

Safeguarding Children and Young People Policy

Policy implemented: March 2019
Last reviewed: February 2019
Next review due: January 2021

1. Summary

Safeguarding and protecting children effectively is central to Salutem's work. We believe that safeguarding is everyone's responsibility irrespective of the role they undertake or whether their role has direct contact or responsibility for our customers or not.

Salutem takes its safeguarding responsibilities very seriously and has a zero-tolerance approach to abuse. The policy and accompanying procedure and guidance applies to all children and young people regardless of their age, ethnicity, disability, religion or gender.

The purpose of this policy is to provide all staff, volunteers and foster carers with the principles to prevent and minimise the risk of harm to children and young people who use our services. All staff, volunteers and foster carers must follow these principles. The procedure details the steps that individuals are expected to take when presented with concerns of abuse or neglect and the guidance documents contain specialist information related to specific safeguarding areas.

This procedure must not be read in isolation but read alongside the relevant Local Multi-Agency Safeguarding Children Policy and Procedures. It is also advisable to read and have access to Salutem's Safeguarding Adults at Risk Policy and Procedure. As Salutem provides services and support to both children and adults, throughout the course of Salutem's work, a 'think-family' approach should be taken when following this procedure. This means that where there is a concern that an adult is also at risk from abuse and/or neglect Salutem's Safeguarding Adults Procedure should also be followed.

This policy is issued in accordance with the statutory safeguarding responsibilities, set out in the Children Act 1989, Children Act 2004, Children and Social Work 2017, and the associated statutory guidance, Working Together to Safeguarding Children (DfE, 2018).

2. Document Control

Initial purpose and scope of the new policy/procedure agreed by:	Gary Lavelle, Director of Quality and Governance
Technical review carried out:	Michael Albero, Group Head of Regulation and Compliance Natasha Dumonteil-Safeguarding Lead
Final quality check carried out:	Gary Lavelle, Director of Quality and Governance
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Department responsible:	Quality
Job Title of Lead Person:	Michael Albero, Group Head of Regulation and Compliance
Author / Main Contact, including their job title (if different from above):	Melissa Asare, Group Head of Policy and Performance

In addition to this policy, local authorities and other commissioners may have their own policies, procedures and guidance which Services must comply with. These policies should complement this policy.

However, there may be additional requirements put in place by local authorities and other commissioners and these must be adhered to. Changes must not be made to Salutem's policies and procedures without corporate approval but, where needed, local procedures should be developed to accompany these.

EQUALITY AND DIVERSITY STATEMENT

The Salutem Group is committed to the fair treatment of all in line with the Equality Act 2010. An equality impact assessment has been completed on this policy to ensure that it can be implemented consistently regardless of any such factors and all will be treated with dignity and respect.

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This policy must be brought to the attention of all employees.

The controlled version of this policy and its associated documents are available on the eLFY bookshelf.
Printed or downloaded copies are uncontrolled and may not be up to date.

4. Definitions

Child Protection - is one part of safeguarding and promoting welfare. This refers to the activity that is undertaken to protect children specifically suffering, or likely to suffer significant harm.

Children - as in the Children Acts 1989 and 2004, a child is anyone who has not yet reached their 18th birthday. 'Children' therefore means 'children and young people' throughout. The fact that a child has reached 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital, in prison or in a Young Offenders' Institution, does not change his or her status or entitlement to services or protection under the Children Act 1989.

Safeguarding and promoting the welfare of children is defined for the purposes of this guidance 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. (DfE, 2018)

Significant harm - The Children Act 1989 introduced the concept of [Significant Harm](#) as the threshold that justifies compulsory intervention in family life in the best interests of children. There are no absolute criteria when judging what constitutes Significant Harm. Sometimes, a single traumatic event may constitute Significant Harm. In other circumstances Significant Harm is caused by the cumulative effect of significant events, both acute and long-standing, or the damaging impact of neglect which interrupts, and changes or damages the child's physical and psychological development. Where the question of whether harm suffered by a child is significant turns to the child's health and development; his health or development shall be compared with that which could reasonably be expected of a similar child. It is important always to take into account the child's reactions, and his or her perceptions, according to the child's age and understanding.

Harm -The **Children** Act 1989 defines 'harm' as "ill-treatment or the impairment of health or development". Whereby a threshold of significant harm is necessary for statutory intervention, for the purpose of Salutem procedures a threshold of significant harm is not necessary in order for staff and volunteers to act. Where there is a concern that **any level of harm** has occurred or is likely to occur then actions must be taken and/or measures put in place to secure the safety and welfare of the child /children to prevent the risk of further and more significant harm. In this instance, other processes such as risk management or early help assessment maybe more appropriate. (Please refer to guidance on thresholds for intervention)

Categories of Abuse- in accordance with Working Together to Safeguard Children (DfE, 2018) there are four recognised categories of abuse when safeguarding children and young people:

- Physical abuse
- Sexual abuse and exploitation
- Emotional abuse
- Neglect

Abuse can be carried out in different forms, some to be particularly aware of are (this is not an exhaustive list):

- Female Genital Mutilation
- Restraint
- Honour-based violence
- Abuse linked to faith and spiritual belief
- Cyber-bullying

E-Safety

Salutem recognises that advances in technology and the use of mobile phones, the web and social media in everyday life, means a greater risk of abuse and exploitation via this technology and online, unless there are appropriate measures and monitoring in place. Salutem recognises that mobile technology can be used for non-contact sexual abuse including those covered in the Voyeurism Offences Act 2019. (Please see Salutem's position statement and separate guidelines on '[E-Safety](#)')

Child Sexual Exploitation

Salutem recognises the seriousness of sexual exploitation and that it is everybody's business to take steps to safeguard and protect children and young people from this type of abuse. (see Salutem's position statement and separate guidelines on '[Child Sexual Exploitation](#)')

Radicalisation and Extremism

Salutem recognises that the issue of radicalisation is a growing safeguarding concern that can affect children and young people. Please refer to Salutem's position statement and additional guidelines on '[preventing radicalisation and extremism](#)' and your own local authority's policies on this subject. Any concerns that someone you come into contact with through your work is being radicalised this procedure must be followed, and your concern raised with your Designated Safeguarding Lead.

(Please see separate guidance on '[Signs and Indicators of Abuse](#)' and '[Issues that interface with abuse](#)')

5. Principles

When following this procedure and when working within the local multi-agency safeguarding children procedures this should be guided by the following key principles:

- children have a right to be safe and should be protected from all forms of abuse and neglect, **and any level of harm**;
- safeguarding children is everyone's responsibility;
- it is better to help children as early as possible, before issues escalate and become more damaging; and
- children and families are best supported and protected when there is a co-ordinated response from all relevant agencies.

Safeguarding is everyone's responsibility

Everyone who works with children has a responsibility for keeping children safe. No single professional can have a full picture of a child's needs and circumstances and, if children and families are to receive the right help at the right time, everyone who comes into contact with children has a role to play in identifying concerns, sharing information and taking prompt action.

A child-centred approach

A child-centred approach should underpin all safeguarding practice. Failings in safeguarding systems are too often the result of losing sight of the needs and views of the children within them or placing the interests of adults ahead of the needs of children.

Children want to be respected, their views to be heard, to have stable relationships with professionals built on trust and to have consistent support provided for their individual needs. This should guide the behaviour of all staff and volunteers in Salutem. Anyone working with children should see and speak to the child; listen to what they say; take their views seriously; and work with them collaboratively when deciding how to support their needs. Children should be empowered to know how to protect themselves from abuse.

Older Children and Capacity to Make Decisions

Whilst the law states that a child is such until they reach 18 years of age, it is widely recognised that, as a child gets older, they do attain some rights over making decisions. 'Gillick competency' and 'Fraser

guidelines' are used to help assess whether a child has the maturity to make their own decisions and to understand the implications of those decisions. In the high court Mr. Justice Woolf ruled

"...whether or not a child is capable of giving the necessary consent will depend on the child's maturity and understanding and the nature of the consent required. The child must be capable of making a reasonable assessment of the advantages and disadvantages of the treatment proposed, so the consent, if given, can be properly and fairly described as true consent."

Lord Scarman's comments in his judgement of this case in the House of Lords (1985) are often referred to as the test of "Gillick competency":

"...it is not enough that she should understand the nature of the advice which is being given: she must also have a sufficient maturity to understand what is involved."

He also commented more generally on parents' versus children's rights:

"Parental right yields to the child's right to make his own decisions when he reaches a sufficient understanding and intelligence to be capable of making up his own mind on the matter requiring decision."

Service Managers must seek appropriate advice if there is any doubt in these matters.

Preventing abuse

Prevention of abuse is the primary goal. Saludem is committed to ensuring it has systems in place that minimise the risk of abuse. Prevention involves promoting awareness and understanding and supporting children to safeguard themselves from the risk of abuse. It is about having effective systems and procedures in place for the provision of care and support, training and supervision, and open learning cultures. This principle must be applied when following this procedure. (Please refer to separate guidance on '[Prevention in Safeguarding](#)')

Safeguarding Disabled Children

We recognise the increased vulnerability of disabled children. Disabled children are recognised as the most vulnerable group in respect of safeguarding their wellbeing. They may have physical, sensory and learning disabilities and other impairments. Severely disabled children often rely on parents and carers to meet most or all of their needs. They may have limited mobility and may find it hard to make their feelings and wishes known because of communication or language difficulties. If they have been mistreated, they may find it difficult to know how to express their concerns and may not even know that the care they are receiving is not safe or appropriate. Disabled children trust their care-givers and rely on them to be sensitive to their personal care needs, their health, their emotional well-being and their safety. The [Safeguarding Disabled Children Practice Guidance](#) (DSCF 2009) suggests that disabled children may be more vulnerable due to:

- The need for practical assistance in daily living, including intimate care from what may be a number of carers;
- An inability to communicate concerns;
- Carers working with a disabled child in isolation or the child is socially isolated;
- Professionals identifying with parents/carers and losing focus on the impact of familial stresses on the child;

- Bullying and intimidation due to disability;
- Low self-esteem/negative views of themselves;
- Lack of access to “Keep Safe materials”;
- Targeting by some sex offenders in the belief that they are less likely to be detected.

Safeguards for disabled children are essentially the same as for non-disabled children and should include, enabling them to:

- Make their wishes and feelings known;
- Receive appropriate personal, social and health education;
- Raise concerns;
- Have a means of communication and range of adults with whom they can communicate;

All Saludem Services for children must have:

- An understanding that the welfare of a child is paramount.
- An explicit commitment to understand disabled children’s safety and a culture of openness;
- An absolute focus upon the child and the child’s need for protection from harm, whilst being committed to working in partnership with parents/carers;
- Policies, procedures, local protocols and training for staff on good practice in intimate care, working with children of the opposite sex, handling difficult or challenging behaviour, anti-bullying strategies and sexual behaviour among young people, especially those living away from home.

Information sharing

Early sharing of information is key to providing effective support where there are emerging concerns. The safety and welfare is likely to be more important than concerns about sharing information. No-one should assume that someone else will pass on information which they think may be critical to the safety and welfare of a child or young person at risk of abuse or neglect. If anyone has concerns about a child’s welfare and believes they are suffering abuse or neglect, they should immediately share their concerns with their line manager.

If there has been an allegation about one of our staff members or you are concerned that a staff member has acted inappropriately contact your HR Consultant immediately.

Saludem is committed to working with its safeguarding partners, cooperating and sharing information when there are concerns about the safety or welfare of a child and when we know other children and/or adults could also be at risk. All services need to be fully informed and signed up to their local authority sharing information protocols. (See separate guidance on ‘[Information Sharing and Safeguarding Children](#)’)

6. Areas of Governance

The application of this policy and its associated documents is mandatory for all services staff, volunteers, agency staff and all other Saludem representatives. Staff understanding of this policy and associated documents will be assured through training, assessment of competency and supervision.

7. Learning and Development

Salutem is committed to ensuring that all staff are aware of what is expected of them so that everyone is appropriately supported. Staff should speak to their line manager in relation to their learning needs using supervision and the Appraisal and Development Process.

8. Associated Documents

Safeguarding Children at Risk Procedure

- G1. Making Safeguarding Personal
- G2. Physical Restrictive Interventions
- G3. Role and responsibilities of Designated Safeguarding Advisor
- G4. Guidance on the assessment for the need for suspension
- G5. Medication thresholds tool and consideration log
- G6. Record Keeping
- G7. What is information gathering?
- G8. Preserving or Protecting Evidence
- G9. Tackling Extremism and Radicalisation Guidelines

- GC1. Categories of Child Abuse and Signs and Indicators
- GC2. Other Specific Safeguarding Issues that Interface with Child Abuse
- GC3. Responding to a Child or Young Person making a Disclosure
- GC4. Child Sexual Exploitation Guidelines
- GC5. Sharing Information and Safeguarding Children
- GC6. E-Safety Guidelines
- GC8. FGM Guidance
- GC9. Peer on Peer Abuse Guidance

9. Useful Links

- Confidentiality
- Deprivation of Liberty
- Disciplinary
- Suspension
- Recruitment and Selection
- Personalisation and Self-Directed Support

10. References

- Children Act 1989
- Children Act 2004
- Children and Social Work Act 2017
- Working Together to Safeguarding Children 2018

- Keeping Children Safe in Education 2019

In Wales:

- Social Services and Well-being Act 2014
- Keeping Learners Safe 2015

11. Version Control

This is a controlled document. As a controlled document, any printed copies of this document, or saved onto local or network drives should be actively monitored to ensure the latest version is always available.

Version Number	Date	Status	Changes
V1.0	Feb 2019	Final	New policy
V2.0	Aug 2019		Minor changes following introduction of Keeping Children Safe in Education 2019