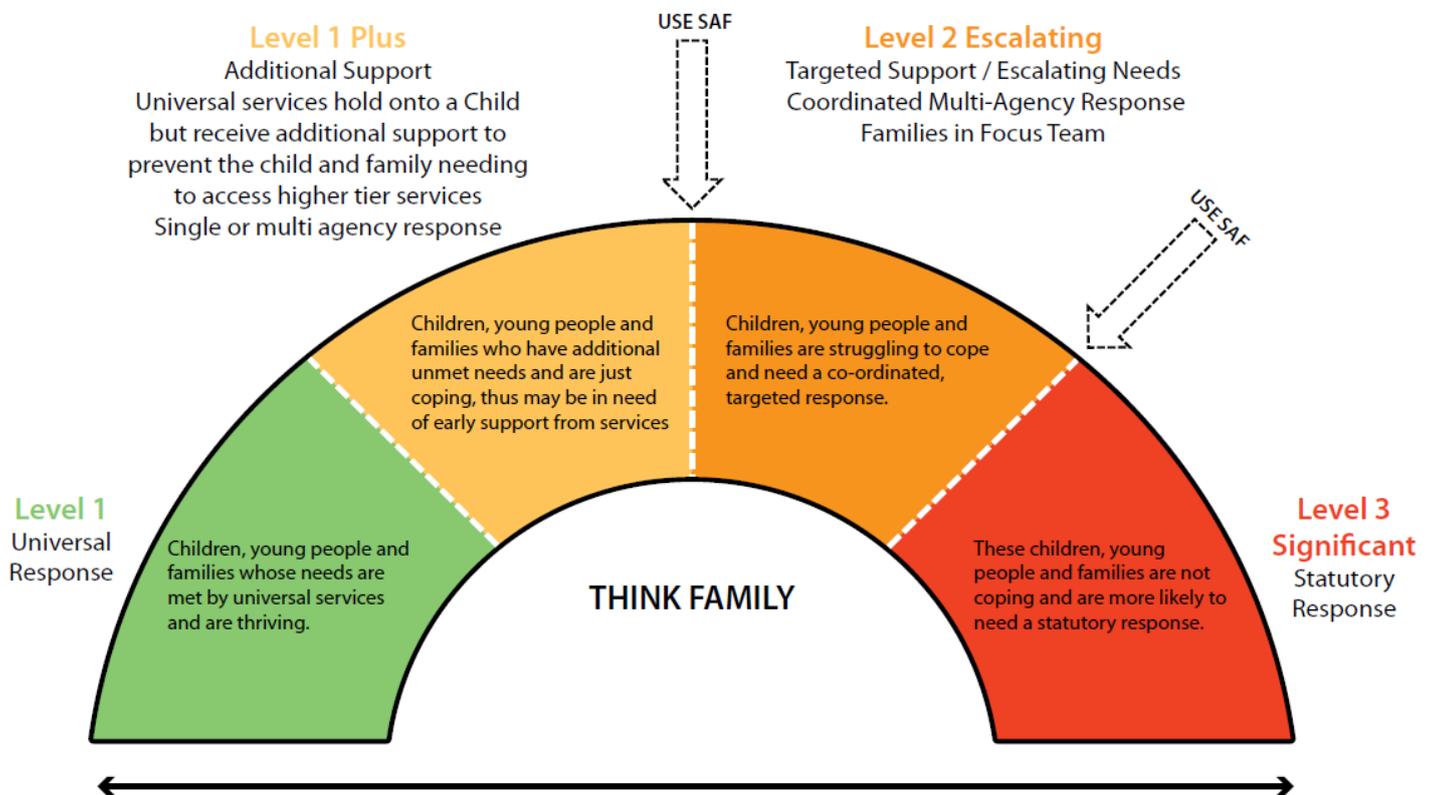
This is guidance only, and prosecutors have wide discretion so it does not ‘set in stone’ the level at which a parent could face a criminal charge.

For practical purposes this means that in England and Wales we must consider any assault that leaves a visible injury as a possible Child Protection concern and inform Social Care at the earliest opportunity.

### Other Organisations

- Since 1987 corporal punishment has not been allowed in schools – including independent schools.
- In 1989 it was banned in children's homes.
- In 2002 Wales prohibited physical punishment in any form of day care including child minding

## The Bristol Process – Thresholds & the Continuum of Need



This diagram provides a visual summary of the different thresholds for families in need of support in Bristol.

Bristol’s population of under 18’s is approximately 22,000. All figures are approximate because of course this changes daily.

Approximately 70% of Bristol children and young people journey from unborn to 18 years old without leaving level 1. The majority of them thrive with the universal services that they all have a right to. At the other end of the continuum, approximately 7% of Bristol children will spend part of their journey to adulthood in Level 3. The children in level 3 include all of our disabled children, children in need, those with an active child protection plan, and those who are Looked After Children.

The other Bristol children will require extra support in order to thrive, which could be provided from a range of services, including a universal service providing some extra help. The less children in Level 3 the better for them, their families and society as a whole, so the better we are at identifying and intervening with families at level 1plus & 2 the better outcomes for everyone.

There is plenty of detailed information, advice and guidance provided in the 2018 Threshold document and matrices, so if you are ever confused about what to do to support a family, this should be the first place that you look to for help – links are in the useful info section.

## Early Help, Child in Need or Risk of Significant harm?

### S.10 Children Act 2004 – early help

This places a duty on all agencies and individuals working with children to cooperate and make arrangements with regard to the wellbeing of all children in the area.

Early help means providing support as soon as problems emerge.

Effective early help relies upon local agencies working together to identify children and families who would benefit from early help, undertake assessments of the need for early help and provide targeted services to address those needs to improve outcomes for them.

### S.17 Children Act 1989 – Child in Need

A child is 'in need' if they are disabled or if their health or development may be impaired without the provision of services. If they are unlikely to achieve or maintain a reasonable standard of health or development.

Under Section 17 the Local Authority are obliged to identify needs for services and to make arrangement for services to be provided by others such as voluntary groups.

### S.47 Children Act 1989– Risk of significant harm

Under Section 47 the local Authority are obliged to make all necessary enquires when there is reasonable cause to suspect that *“a child is suffering or is likely to suffer significant harm”*.

This is the threshold that justifies compulsory intervention in family life in the best interests of children.

It covers all the four types of abuse: physical, sexual, emotional, neglect.

*Harm* is 'significant' if the child is in actual danger or if the child's health or development is suffering when compared to that which could be reasonably expected of a similar child.

e.g. a child under 13 is not legally capable of consenting to sexual activity, so knowledge that penetrative sex had occurred would always lead to enquiries.

## Signs of Safety

In Bristol, the Signs of Safety approach is used in all work involving Children in Need or Child Protection. This is an approach that involved the family, and makes sure that the child's voice is heard. It is important that everyone involved in the process is honest, specific about their concerns, and uses clear language that everyone (including the children) can understand. There are 3 questions asked during the process:

1. What are we worried about?
2. What is going well?
3. What needs to happen next?

If you are likely to be taking part in CIN or CP meetings then make sure you have attended a course that includes more details about Signs of Safety.

**Course Activities**

**Exercise: Safeguarding – what does it mean to you?**

Discuss with other people in your group what safeguarding means in your setting. What part of your job does safeguarding apply to? Who does safeguarding apply to? List any parts of your daily routine that relate to safeguarding – what would happen if you forgot to do them?

**Exercise: A Cause for Concern?**

Please complete this activity on your own. Don't think too much about your answer, use your instinct. Score your concern based on the below:

- 1 = STRONGLY DISAPPROVE
- 2 = DISAPPROVE
- 3 = APPROVE
- 4 = STRONGLY APPROVE

	1	2	3	4
A parent teaching their child the facts of life.				
A child gets home from school at 4.00pm, their parent doesn't get home until 6.00pm.				
A parent who leaves adult video's on when not in the room.				
A parent who allows their child to be responsible for their clothes.				
A child who watches TV all evening.				
A parent who walks around the home with no clothes on.				
A parent who smacks their child for discipline.				
A parent who shares a bed with their child.				

**Once you have completed the form, discuss your scores with the rest of your group. If you have any differences in scores share the reasons for your score.**

## **Exercise – Signs and Symptoms of Abuse**

Use the flipchart provided to record as many signs and symptoms for the 4 main categories of abuse as you can think of. Take time to consider the less obvious ones. Make notes so that you can feedback to the main group.

## **Exercise – Safeguarding Scenarios**

Read the scenarios provided, then discuss in your groups:

1. Is this abuse?
2. If so, which category of abuse?
3. What are you worried about?
4. If nothing changes, what impact will this have on the child?

## **Exercise: Safeguarding Information**

You will need certain information as part of your role in safeguarding children and young people. If you can't answer the questions below, add them to your learning log as actions and find out as soon as you get back to work.

1. Where is your own organisations' safeguarding and child protection policy?
2. What other policies does your workplace have that are important for safeguarding children?
3. What is the name of the person that you should report concerns to? If they are not available who should you tell?
4. When you have a concern, how do you record it and where do you find details for how to do this?
5. If you have concerns about the way a colleague behaves towards a child/children, what is the name of the person you should speak to?
6. What is the telephone number for First Response?
7. Who is the LADO for Bristol? How do you contact them if you need to?

## Useful information & relevant reading

**First Response:** 0117 903 6444 – if urgent referral, immediate risk of significant harm.  
Otherwise refer at: <https://www.bristol.gov.uk/social-care-health/report-concern-about-child-for-professionals>

**Outside office hours-** Emergency Duty Team- 01454 615165

**Families in Focus -** North: 0117 352 1499, South: 0117 903 7770, East Central: 0117 357 6460

**Children’s Social Work Units:** contact numbers for all 27 units across the city can be found at: <https://www.bristol.gov.uk/social-care-health/social-work-contact-details-children-and-young-people>

**BSCB website:** <https://bristolsafeguarding.org/children-home/>

**Bristol Threshold Guidance:** <https://bristolsafeguarding.org/media/27281/bscb-multi-agency-threshold-guidance.pdf>

**Bristol Thresholds: Unborn Matrix:** <https://bristolsafeguarding.org/media/27272/final-unborn-matrix.pdf>

**Bristol Thresholds: 0 – 4 yrs Matrix:** <https://bristolsafeguarding.org/media/27273/final-threshold-matrix-0-4.pdf>

**Bristol Thresholds: 5-11 yrs Matrix:** <https://bristolsafeguarding.org/media/27274/final-threshold-matrix-5-11.pdf>

**Bristol Thresholds: 11-18 yrs Matrix:** <https://bristolsafeguarding.org/media/27275/final-threshold-matrix-11-18.pdf>

**Bristol Single Assessment Framework Guidance:**  
<https://bristolsafeguarding.org/media/1175/saf.pdf>

**Escalation Policy:** <https://bristolsafeguarding.org/media/27294/revised-escalation-procedure-230418.pdf>

**South West Child Protection Procedures:** [www.swcpp.org.uk](http://www.swcpp.org.uk)

**Bristol LADO:** Nicola Laird, Tel. 0117 903 7795, form to report an allegation:  
<https://bristolsafeguarding.org/children-home/professionals/policies/#AllegationsProfessionals>

**NSPCC – 24hr Helpline-** 0800 800 5000 or [www.nspcc.org.uk](http://www.nspcc.org.uk)

**ChildLine-** 0800 1111 or [www.childline.org.uk](http://www.childline.org.uk)

**NSPCC Whistleblowing Hotline:** 0800 028 0285

**BSCB Training:** <https://bristolsafeguarding.org/children-home/training/>

**HM Information Sharing Guidance:**

<https://www.gov.uk/government/publications/safeguarding-practitioners-information-sharing-advice>

**Working together to Safeguard Children (July 2018):**

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/729914/Working Together to Safeguard Children-2018.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/729914/Working_Together_to_Safeguard_Children-2018.pdf)

**What to do if you're worried a child is being abused:**

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/419604/What to do if you re worried a child is being abused.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419604/What_to_do_if_you_re_worried_a_child_is_being_abused.pdf)

**NSPCC update service:** <https://www.nspcc.org.uk/services-and-resources/research-and-resources/sign-up-to-caspar/>

**Brook Traffic Lights Tool:** <https://www.brook.org.uk/our-work/category/sexual-behaviours-traffic-light-tool>

**Munro Review:** <https://www.gov.uk/government/publications/munro-review-of-child-protection-final-report-a-child-centred-system>

**Bichard Inquiry Report:** <http://dera.ioe.ac.uk/6394/1/report.pdf>

**Laming Inquiry (Victoria Climbié):** <https://www.gov.uk/government/publications/the-victoria-climbié-inquiry-report-of-an-inquiry-by-lord-laming>

## Videos used during training

Safeguarding Video – Adam's story: <https://youtu.be/pLaHfZgSOYY>

Talking to Children – PANTS Song: <https://youtu.be/fn6AVSZk008>

Jay (CSE - boyfriend model): <https://youtu.be/XasNkfQ5AVM>

# You have concerns about a child

