

Safeguarding children policy

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1. Introduction

AWP and all its practitioners need to be fully aware of the statutory duties to work with service users in the context of their family and local community, and be able to demonstrate the actions taken to safeguard children and comply with the legal principle that the needs of the child must always be put first (primacy of the child).

Reports such as the Laming Reports (2003 and 2009), and the Munro Report (2011) have contributed to the development of these changes to policies and systems to protect children. The national statutory guidance [Working Together to Safeguard Children \(2018\)](#) provides updated direction to services and practitioners on safeguarding children.

AWP works within local authority based multiagency partnerships that safeguard children, each of which is led by a Local Safeguarding Children Board (LSCB).

Safeguarding children procedures are primarily accessed through the [South West child protection procedures website](#) and the local LSCB websites that set out local policies and arrangements.

2. Purpose or aim

This overarching policy is to assist staff in effectively meeting their statutory duty to protect and safeguard children under the age of eighteen years old.

This policy complements the South West multi agency procedures and local LSCB procedures including those on Forced Marriage, Modern day slavery, Honour Based Violence, Childhood Sexual Exploitation and Female Genital Mutilation throughout the Trust by:

- defining the Trusts internal arrangements for Safeguarding Children
- informing staff of the general principles to safeguard children and effectively signposting staff into the relevant procedures and to access for local contacts and leads.

The policy describes the support, advice, policies, and guidance available to staff, both internally and externally, in the effective safeguarding of children within their practice.

3. Scope

This policy applies to all children and it not limited to children under the care of AWP ; children of adult services users. This policy requires staff to think about children beyond their direct care relationship.

This policy applies to all staff (including bank and agency staff) and volunteers working with children, families with children, and carers of children (including grandparents), and therefore applies to all services.

4. Definitions

The definition of a child ([Children Act 1989](#)) is a child or young person, aged less than 18 years of age.

This also includes unborn children, therefore any reference to a child in this policy will cover all unborn children and born children and young people aged less than 18.

Categories of physical, emotional and sexual abuse and neglect are defined in [Working Together to Safeguard Children – HM Govt 2018](#)

5. Policy description

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The policy sets out internal and multiagency arrangements to safeguard children, sets out general principles and processes to safeguard children, reporting and performance arrangements, defines the training requirements to safeguard children, and signposts into the Trust and multi-agency procedures to safeguard children.

The Trust is committed to ensuring that all staff (and volunteers) meet their duties of care in relation to safeguarding children. These duties are clearly set out in Working Together to Safeguard Children (2018).

5.1 General principles that underpin working to safeguarding children

All staff and volunteers must be aware that the right of a child to be protected from abuse or neglect will always override the needs or wishes of any adult (the Paramountcy Principle of the child – Children Act 1989).

When working with any adult service user, you must check if they have children, have caring or parental responsibility for a child, or significant contact with a child.

All services will be provided in a way that ensures the safety of children and respects the individuality of each child, ensuring there is no discrimination in respect of age, gender, culture, religion, language, disability or sexual orientation. However respect for difference should not be confused with acceptance of any form of abuse or neglect.

Services to children and families must be child-centred and based on a clear understanding of the needs and views of children

Children and young people have a right to be involved in decisions about their own care and welfare as appropriate to their developmental age and capacity.

All staff are individually responsible for making a child protection or safeguarding children referral and must not delegate this, or assume someone else has acted.

Staff should ensure that they consider the day to day lived experience of children who are service-users or in the family of all adult service users, and that they listen to and, where appropriate, provide age appropriate information to children to help them understand the situation they find themselves in, and how they can keep safe and access support. All contacts with children should be fully recorded, including what they say.

If a safeguarding concern is identified for a child in a family, the potential risks to other children or vulnerable adults in the family or community must also be considered, and recorded in the relevant fields in the electronic records.

Consent is required from parents to share information with other agencies about them and their children, unless the child is in need of protection from significant harm when it can be shared without consent if consent is not given or possible.

Effective information sharing is however at the heart of good multi agency working to safeguard and protect children. Staff must ensure they are of local arrangements to share information, including through Multi Agency Safeguarding Hubs (MASH's).

All staff must be aware of the duty to manage the specific risks and issues that mental health problems may present in working with parents with mental health problems and safeguarding the welfare and development of children.

Particular priority must be given to managing high-level risks where an adult has either incorporated a child into their delusional system or into a suicide plan, or in all cases or Post Partum Psychosis.

Mental health practitioners should refer to national policy documents, *including [NICE guidance on Antenatal and postnatal mental health](#), [Patients as Parents](#) and [Child Abuse and Neglect: the Role of Mental Health Services and SCIE Guide 3047](#).*

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All children of service users should be assessed to identify if they have any role as a carer for an adult in the family, and a carers assessment offered, and a referral considered to Children's Services as a child in need.

AWP safeguarding policies and procedures must be followed when a safeguarding children concern is identified.

5.2 Supporting practice to safeguard children

The Trust has a Safeguarding Team for providing support and advice to staff and volunteers on safeguarding children concerns (including advice on specific cases). The team also has a role in reviewing child protection referrals and scrutinising child protection reports (to conferences and reviews) to assist practitioners in meeting the relevant practice and quality standards in this key area of inter-agency working.

The Trust has a Head of Safeguarding, Named Professionals and a Named Doctor for Child Protection who have specific Trust responsibilities for child protection issues. They also provide advice to staff, and are contacted through the Safeguarding Team.

The details on how to contact the Safeguarding Team are available on [Ourspace](#)

Safeguarding children issues should be routinely discussed as part of the supervision arrangements for all practitioners as set out in the Trust [Staff Supervision Policy](#), and the practice outcomes from supervision in individual cases recorded in the relevant service user health and social care record.

All safeguarding concerns must be recorded. Full information on recording and storing documents is set out in "recording safeguarding information" pages which are linked to all local safeguarding children pages in OurSpace and for community CAMHS staff in the Bristol and South Gloucestershire IAPTUS User Guide (Practitioner).

The Trust provides a range of guidance and tools to support staff in their roles, whether as an alerter, investigator or manager of a referral.

Full information and guidance, including on information sharing and consent issues, local contacts, flow charts, and document templates is available on the relevant local safeguarding children pages in OurSpace.

The Trust provides a range of procedures and guidelines on specific areas of practice to safeguard and promote the welfare of children. These are set out in Section 10 Appendix A: Associated and Related Procedural Documents of this policy.

5.3 Safeguarding children responsibilities

The Trust has the following responsibilities in relation to safeguarding children:

- Preventing harm to children
- Identifying concerns of possible abuse or neglect
- Supporting relevant, appropriate and proportionate information sharing
- Promoting Early help pathways.
- Making referrals for child protection (S47)
- Making referral for children in need (S17)
- Seeking support for parenting or for the child (including through Early Help, Common or Single Assessment Frameworks and thresholds to accessing support and intervention from children social care.
- Participating in Safeguarding planning and meetings

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- Escalating all unresolved safeguarding concerns until resolved following the local professional disagreement or escalation procedures
- Working in partnership with the local safeguarding children board (LSCB) or equivalent multi-agency partnership arrangements.
- Ensuring safe recruitment processes according to NHS Employment Check Standards
- Informing the appropriate Local Authority of children accommodated or expected to be accommodated as in-patients for consecutive period of 3 months according to S85 of the Children Act 1989.
- Ensuring appropriate training, supervision and support for staff

5.4 Adverse incident reporting of a child protection concern

Wherever abuse and or potential risk of harm to a child or **unborn**, is identified or suspected, a referral to children's social care must be made. All child protection concerns requiring a referral to social care must be reported as an adverse incident using the Trust's electronic adverse incident reporting form. Selecting 'Safeguarding' as the 'cause group' on the electronic form enables staff to view the types of incident in a drop down list.

If there is an allegation that a member of staff, volunteer or a service user working in a regulated activity is identified as having caused harm to a child or young person or behaved in an inappropriate way towards a child which may indicate that he or she is unsuitable to work with children, this must be reported immediately to the Head of Safeguarding who will liaise as the trust Allegations Officer and will notify the Local Authority Designated Officer (LADO) or Designated Officer for Allegations (DOFA)

Appendix B8 of the [Incident Policy](#) (the Classification of Serious Incidents) identifies which incidents should be considered serious and graded as 'red'. The final grading of any of the following incident types will be determined in discussion with the Named Professionals and the Patient Safety Systems Team, but the incident should initially be graded as red and reported within 24 hours:

- Any allegation of abuse of a child by a member of AWP staff
- Any admission of an under 18 year old to an adult inpatient facility. (The Trust position is there are no underage admissions planned or emergency under any circumstances)
- Any failure by AWP staff to follow procedure or acceptable practice which may have resulted in significant harm to or the death of a child

Further detail on adverse incident reporting is available in the Trust [Incident Management Policy](#)

You should also note that in an emergency where a child is at immediate risk of harm, you should report it to the Police (by ringing 999) and/or local Children's Services immediately.

5.5 Working with multi agency partnerships

The Trust is a member of local multi agency Local Safeguarding Children Boards in:

- North Somerset
- Bristol
- South Gloucestershire
- Bath & North East Somerset
- Swindon
- Wiltshire

The [South West Child Protection Procedures](#) (where relevant) and local LSCB policies and procedures must be followed in the event that a child protection concern is identified.

There are a range of local joint working arrangements (Multi-Agency Safeguarding Hubs, Single points of Contact, Think Family, Complex Trio, See the Adult, See the Child etc.) and protocols between mental health services, drug and alcohol services and children's service that are accessible on the relevant Ourspace safeguarding children pages for each of the local area.

Information sharing must be carried out according to Information sharing: [Advice for practitioners providing safeguarding services to children, young people, parents and carers \(HM Government March 2015\)](#).

6. Roles and responsibilities

Assurance to the Board is provided via the Safeguarding Management Group; Quality Safety Risk Assurance Group and Quality & Standards Committee.

6.1 Director of Nursing and Quality

The Director of Nursing and Quality is the responsible Executive Director for safeguarding children and reports to the Trust Board in this area of responsibility.

6.2 Associate Director of Nursing

The Associate Director of Nursing Trust wide strategic leadership to ensure the Trust meets its obligations to safeguard children.

6.3 Head of Safeguarding / Named Nurse for Child Protection

To Act as the Trust Named Nurse for Child Protection

The Trust Head of Safeguarding has responsibility for:

- ensuring the needs of children and adults at risk are effectively safeguarded, working in collaboration with a variety of professionals and other agencies to develop systems and frameworks to improve services for patients and service users
- providing the Trust leadership, support and expert advice on safeguarding children with regard to the Children's Act
- Maintaining a Trust wide dataset which enables a unified system of recording and reporting
- Provide standardised assurance reports to the Board, regulators, commissioners and Safeguarding Boards
- provide expert advice to practitioners and across the organisation including executive directors on safeguarding children.

6.4 Named Doctor and Named Professionals for Child Protection

The Named Doctor and Named Professionals/Nurses are responsible for:

the professional leadership and overview of child protection in the Trust with a particular emphasis on the training and practice of staff across the Trust in protecting children, as set out in the Safeguarding Children and Young people: Roles and Competences for Healthcare Staff intercollegiate document (2018).

The Trust Named Professionals for Safeguarding Children will support the Head of Safeguarding in supporting practice that ensures safe effective and well led services that safeguard the children and those at risk of domestic abuse, within local partnerships across the Trust area.

6.5 Locality Clinical Leads and Divisional Clinical Directors

Locality Clinical Leads and Divisional Clinical Directors are responsible for:

- Safeguarding practice in their geographical area
- Supporting representation of the Trust on local Safeguarding Children Boards
- Ensuring compliance with relevant standards to support reporting to the Trust, Commissioners and the LSCB on safeguarding performance.

6.6 Team Managers (Safeguarding Champions) and Volunteer Co-ordinators

The Team Manager (or their delegated safeguarding champion) are responsible for ensuring all referrals have been reported on the incident reporting system, acting as a team reference resource on safeguarding issues, provision of required data, implementation of audits and relevant training planning, cascade of information, safe recruitment and workforce issues, and support and supervision to their team on safeguarding issues.

6.7 All staff working with children and families

All staff working with children and families are responsible for ensuring that their practice is compliant with the Trust policy to safeguard adults and safeguard children, using the Think Family principles, the relevant risk assessment and management elements of the Trust Care Programme Approach and Risk Policy including the duty to report and escalate concerns.

6.8 All staff and volunteers

All staff and volunteers are responsible for ensuring that they understand and comply with Trust and local policy and procedures to safeguard children.

AWP will ensure all staff have access to child protection training appropriate to their role as set out in 'Safeguarding Children and young people: roles and competences for health care staff. Intercollegiate document 2014' (Appendix 4 Training Matrix). Staff working directly with children and their families will be prioritised for child protection training at Level 1, Level 2 and Level 3.

The Trust's overarching policy for training is the [Learning and Development Policy](#) and this should be read in conjunction with this policy.

Additionally the Trust's [Training Matrix](#) describes the minimum statutory, mandatory and required training for all staff groups in respect of safeguarding children..

Training standards have been informed by national and statutory requirements, professional standards and national best practice. This also takes into full account the training strategies and standards of the local Safeguarding Children Boards in setting standards for training.

7. Monitoring or audit

Compliance with the policy will be monitored through a variety of different mechanisms, as follows.

An annual assurance report on safeguarding children will be provided which will include an assessment of compliance on the Care Quality Commission's Essential standards of quality and safety including Regulation 13 (Safeguarding) and other relevant statutory standards in relation to safeguarding children.

The Trust's arrangements for safeguarding children will be evaluated annually against various external standards, to include an audit based on section 11 and shared internally and externally.

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Periodically Commissioners, Local Safeguarding Adult's Boards, and Multi agency CQC inspections audit the Trust's arrangements for safeguarding children or safeguarding children serious case reviews.

A safeguarding dashboard will be reported to the contractual review meetings

The Trust's performance in meeting its safeguarding duties and responsibilities is reported annually through the annual report which are shared with safeguarding children boards.

The Learning and Development department will maintain records of safeguarding children training and follow up non-attendees. The Trust undertakes regular audits of its arrangements for safeguarding children. It does this on a case basis jointly with local authority partners and through internal audits and staff surveys.

At practice level, it is recognised that dealing with safeguarding children issues may be emotionally upsetting for staff and volunteers involved. Managers must therefore ensure that when considering safeguarding children issues are a core part of each individual's supervision arrangements, as well as ensuring best practice in safeguarding children in that they ensure support is provided when necessary to the staff or volunteers involved.

Managers should provide debriefing if required after any particular distressing incident, and consider the use of Occupational Health in relation to work related distress caused safeguarding issues and incidents.

8. References

- [Children Act 1989](#)
- Data protection Act 1998, 2018
- [The Protection of Children Act 1999](#)
- [The Children Act 2004](#)
- [Mental Health Act 1983, 2007](#)
- [Mental Health Act Code of Practice](#)
- [Mental Capacity Act Code of Practice](#)
- [Safeguarding Vulnerable Groups Act 2006](#)
- Sexual offences Act 2003
- Serious Crime Act 2015
- [Children and Young Persons Act 2008](#)
- ["What to do if You're Worried a Child is Being Abused" 2015](#)
- [Working together to Safeguard Children Statutory Guidance 2018](#)
- [Munro Report](#)
- [UN Convention on the Rights of the Child](#)
- [Refocusing the Care Programme Approach](#)
- [Care Programme Approach and Risk Policy](#)
- [Criminal Justice and Courts Act 2015](#)
- [Criminal Justice and Courts Act 2015 Statutory Guidance](#) issued under [Criminal Justice and Courts Act 2015](#), Ministry of Justice, 2015
- [Equalities Act 2010](#)
- [Female Genital Mutilation Act 2003](#).

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- [Human Rights Act 1998](#) placed a positive duty on public bodies to act in compliance with the 1950 European Convention on Human Rights
- [HM Government national guidance on FMG](#)
- [HM Government: The Right to Choose: Multi-agency statutory guidance for dealing with forced marriage](#)
- [MCA Code of Practice](#).
- [Modern Day Slavery Act 2015](#)
- [SCIE: Think child, think parent, think family](#)
- [Safeguarding Adults and Domestic Abuse](#)
- Other statutes relating to the this area of work, include the [Domestic Violence, Crime and Victims Act 2004](#), the [Sexual Offences Act 2003](#), the [Disability, Discrimination Act 1998](#) and the [Public Interest Disclosure Act 1998](#).

9. Associated and Related Procedural Documents:

- [Guidelines on working with families to protect children](#) [Key modular guidance]
- Additional Safeguarding Guidance for CAMHS Staff working within AWP - <http://ourspace/DU/CAMHS/Pages/safeguarding.aspx>
- [Prevent and Pursue Procedure](#)
- [Domestic Abuse Procedure](#)
- [Procedure for children visiting adult mental health inpatient facilities](#)
- [Guidelines on \[work\] placements in AWP clinical settings for young people](#)
- [Guidelines on Working to Safeguard Adults](#) [Key modular guidance]

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Version History				
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1.0	26 Nov 2008	Approved by Board	MD	Approved
2.0	01 Mar 2011	Approved by the Quality and Healthcare Governance Committee	MD	Approved
2.1	14 Feb 2013	Admin amendments to reference additional associated and related procedural documents agreed for the Executive Lead	MD	Approved
3.0	13 March 2013	Annual review of policy by Quality and Safety Committee, with additional content on use of escalation, reference to Working Together 2013 and amendments by Committee	MD	Approved
3.1	12 May 2014	Annual review of policy with administrative changes only, approved by Acting Director of Nursing	MD	Approved
4.0	19 August 2014	Approved by Quality and Standards Committee	MD	Approved
5.0	1 September 2015	Approved by Quality and Standards Committee	MD	Approved
6.0	1 October 2015	Updated link to South West multi agency procedures and local LSCB procedures	JP	Approved
7.0	15 December 2016	Annual review of policy with administrative changes only, approved by Director of Nursing and Quality	MD	Approved
8.0	21/11/2017	Approved by Quality and Standards Committee	Head of Safeguarding Children	Approved
8.1	13/11/2018	6 month extension approved by Nursing Director to allow full review of safeguarding processes	AM	Approved
8.2	21/12/2018	Amended to show revision to recording of safeguarding referrals	AM	Approved
8.3	21/06/2019	Administrative updates only	AM	In draft