

# Safeguarding (Child Protection) Wiltshire Homes Policy and Procedures

**June 2025** 

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# **Policy Rationale and Scope**

Legislation and guidance have established a statutory duty on all bodies who work with children to ensure their welfare and safety is at the heart of our work and that participation in inter-agency procedures is essential if the interests of children are to be safeguarded. DfE guidance 'Keeping Children Safe in Education' (2022), makes clear that safeguarding is broader than child protection and covers such issues as a child's health safety and security, promoting positive behaviour, countering bullying and providing medical assistance when required. This policy focuses primarily upon child protection. These other aspects of safeguarding are covered in other policies (see linked policies section at the end of this document).

Arc HD Services Ltd fully recognises its responsibilities for safeguarding and promoting the welfare of children (as outlined in Section 11 Children Act 2004 and in the Protection of Children Standard of the 2015 Children's Homes Regulations).

The 2022 National Safeguarding Practice Review Report into safeguarding children with disabilities and complex needs in residential settings highlighted many cases where opportunities were missed to report poor practice and abuse by some providers and the need for all staff to be clear as to their responsibilities in reporting such concerns.

The aim of the policy is to promote a consistent approach understood and adopted by all staff in the prevention, detection and reporting of abuse with regard children in the Home. The policy applies to all staff working for Arc HD Services. All staff are required to sign to say they have read and understood all aspects of this policy.

This policy is in place for Arc's Brocklands Home.

# **Policy Statement**

All children we work with are effectively protected from abuse. The 1989 Children Act's overriding principle is to promote and safeguard the welfare of children. The commitment of Arc staff is to ensure all children we work with are effectively protected from any form of abuse.

# <u>Part 1 - Introduction to Child Protection Policy – Some Key Principles</u>

This policy has been prepared by Arc HD Services Ltd and follows government recommendations in respect of inter-agency co-operation for the protection of children from abuse. This document must be read in conjunction with Wiltshire Safeguarding Vulnerable People Partnerships child protection procedures which can be found by visiting the following website. This policy reflects these procedures. The web link for this site is:

https://www.wiltshiresvpp.org.uk/p/resource-hub/policies-reports-guidance-and-resources

The guidance in this policy is based on the provisions made in:

- The Children Act 1989 and 2004
- The Children and Social Work Act 2017
- The Education Act 2002
- Safeguarding of Vulnerable Groups Act 2006
- The Protection of Children Standard within the 2015 Children's Homes Regulations
- Wiltshire's Safeguarding Children Partnership's Allegations Against Staff and Volunteers procedure
- 'Working Together to Safeguard Children' a guide to inter-agency working to safeguard and promote the welfare of children 2023
   2023https://assets.publishing.service.gov.uk/media/65803fe31c0c2a000d18cf40/Working\_to gether\_to\_safeguard\_children\_2023\_-statutory guidance.pdf
- The DfE Prevent duty June 2015 making clear the Home's responsibility to protect children from being radicalised, to identify those at risk of radicalisation and report concerns as they arise
- The Home Office 'Criminal Exploitation of children and vulnerable adults: County Lines guidance September 2018 making clear the Home's responsibility to protect children from criminal exploitation, to identify those at risk and report concerns as they arise
- Keeping Children Safe in Education (DFES 2022) issued to support education organisations in meeting their responsibility to safeguard and promote the welfare of children under section 175 of the Education Act 2002.

### **Multi Agency Co-operation**

Child protection procedures are only effective when staff in the Home understand the concept of multi-agency and multi-professional working. Good communication and co-operation between all involved agencies are essential and their individual operational goals must be set aside to meet the priority of protecting children.

### **Anti Discriminatory Practice**

Children have a right to be cared for and protected in a way which recognises and values their uniqueness. Staff in the Home recognise this and ensure that societal inequalities based on class, race, gender, sexual orientation or disability do not impact on children in the Home.

### Confidentiality

There are strict rules of confidentiality for all agencies involved with safeguarding children when dealing with child protection issues. The safety of the child depends on how effectively and appropriately agencies share and exchange information when there is a concern. Meetings take place in which confidential issues are discussed. Information shared at such meetings should remain

confidential and no member of staff attending from the Home should share this outside of this meeting without first consulting one of the Designated Safeguarding Officers for the Home.

Children's wish, need and right to speak in confidence to staff about issues that concern them is to be respected. Children are informed however that information may not be able to remain confidential if to keep it so were to place others or the child at risk of significant harm.

### Children's Rights

It is the local authority's responsibility in law to 'safeguard and promote the welfare of the child'. The key child protection principle is that the child's safety and welfare is the paramount consideration. The Home embraces this principle and ensures that staffing levels in the Home allow this to be always reflected in practice.

### **Believing Children**

Staff are expected to listen to and believe what children say. Staff are provided with guidance through child protection training to help them sensitively and professionally support children who disclose abuse.

### **Educating Children to Stay Safe**

It is important to make children aware of behaviour towards them that it is not acceptable and how they can help keep themselves safe. Where appropriate children in the Home will be taught:

- To recognise and manage risks in different situations (including social media websites)
- To judge what kind of physical contact is acceptable and unacceptable
- To recognise when pressure from others (including people they know) threatens their personal safety and develop strategies for resisting such pressure; including when and where to get help

### Parents' Right to Information

Parents need to know the reason for any professional concerns that may arise in relation to their child and it is important that they are kept informed where appropriate. Openness and honesty and the ability of staff to use appropriately the authority vested in them, form the basis on which a foundation of understanding between parents and staff in the Home is established.

When there are concerns about the wellbeing of a child in the Home as a result of either:

- alleged abuse by staff or other residents
- a safeguarding concern no matter how small and not necessarily linked to abuse

Parents are informed in conjunction with the local authority by the Home's Designated Safeguarding Officer who ensures they are regularly updated at every stage of any investigation and subsequent

action taken. Detailed records are maintained by staff in the Home which detail when parents are informed throughout the process.

In situations where there are concerns as to the wellbeing of a child which arise while the child is outside of the supervision and care of staff in the Home, the placing authority is informed and decides the manner in which parents / carers are informed and when. Examples of this may be:

- A child disclosing abuse or neglect which occurred while with family members at home
- A child returning to staff at the Home with unexplained bruising / injuries

The placing authority is responsible for ensuring parents / carers are informed as soon as possible and when this is not deemed to put the child at risk.

### Making Reporting Procedures Quick and Easy to Follow

The prompt and correct reporting of child protection concerns is essential in ensuring children are kept safe. This policy identifies the clear recording and reporting process which staff must follow if they suspect that a child in the Home has been abused or is at risk of harm. This ensures staff act confidently and without hesitation in response to concerns raised. The procedure is outlined in Section 5 and a detailed flow chart and a reporting and recording checklist is kept in the Home's Safeguarding File for staff reference.

# Part 2 – Definitions and Recognition of Child Abuse

At Arc, we recognize that children may be vulnerable to neglect and abuse or exploitation from within their family and from individuals they come across in their day-to-day lives. These threats can take a variety of different forms, including: sexual, physical and emotional abuse; neglect; exploitation by criminal gangs and organised crime groups; trafficking; online abuse; sexual exploitation and the influences of extremism leading to radicalisation.

All staff in the Home are aware of the potential for abuse as outlined above and receive training to help them recognise the signs of abuse and to report any concerns they have swiftly. Definitions of abuse are outlined below.

### **Physical Abuse**

May involve hitting, shaking, throwing, poisoning, burning, scalding, drowning, suffocating, biting, 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.

### **Sexual Abuse**

Involves forcing or enticing a child or child to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women and children also commit acts of sexual abuse.

The emergence of the sexual exploitation of children by individuals and groups within society has raised additional concerns for the safety of children. Sexual exploitation can take many forms from the seemingly 'consensual' relationship where sex is exchanged for attention / affection, accommodation or gifts, to serious organized crime and child trafficking. Exploitation is identified when there is an imbalance of power within the relationship. The perpetrator holds some kind of power over the victim, increasing the dependence of the victim as the exploitative relationship develops. Sexual exploitation of children should not be regarded as criminal behaviour on the part of the child.

### **Emotional Abuse**

Emotional abuse is the persistent emotional maltreatment of a child. It may involve conveying to children that they are worthless or unloved, inadequate or valued only insofar as they meet the needs of another person. It may 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 the child's developmental capacity, as well as over protection 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 (for example, witnessing domestic violence in the family home). 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 child maltreatment.

### **Neglect**

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

**Note:** These definitions come from HM Govt inter-agency guide 'Working Together to Safeguard Children' 2023.

### **Possible Signs of Physical Abuse**

Children injure themselves quite regularly. The difference between 'non-accidental' and 'accidental injuries' is key in determining whether a child may be suffering physical abuse.

### Non-accidental Injuries – Bruises

Bruises are likely to be frequent and patterned e.g. finger and thumb marks. Old and new bruises are likely to be found in the same place (note changing colour denoting different ages). Bruises are likely to be found in unusual places where children don't naturally fall or bruise – for instance, the back of the legs and on the back or front of the body – even on the ears. Bruises which are accidental tend to occur on the bony parts of the body – elbows, shins and knees.

Bruises may be symmetrical on both sides of the body or arms suggesting the child has been aggressively gripped. The child or parent may offer an unconvincing explanation as to how the bruises occurred.

### Non-accidental Injuries – Burns and Scalds

Non-accidental burns and scalds may have a neat or clear outline as if deliberately applied to a specific area (for instance, a neat circular cigarette burn). Burns to both hands may be symmetrical suggesting enforced scalding rather than an accidental spill from a boiling kettle. Significant scalds are a concern as everyone's instant reaction to hot water or steam is to speedily remove oneself from the cause of pain resulting in a minor scald rather than a significant one.

### Non-accidental Injuries – Other

Bites are a concern where the teeth marks reveal an adult bite pattern rather than that of a small child. Finger nail marks and deep scratches or incisions may raise suspicion. Fractures are likely to be numerous and healed at different times. Also may be in unusual areas – ribs, jaw, as opposed to arms or legs.

### **Possible Signs of Sexual Abuse**

### In Children Aged 12 Years or Over

### The child may:

- Be chronically depressed or suicidal.
- Use drink or drugs to excess or run away frequently.
- Self mutilate, show self hatred.

- Become anorexic or bulimic.
- Experience memory loss.
- Have soreness or bleeding in the genital or anal area or in the throat.
- Be fearful of certain relatives or friends / find excuses not to go home or to certain places.
- Have recurring nightmares or be afraid of the dark.
- Be unable to concentrate or be in a 'world of their own'.
- Have chronic ailments such as stomach pains or headaches.
- Sexually abuse another child.
- Have unexplained sums of money.
- Display extremes of sexual behaviour, promiscuity or revulsion of sex.

### Possible Signs of Emotional Abuse and Neglect in School Age Children

Indicators that a child has suffered / is suffering from emotional abuse or neglect can take the form of physical, developmental and behavioural.

<u>Physical</u> indicators may include short stature, poor hygiene, unkempt appearance, repeated infections and infestations.

<u>Developmental</u> indicators may include the presence of learning difficulties, poor coping skills, social and emotional immaturity and low self esteem.

<u>Behavioural</u> indicators may include disordered or few relationships, self injurious behaviour, anxious or ambivalent attachments, indiscriminate affection displayed, aggressive and impulsive behaviour.

### **Bullying**

Although bullying is not defined as a form of abuse in Working Together to Safeguard Children 2018, there is clear evidence that it is abusive and will include one or more of the defined categories of abuse. Bullying can be defined as a persistent and / or deliberately hurtful behaviour toward another person aimed at causing embarrassment, discomfort or distress. It can take many forms, but the three main types are:

- Physical (hitting, spitting, kicking, unwanted physical contact, blocking someone's path, theft)
- Verbal (discriminatory or derogatory remarks, name calling, threats in person or via social media postings)
- Emotional / Indirect (isolating someone from the activities and social acceptance of their peer group)

The impact of bullying on individual children can frequently be underestimated and subtle forms of bullying can be missed. Bullying can cause considerable distress to children affecting their mental and physical health and wellbeing. The Home has in place an anti bullying policy and identified strategies to address bullying issues before they become established.

### **Extremism and Radicalisation**

The risk of extremism and radicalization is now clearly identified by the Government as a safeguarding issue.

People who are vulnerable to becoming involved in terrorism can be any age, from any group, faith, ethnicity or background. Factors which are associated with a person who becomes vulnerable to being drawn into terrorism are:

- Peer Pressure
- Family tensions
- Crime and anti-social behaviour
- Lack of self-esteem and positive identity
- Personal or political grievance
- Mental health issues
- Learning or communication difficulties
- Influence of internet sites
- Isolation and poor support networks

The Counter Terrorism and Security Act 2015 require Children's Homes to take steps to prevent children from being drawn into terrorism through the DfE PREVENT duty (June 2015).

Radicalisation is a gradual process which happens over time. Terrorist organisations target the vulnerable and disaffected members of society via social media and internet sites. Staff in the Home are well informed as to the potential risks and are well placed to observe gradual behavioural changes which may indicate a child is at risk of becoming radicalised and report these concerns appropriately. The Home's E-Safety policy and PREVENT Risk Assessment further identify how children are supported to make use of social media and internet sites safely and how staff will respond if risks emerge for children.

Children in the Home are provided with continual individual support through the waking day and provided with safe places and regular opportunities to discuss controversial issues such as extremist beliefs and ideologies. The Home has a focus on developing personal resilience in children and positive support networks, both of which are essential in reducing the future risk of radicalisation.

### **Criminal Exploitation (County Lines)**

County lines is a major issue involving drugs, violence, gangs, safeguarding, criminal and sexual exploitation, modern slavery, and missing persons. County lines exploitation is widespread, with gangs from big cities including London, Manchester and Liverpool operating throughout England, Wales and Scotland. Gangs are known to target vulnerable children and adults.

County lines is 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 is common in county lines and occurs where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or child under the age of 18. 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 and often starts with being befriended on social media.

Staff in the Home are well informed as to the potential risks and are well placed to observe gradual behavioural changes which may indicate a child is at risk of becoming criminally exploited and report these concerns appropriately. The Home's E-Safety policy identifies how children are supported to make use of social media and internet sites safely and how staff will respond if risks emerge for children.

### **Harmful Sexualised Behaviour**

Harmful sexual behaviour (HSB) is developmentally inappropriate sexual behaviour which is displayed by children and children and which may be harmful or abusive. It may also be referred to as sexually harmful behaviour or sexualised behaviour.

HSB encompasses a range of behaviour, which can be displayed towards younger children, peers, older children or adults. It is harmful to the children who display it, as well as the people it is directed towards.

Children demonstrate a range of sexual behaviours as they grow up, and this is not always harmful.

Sexualised behaviour sits on a continuum with five stages:

- appropriate the type of sexual behaviour that is considered 'appropriate' for a particular child depends on their age and level of development
- **inappropriate** this may be displayed in isolated incidents, but is generally consensual and acceptable within a peer group
- **problematic** this may be socially unexpected, developmentally unusual, and impulsive, but have no element of victimisation
- abusive this often involves manipulation, coercion, or lack of consent
- violent this is very intrusive and may have an element of sadism

A child's behaviour can change depending on the circumstances they are in, and sexual behaviour can move in either direction along the continuum.

Many children who display HSB have experienced abuse or trauma. Children who have been sexually abused may not know that what has happened to them is wrong. This can lead to them displaying harmful sexual behaviours towards others.

### Female Genital Mutilation (FGM)

There are a range of potential indicators that a child may be at risk of FGM. A child at immediate risk of FGM may not know what's going to happen. But she might:

- Talk about being taken 'home' to visit family
- Mention a special occasion to 'become a woman'
- Talk about an older female relative visiting the UK
- Become withdrawn or run away from the Home or school.

While individually these may not signify risk, if there are two or more indicators present, there could be a possible risk to the child.

A child who has been the victim of FGM may display the following behaviour:

- Have difficulty walking, sitting or standing
- Spend longer than usual in the bathroom or toilet
- Display unusual behaviour following an absence from the Home
- Be particularly reluctant to undergo usual routine medical examinations
- Request help from staff, but may not be specific about the problem due to embarrassment or fear

Victims of FGM are likely to come from a community that is known to practice FGM. Professionals should note that girls at risk of FGM may not yet be aware of the practice or that it may be conducted on them, so sensitivity should always be shown when approaching the subject. Where a concern relating to possible FGM is identified, staff should follow established local safeguarding procedures using protocols outlined in the Home.

# Part 3 - Preventing Abuse

Whilst some children are survivors of abuse which occurred prior to admission, there remains the possibility of further abuse during a child's stay in the Home. The perpetrator could be another child in the Home, a staff member, a visitor to the Home, a member of the child's immediate family or anyone the child has befriended from outside of the Home. The child could also be at risk of significantly harming themselves.

### **Preventing Abuse by Adults**

The Home adheres to strict recruitment and selection checks which are outlined in Section 7 of this policy. Potential staff are expected to undertake a visit to the Home following any positive formal interview to meet existing staff team members and children. In this way their suitability can be assessed by the staff team and children, whose comments are recorded on a 'home visit assessment form' before an employment offer is made.

The possibility of abusive practice is openly acknowledged at the Home. Staff are encouraged to analyse their own relationships with children and colleagues. Collusive relationships are challenged as are punitive or authoritarian interactions.

The Home promotes a culture of collegial support and observation to ensure that all staff work in a professional manner which does not leave them vulnerable to allegations of abuse. This approach is promoted through the internal child protection training that staff receive. There is a Whistleblowing Policy which further outlines the responsibility of staff to raise issues both internally and externally of the Home if concerned about the practice or motives of colleagues.

The Disclosure and Barring Service (DBS) maintains the adults' and children's Barred Lists and makes decisions as to whether an individual should be included on one or both of these lists and barred from engaging in regulated activity.

The Home will submit a referral to the DBS if concerns are raised that a staff member has either caused harm or has the potential to cause harm to children or other vulnerable groups. This is submitted online. Details of how to create an online DBS account and how to submit such a referral is found in the link below.

### https://www.gov.uk/government/organisations/disclosure-and-barring-service/about#barring

Arc's Named Senior Officer (NSO) has subscribed to government updates regarding the DBS to ensure any changes to this service are reflected in this policy.

### Preventing Involvement in Child Sexual Exploitation or Abuse from Unknown Adults

High supervision levels in the Home minimise the risk of children becoming involved in sexual exploitation. Children are closely supervised throughout the day and waking night support is in place overnight in addition to a staff member sleeping in to further reduce risks.

Staff are expected to alert the Home's on duty Designated Safeguarding Officer should they witness unauthorised persons attempting to contact children and to contact the Police immediately in situations where an unknown / unauthorised adult is attempting to remove the child from their care.

The on duty Designated Safeguarding Officer will make contact with the Police where evidence exists that suggests a child in the Home is a victim of attempted or actual sexual exploitation or is being / has been inappropriately accessed by an unauthorised person.

### Preventing Significant Self Harm

Children in the Home may be susceptible to periods of high anxiety and emotional instability. It is further recognised that some children may act impulsively, or self-harm as a way of coping with emotional distress. High staffing levels of at least 1:1 staffing through the child's waking hours with waking night support overnight reduce such risks.

### Preventing Abuse from Other Children

High staffing ratios of at least one member of staff for each child in the Home significantly minimises the opportunity for children to experience abuse from others residing there. Each child also has their own living area in addition to their private bedroom further reducing the opportunity for bullying to occur. The Home has an Anti Bullying Policy which details measures taken to prevent emotional harm being experienced by children.

### Speak Out Opportunities for Children

Children have a wide range of opportunities to speak out about concerns and a number of avenues in which they can do so.

Individual staff support is provided to each child throughout their waking day and children have their own living rooms enabling ongoing opportunities to talk to staff about concerns in privacy.

Children are encouraged to share with staff their experiences of being looked after and offer ways in which staff can better support them. This 'receptive to feedback' culture is in line with the Home's ethos of developing therapeutic relationships with children, which in turn reduces children's inhibitions in raising issues or worries.

In addition to the opportunities to speak to staff, all children are made aware of those they can talk freely to from outside of the Home. These include:

- Childline
- Local Social Care Referral and Assessment Teams
- Local Police
- Independent Advocate who visits on a regular basis and can be contacted by phone if required
- The Independent Visitor who conducts monthly monitoring visits on the Home (Regulation 44) and meets with children
- Independent Advocacy Services
- CEOP 'contact button' on Arc website

This information can be found in the child's guide to the Home and is regularly discussed with children.

### **Prevention through Staff Training**

Staff are vigilant to the signs of abuse through the child protection training receive. Staff in the Home are provided with training to enable them to put child protection principles into practice. The training programme includes:

- Categories of Abuse and How they are Defined
- Possible Signs of Physical Abuse
- Possible Signs of Sexual Abuse
- Possible Signs of Emotional Abuse and Neglect in School Age Children
- Possible Signs of a Child Becoming Radicalised
- How Attitudes and Beliefs Influence our Judgement
- The Local Authority Responsibility to Safeguard Children
- Section 47 Enquiries What Happens when Child Protection Concerns are raised with the local authority
- How to Respond to Allegations of Abuse Shared with you by a Child in the Home
- The Importance of Raising Concerns about Colleagues Swiftly Should They Arise

Additional training regarding the risks of child sexual exploitation (CSE), e safety and radicalization are also undertaken by all staff in the Home.

Additional advice is available to staff in the Government document, 'What to do if you are worried a child is being abused'. This is more general advice but the principles remain.

Ref: <a href="https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused">https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused</a>

# <u>Part 4 – Designated Roles and Responsibilities</u>

### Safeguarding Roles and Responsibilities within the Home

### Named Senior Officer (NSO)

The NSO is responsible for ensuring:

- Arc complies with standards identified and agreed by Wiltshire Safeguarding Vulnerable People Partnerships (WSVPP) for managing allegations
- WSVPP procedures for managing allegations are reflected and implemented within Arc
- the workforce is aware of and implements the procedures in relation to all allegations against staff who work with or on behalf of children
- the key roles of Named Senior Officer (NSO) and Senior Manager (SM) are reflected in the safeguarding policy and procedure
- effective reporting and recording arrangements are in place

The Named Senior Officer for Arc is Katie Openshaw.

### **Designated Safeguarding Officers**

There are a number of Designated Safeguarding Officers (DSO) who fulfil this role on a rostered basis throughout the year.

The DSOs are responsible for assessing the information recorded and reported to them by staff team members and if appropriate, ensuring child protection concerns are correctly recorded and promptly reported to the relevant authorities. They are also responsible for ensuring the maintenance of ongoing records of any action required as a result of the concerns being raised. They ensure good communication occurs between involved professionals and for ensuring the staff team are updated throughout any investigation and of actions required as a result of the investigation.

Where there are concerns or an allegation is made against a member of staff the DSO is responsible for:

- providing advice, information and guidance to staff and ensuring appropriate liaison with the local authority Designated Officer for Allegations (known as DOFA) where the criteria for referring is met
- ensuring additional information is gathered which may have a bearing on the allegation
- providing the subject of the allegation with information and advice
- recording all discussions and attending strategy meetings as required
- ensuring risk assessments are undertaken where and when required
- ensuring that effective reporting and recording systems are in place to allow for the tracking of all allegations through to the final outcome
- referring as appropriate to the Disclosure and Barring Service (DBS) or other bodies/professional organisations

All DSOs have completed accredited Designated Safeguarding Officer training to enable them to undertake this role.

DSOs are further assisted in ensuring that concerns raised are correctly recorded and reported in a timely fashion by the reporting and recording checklist (appendix A) and flow chart (appendix B) located in the Safeguarding File.

### **Support Worker**

All support workers have a statutory responsibility to protect the rights of children in our care. In all issues of children's protection, the responsibility of each and every staff member is exclusively towards the child and not the Home setting.

Staff have a duty to record on the Home's 'Child Protection Concern Form' and report to the Home's Designated Safeguarding Officer without delay the following:

- Any safeguarding concern, no matter how small and not necessarily linked to abuse
- Any disclosure of abuse whether on-going or which occurred in the past
- Any observation which suggests abuse has occurred
- Any information about possible abuse

The Home's DSO will assess the information discuss further with the staff member completing the form and decide whether the issue requires formally reporting externally.

All discussions with external agencies must be recorded to include:

- Contact person
- Date
- Time
- Follow up action required and by whom

Similarly it will be the responsibility of the staff member to contact the relevant agencies should a situation occur where both the Home's DS's are the subject of allegations of abuse by children.

### Safeguarding Roles and Responsibilities External to the Home

### Local Authority 'Designated Officer for Allegations' (known as DOFA)

The Designated Officer for Allegations is a named person or persons within the local authority in which the Home is situated who must be informed by the Home's DSO when there is a concern or allegation about a staff member in the Home, other professional or person of trust.

The Designated Officer is forwarded written accounts and will determine what action is required of the Home and any ongoing investigation required. They have responsibility for managing and overseeing individual allegations relating to staff. The Designated Officer should provide advice and guidance to the Home, liaising with the Police and other agencies and monitoring the progress of cases to ensure that they are dealt with as quickly as possible, consistent with a thorough and fair process. They also co-ordinate the collation of reports to provide information to Wiltshire Safeguarding Vulnerable People Partnerships (WSVPP) and Department for Education (DfE) if required.

Any contact with the Designated Officer and subsequent action required by them is recorded in the Home's Child Protection log. The DSO ensures this log has been correctly completed.

The Designated Officer is <u>only</u> contacted with regard allegations or concerns relating to staff or other professionals.

### Multi Agency Safeguarding Hub

The local Multi Agency Safeguarding Hub (MASH) provides triage and multi-agency assessment of safeguarding concerns in respect of vulnerable children and adults. It brings together professionals

from a range of agencies into an integrated multi-agency team. The MASH team makes assessments and decisions in response to child protection concerns.

The local MASH is based in Wiltshire and shares information from every agency to decide the most appropriate intervention in response to child protection concerns raised. Details for the Wiltshire MASH can be found at:

### https://www.wiltshire.gov.uk/article/1436/Child-protection

This information is also retained in the Safeguarding file retained in the Home.

The MASH is responsible for carrying out and co-ordinating any safeguarding investigations regarding issues occurring within the Home. They are responsible for informing the child (s) Social Worker and representative from the child's Placing Authority, who will in turn inform parents / guardians where appropriate and if safe to do so.

Due to the close working relationship that the Home is likely to have with many parents / guardians, social workers and placing authorities, the MASH may in some circumstances give their approval for the Home to inform people directly.

The MASH is informed immediately by the Home's DSO when there is a disclosure by a child or a concern is identified by staff which indicates that the child has been abused by a peer or someone not working at the Home.

### Placing Authority and Social Worker

The placing authority and social worker for children are informed by the Home's DSO when a referral has been made to the Designated Officer regarding an allegation of abuse of a child by a staff member.

The placing authority and social worker are informed by the MASH when a child protection referral has been made by the Home implicating a peer or adult not employed by the Home.

### **Local Authority**

Wiltshire Children's services are pro-active in regards to Safeguarding and Child Protection. They have clear expectations of all Children's Homes within Wiltshire and provide comprehensive guidance. The Registered Manager completes a six-monthly audit of its Safeguarding and Child protection practice which is sent to Wiltshire Children's Services for review.

# Part 5 – Recording and Reporting Procedures

Any person who has a safeguarding concern however small; or who has knowledge or suspicion that a child is being abused, or is at risk of abuse, has a duty to refer their concern to one of the following agencies with statutory duties and powers to investigate and intervene (Social Services, NSPCC and the Police). The usual route for such a referral is through the Home's DSO.

A child safeguarding concern may come to light in several ways:

- A child may make a direct disclosure to a staff member
- A child may make a comment which seems to suggest abuse
- A child may have bruises or marks
- A child's behaviour may suggest the possibility of abuse
- An adult's behaviour may suggest that they are not a suitable person to care for children

The initial concern may come from the child themselves, or another person. It is important to approach any concern with an open mind, to listen and to take the information seriously. There are clear sequential steps to take if staff suspect a safeguarding issue. These are in line with inter-agency procedures.

The Home's overall recording and reporting procedures are split into two categories identified below:

- Allegations or concerns which <u>DO NOT</u> relate to staff members or professionals
- Allegations or concerns which <u>DO</u> relate to staff members or professionals

### Recording and Reporting Safeguarding Concerns which <u>DO NOT</u> Relate to Staff Members or Professionals

### Steps to Take

The Internal Safeguarding Reporting Flow Chart (appendix B) is located in the Home's Safeguarding file and is detailed below:

- On disclosure/observation/information about possible abuse or safeguarding concerns, staff
  must first ensure ensure the child is and remains safe from further harm. This may require
  additional staff to be made available to support the child <u>and in all cases</u> where a staff
  member is the subject of the allegation, the immediate removal of said staff member from the
  child.
- Staff must then <u>without delay</u> report the safeguarding issue to the Home's DSO and complete the Home's 'Safeguarding Concern Form'.
- No attempt by staff is made to further investigate the concern. This responsibility lies with the social care services (MASH) and the Police
- The DSO will then discuss with the staff member the content of their concern and consider whether a formal referral should be made.
- If it is decided that a safeguarding concern exists and staff are not implicated in this, the DSO will ensure a referral is made to the local Multi Agency Safeguarding Hub (MASH) without delay. The placing authority (if different) is also made aware of this referral.
- MASH is also to be informed in the first instance where there are concerns a child is at risk of radicalisation
- In situations where the concern identifies a peer in the Home as being involved, the recording and reporting process identified above is followed for both children.

- The DSO will ensure any immediate action is taken within the Home required or advised by MASH to maintain the safety of the child. The DSO will ensure staff are informed of this action.
- The DSO will ensure a discussion has taken place with MASH around the issue of informing the child's placing authority, social worker and where appropriate parents / guardians and determine who is to complete this task.
- The DSO to make a Regulation 40 notification to OFSTED if applicable and within 24 hours
- The DSO and supporting staff are further aided in ensuring all recording and reporting requirements (to all agencies) are completed within required timeframes by the completion of a Safeguarding Concern Reporting and Recording Checklist which is located in the Home's Safeguarding file (see appendix A).

Recording of information must be detailed, precise and factual to enable it to be used in court if necessary. A detailed record of all allegations of abuse and the action taken in response is stored securely in the Home.

### **Recording and Reporting Safeguarding Concerns which DO Relate to Staff and Professionals**

This procedure applies when it is alleged that a person who works with children under 18 years of age (in either a paid or voluntary capacity) has:

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

If anyone within Arc has a concern about a member of staff, professional or person in a position of trust contact should be made with the local authority Designated Officer for Allegations (DOFA) on **0300 4560108**.

### Steps to Take When Responding to a Concern

- When a concern is first reported, the staff member to whom it is reported to should keep a written record of everything related to the allegations, including dates, times and places. They should report the allegations to the Home's DSO without delay.
- The Home's DSO should then obtain written details about the concern and report the allegation to the local authority Designated Officer for Allegations (DOFA). Contact should be made by phone: **0300 456 0108** and asking for the DOFA. It may be necessary to complete a DOFA referral form and email this to them at this point if directed to do so. Note: If the allegation occurs outside of office hours and needs immediate action, the children's social care emergency out of hours team should be contacted on **08456 070888 or 0300 456 0100** or the police

- If the DSO is not available, the report to the DOFA should <u>not</u> be unnecessarily delayed and should be made by the next most appropriate person. This may be the Registered Manager or the Assistant Manager of the Home or in their absence an Arc Director.
- The DOFA must be informed of referrals within 24 hours and these must not be delayed in order to gather information. Failure to make a referral within 24 hours is a disciplinary matter.
- In situations where the DOFA has been informed of an allegation of abuse, the DSO will ensure the child's placing authority (and the local authority if different) have also been informed that a referral to DOFA has been made and will also establish with them how and by whom parents / guardians are to be informed and what specific information can be shared.
- The DSO will seek advice from the DOFA, the police and children's social care about how much information should be disclosed to the person whom the allegation is about. If the allegation relates to a member of staff and it is agreed that information can be shared which won't impact the investigation, Arc as the employer will inform the accused person about the nature of the allegation as soon as possible, how the enquiry will take place and what action may be taken.
- The DSO will ensure an OfSTED notification is completed and OfSTED should be invited to take part in any subsequent strategy meeting / discussion.
- If the safeguarding involves a Hampshire placement, an email providing details must be sent to: sw.family.placement.team@hants.gov.uk within 24 hours.
- The DSO should ensure the dates and times and names of those contacted and actions agreed are recorded in a detailed chronology.

<u>Note</u>: Where the concern relates to the DSO, staff must not contact this person. Instead they must contact without delay: ARC's Senior Officer (Keith Bidwell), another ARC Director or make the referral to the local authority Designated Officer themselves.

Further details if required can be found in the following link

https://hipsprocedures.org.uk/lkyyst/adults-who-pose-a-risk-of-harm-to-children/allegations-against-staff-or-volunteers

### Appropriately Supervising and Supporting Staff When an Allegation has been Made

The Home has clear procedures for reporting allegations against staff who work with children and children that ensure incidents are appropriately investigated externally from the Home.

The subsequent investigation requires three strands to be processed and considered:

- The inter-departmental and inter-agency child protection investigation. Decisions will be made at a Strategy Meeting with respect to ensuring the continuing safety of the child
- The Police investigation as to whether a crime has been committed by the staff member
- The Home's disciplinary procedure, which should address whether or not misconduct has taken place by the staff member

The aim is to ensure that children are protected from the risk of harm first and foremost, while recognising there is a need to protect staff from potentially false or unfounded accusations.

### **Staff Suspension**

Suspension should not be an automatic response to an allegation and the need to suspend will depend on a number of factors including:

- the nature of the allegation of abuse
- the plausibility of the allegation
- the wishes of the child
- the wishes of the implicated staff member
- witness statements to the incident
- the availability of alternative work which does not bring the staff member into contact with the child
- the risk of evidence being tampered with
- the advice of the local authority Designated Officer and the child's placing authority

Although suspension on full pay is in law a neutral act, it is bound to be distressing for the accused person and disruptive for the children in the Home. Where there are opportunities for the staff member to continue work without coming into direct contact with the child or causing undue anxiety, these options are explored by the Home's DSO with the DOFA and the child's placing authority.

The decision to suspend a member of staff if required is made by the Registered Manager and Responsible Individual of the Home in consultation with the DOFA and the placing authority and social worker of the alleged victim.

In situations where suspension is required, staff will have access to professional support and will be kept regularly informed as to how the investigation is progressing.

# Part 6 – Information Sharing and Whistleblowing

### **Information Sharing**

Information shared between agencies, including the local Children's Services Dept and the Police must be treated with the strictest confidentiality and in line with the DfE 'Information Sharing Advice for Safeguarding Practitioners' (updated 2018). If sexual exploitation is suspected or disclosed, there is guidance in the DfE 'Child Sexual Exploitation: definition and guide for practitioners' (2017) on disrupting perpetrator behaviour, identifying possible criminal offences and evidence gathering, with a view to sharing information as such cases may already be under surveillance or monitoring by Police and criminal justice agencies who lead on this aspect of safeguarding children. Vigilance is particularly important in Children's Homes as these are often targeted by perpetrators.

If staff have a concern about safeguarding they must report this concern as outlined in this policy. Failure to report safeguarding issues is a disciplinary offence.

Taking account of the information sharing guidance, where it is decided that parents / guardians should be informed, this must be managed in a planned way. The views of the child, any allegations which involve a parent or adult in the family, and the statutory responsibility for the child will determine how this is undertaken.

The local authority has a statutory responsibility to make further enquiries if concerns about the wellbeing of any child are expressed to them which meet their threshold for intervention. Staff from the Home should participate in the conference and should provide whatever information is deemed necessary.

Should a situation arise where a staff member disagrees with the decision of the Home's DSO not to formally report an incident externally, they must do so themselves following the procedure outlined in Section 5 of this policy.

If a child is the subject of a Child Protection Plan there will be a 'lead worker' assigned who is the qualified Social Worker. Close co-operation is required between staff in the Home and the Key Worker to ensure that the requirements of the authority are met. Regular Case Conferences will take place and it will be necessary to furnish the Case Conference with a report. In some instance it would be appropriate for the member of staff with the greatest contact with the child to attend the conference.

The local authority in whose area the Home is situated has a statutory responsibility to call a strategy meeting / case conference if concerns about the wellbeing of a child are expressed to them. Staff in the Home are expected to attend and contribute to Child Protection Conferences and Strategy Meetings when invited to do so.

### Whistleblowing

The Home has a comprehensive whistleblowing policy that ensures staff recognise the importance of raising workplace concerns and that they understand how to do so appropriately and with confidence. The policy further identifies how these concerns will be investigated and addressed and sets timeframes for resolving any concerns raised.

The policy aims to ensure a culture of openness is maintained within Arc HD Services Children's Homes in which whistleblowing is valued by all, as a means to maintaining high standards of care and safety to children and staff.

The information given by a whistleblower is handled sensitively and dealt with in accordance with the rest of the safeguarding procedure.

# Part 7 – Safer Recruitment of Staff

The Home aims to offer a caring and protective environment for children. Having confidence that staff employed in the Home will not pose a risk to children is essential.

### **Employment Checks**

To protect children from potentially predatory adults, the Home adheres to strict vetting procedures when recruiting staff. These procedures are in line with the DfE's Keeping Children Safe in Education guidance (2022). Arc ensures that at least one person involved in the recruitment and interviewing of staff holds the NSPCC Safer Recruitment training certificate.

Recruitment and selection processes are stringent and staff are subject to the following checks before taking up appointment:

- Enhanced level DBS (Disclosure and Barring Service) checks are undertaken on all staff prior to
  the commencement of employment in the Home. Additionally, employers are required to
  make referrals to the DBS about individuals they believe pose a risk of harm to vulnerable
  groups and it is an offence not to do so
- Two satisfactory references covering the last five years of employment and additional references taken where appropriate to establish competence in previous childcare work settings
- Identity checks and the right to work in the UK checked
- Photo identification verified and retained on file
- Occupational Health Questionnaires completed and checked
- Any employment gaps are discussed at interview stage
- Evidence of all checks are held in staff personnel files located in the Home

### **Agency Staff**

Agency staff references and recruitment checks (including enhanced level DBS checks) are the responsibility of the agency employing them, but must be confirmed in writing to the Home prior to any shift being worked. Agency staff are not routinely deployed in the Home, but may be sourced to cover periods of unexpected staff absence. The Home selects agency staff members when required which are already known to the children in the Home and who have been assessed as able to work within the Home's therapeutic ethos and who have experience of working with the types of issues and needs that children in the Home present.

Full details of the recruitment process can be found in the Home's Staff Recruitment, Selection and Retention Policy.

# Part 8 - Physical Contact, Personal Care and Restraint

### **Physical Contact**

Appropriate physical contact between staff and children in the Home is encouraged. The Home's Personal and Professional Boundaries policy outlines to staff how to ensure this contact is positively received and not misinterpreted by children. Staff are expected to conduct themselves in accordance with this guidance. This reduces the risk of children and staff members misunderstanding physical contact or the intent behind such contact.

### **Personal Care**

Personal Care can be defined as 'attending to the physical needs of people who are disabled or otherwise unable to care for themselves, including tasks such as bathing, management of bodily function'.

Staff in the Home do not routinely carry out personal care for children as identified above. There may be circumstances in which, as a result of an ongoing or temporary disability preventing a child from bathing or managing their bodily functions unaided, assistance is required from staff. In these circumstances, the child, parents / carers and the local authority are consulted to agree a respectful and safe way for the child to be assisted in completing these tasks. These tasks are only completed by staff when a written care plan or risk management plan is in place identifying the specific nature of the support to be provided and the number of staff required to be in attendance to do so.

### Restraint

On occasion physical intervention may be required to prevent children in crisis from seriously injuring themselves / others or extensively damaging property.

The Home has a behaviour management policy which outlines the circumstances in which physical intervention is to be used. Further guidance is available to staff in 'Guidance on the Use of Restrictive Physical Interventions for Staff Working with Children and Adults who display extreme Behaviour in

Association with Learning Disability and / or Autistic Spectrum Disorders', Guidance on the Use of Restrictive Physical Interventions for Pupils with Severe Behavioural Difficulties'.

When restraint is necessary, a full report of the incident is made. Placing Authorities and parents are informed in line with communication agreements clarified upon the child's admission to the Home and revised as appropriate in regular reviews.

Staff in the Home are trained in the Team Teach approach, which focuses on de-escalation and gradual and graded positive handling techniques. Further information about Team Teach can be gained by visiting their web site <a href="https://www.teamteach.co.uk">www.teamteach.co.uk</a>

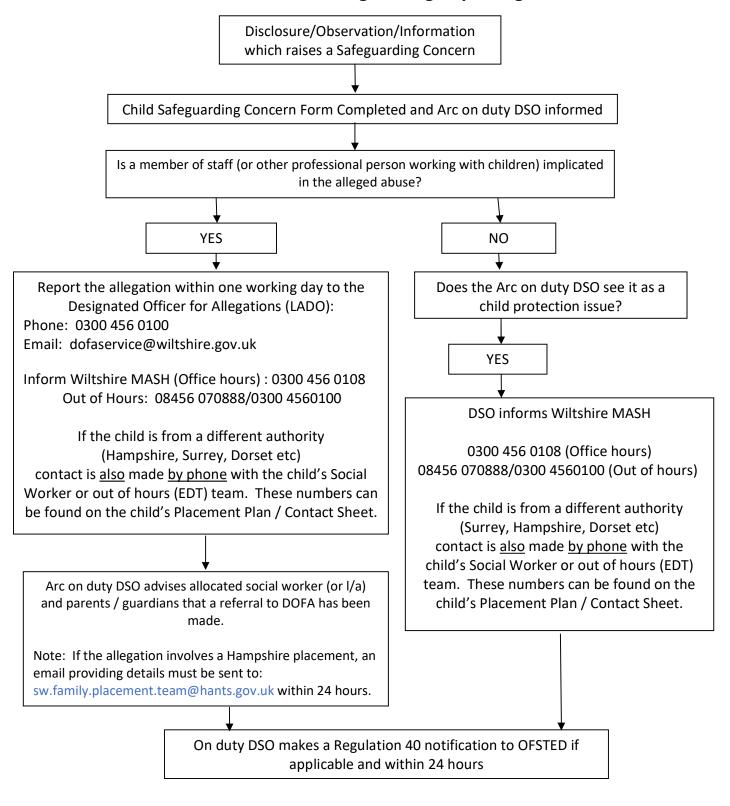
# **Safeguarding Concern Reporting and Recording Checklist**

This sequential checklist has been devised to ensure ALL tasks are completed.

| 1.  | Is the child safe? Ensure to the best of your ability that the child is not at risk of harm while you share the concern [ ]  |
|-----|--|
|     | <u>Note</u> : Senior cover may need to attend the site so you can safely share your concern.   |
| 2.  | Has a 'Safeguarding Concern Form' been completed? [ ]  Note: Completed electronically or be hand-written by the staff member reporting the concern. If the concern implicates a staff member, the Designated Officer Referral form should also be completed.   |
| 3.  | Contact the local authority 'multi - agency safeguarding hub' MASH (and also the Designated Officer for Allegations (DOFA) if staff are implicated in the concern). Advise them of the concern and send through requested paperwork. A DOFA Referral form must be completed if staff implicated [ ] Note: Clarify with MASH (or the DOFA if staff are implicated) whether it is appropriate for the child's parents to be informed and if so, who is to contact them (Social Worker or you!) Ensure you take down the name of the person you speak with. |
| 4.  | Commence a chronology detailing times of events and all phone contacts you have made and with whom and subsequent action taken [ ]  Note: This is important as we require evidence of who we contacted, how quickly we did so and what action was taken to maintain the child's safety.  |
| 5.  | Contact the child's placing authority Social Worker (or the Emergency Duty Team) if the child is placed at the Home by a different authority from that in which the Home is located and inform them of the concern and let them know you have passed this on to the local authority MASH team or DOFA [ ]  |
| 6.  | Contact the child's parents at this stage and inform them of the safeguarding concern (but ONLY if you were instructed to by a named person from MASH or the local authority Designated Officer in No.3 or by the placing authority representative you contacted in No.5) [ ]  |
| 7.  | Contact the Home's senior cover at this point (unless they are already aware) and advise them of the safeguarding concern and action taken [ ]   |
| 8.  | Double check that the chronology you have recorded is up to date [ ]   |
| 9.  | Either place a copy of the safeguarding concern and chronology in a sealed envelope marked 'Private and Confidential' in Registered Manager's tray or email the Registered Manager to alert them that a safeguarding referral has been made [ ]  |
| 10. | Complete the OFSTED notification [ ]   |
| 11. | If the safeguarding concern implicates a member of staff and involves a Hampshire placement, an email providing details must be sent to <a href="mailto:sw.family.placement.team@hants.gov.uk">sw.family.placement.team@hants.gov.uk</a> within 24 hours. Completed [ ] N/A [ ]  |

### Appendix B

# Wiltshire Homes Internal Safeguarding Reporting Flow Chart



### **LINKED POLICIES**

- E-Safety Policy
- Staff Recruitment, Selection and Retention Policy
- Anti-Bullying Policy
- Disciplinary Policy and Procedures
- Grievance Procedure
- Behaviour Management Policy
- Risk Assessment and Management of Children
- Whistleblowing
- Prevent Risk Assessment
- Criminal Exploitation of Children and Vulnerable Adults (County Lines Guidance) September 2018

Policy Review by Date: January 2026