Safeguarding Children & Young People Level 3 Update

Dr Meena Ashworth Named Doctor
Mary McCaffrey Named Nurse

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Health staff are ideally placed in Safeguarding Children

Safeguarding should be an integral part of any contact or assessment of a child/family.

Take the opportunity to measure weight, height and head circumference of children and plot on correct centiles/red book.

Observe a child's development – is it age appropriate?

Observe child/parental interactions.

Take accurate history from family/child – clarify any points – include mechanism of injury

Consider issues that may impact on parenting capacity– domestic abuse, mental health, learning difficulties, substance abuse.

Communication

- To have adults notice when something is troubling them
- To understand what is happening, to be heard and understood

Working Together to Safeguard Children 2015

Safeguarding Children and young people

- **The Children Act 1989, 2004- Corporate Responsibility**

- **Working Together to Safeguard Children 2015**

- **INTERCOLLEGIATE DOCUMENT 2014**
- Safeguarding Children and Young People: roles and Competencies for Healthcare staff
- **Levels 1-5**

- **Level 3- All clinical Staff who have any contact with children, young people and/or parents/carers and who contribute to assessments.**

- **Includes- Urgent and unscheduled care staff and Paramedics.**
- **Specific competencies for each role are included in The RCPCH Intercollegiate Document 2014.**

Background

- 96,406 Children and Young People 0-18 years seen annually (24,177 through ED in 2016/17)
- 2,146 16-18 year olds admitted to adult areas
- 54 Acute Paediatric Beds
- Level 3 NICU – 37 beds
- 5,366 babies born 2016/17
- 1 in 4 Luton children living in poverty (Luton is joint 47th out of 152 Local Authorities)

Young People in Luton

- **54,700** under 18 years.(**26%** of total population)
- Children & YP in minority ethnic groups make up **61%** of all Luton children (national average is **22%**)
- **120** Languages spoken
- **50%** of Luton schoolchildren do not have English as a first language

Core Competencies

- Knowledge, Skills and Attitudes that relate to level 3 Core Competencies.
- As a minimum , Level 3 staff should receive a refresher equivalent to a minimum of 4-6 hours every 3 years.

Skills and Attitudes

- Communication
- Listening Skills
- Self Awareness

United Nations Convention on the rights of the child 1989

The first legally binding international instrument to incorporate the full range of children's human rights

Article 19

A Child has the right to

“Protection from being hurt

violence, abuse and neglect”

Legal Framework

- Children Act 1989,2004
- Sexual Offences Act 2003
- The Human Rights Act 1998
- LSCB Manual of Procedures
- Trust Policy

https://www.youtube.com/watch?v=fGoWLWS4-kU&spfreload=10

Child Sexual Exploitation - Definition

Child sexual exploitation is a form of child sexual abuse. It occurs when an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity.

a) In exchange for something the victim needs or wants and/or

b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

Dfe 2017

Potential Indicators of CSE

- Acquisition of money, clothes, mobile phones etc. without plausible explanation
- Gang-association and/or isolation from peers/social networks
- Exclusion or unexplained absences from school, college or work
- Leaving home/care without explanation and persistently going missing or returning late
- Excessive receipt of texts/phone calls
- Inappropriate sexualised behaviour for age/sexually transmitted infections

Potential Indicators of CSE

- Evidence of /suspicions of physical or sexual assault
- Relationships with controlling or significantly older individuals or groups
- Multiple callers (unknown adults or peers)
- Frequenting areas known for sex work
- Concerning use of internet or other social media
- Increasing secretiveness around behaviours, and
- Self harm or significant changes in emotional well-being

CSE – How to refer

- ✓ MASH/Hub – Bedford Borough, Central Beds and Luton
- ✓ Pan Beds CSE Identification/Screening Tool
- ✓ Pan Beds CSE Risk Assessment Tool
- ✓ Multi-agency Intelligence Submission Form

  (CSE SPOC in each Local Authority)

All the above are included in Safeguarding section on hospital intranet

A Child's Voice

- "What I want is staff who sit down and talk to you calmly and they don't judge you…you want someone to understand why you did what you did"
  YP cited in Warrington 2013

- "I wanted help but I didn't know who to tell. I wanted someone to notice so I didn't have to say it.." *Luton YP 2017*

- https://www.youtube.com/watch?v=sC4Nn_mYKu0

Modern Slavery (Child Trafficking)

Children are trafficked for -

- Child sexual exploitation
- Benefit fraud
- Forced marriage
- Domestic servitude, such as cleaning, childcare and cooking.
- Forced labour in factories or agriculture
- Criminal activity – pickpocketing, begging, transporting drugs, cannabis farms, bag theft, selling pirate DVD's

Modern Slavery (Child Trafficking)

- Child Trafficking is child abuse
- Children are recruited, moved or transported and then exploited, forced to work or sold
- They are often subject to multiple forms of exploitation
- **Child Trafficking Advice Centre**

  0808 800 5000 or email

  help@nspcc.org.uk

Radicalisation

- Channel is a key part of the governments work against terrorism.
- The Channel Panel is multi-agency and aims to provide a wide range of support and services for those vulnerable to radicalisation.
- For further advice contact The Safeguarding Team or
- The Channel Co-ordinator on 07718 695640

What is PREVENT?

CONTEST is the Government's counter-terrorism strategy and is organised around four key principles.

- **Protect** - to strengthen our protection against a terrorist attack
- **Prepare** - to mitigate the impact of a terrorist attack
- **Pursue** - to disrupt or stop terrorist attacks
- **Prevent - to stop people becoming terrorists or supporting terrorism**

Follow normal **Safeguarding** and **Information Sharing** and **Escalation** Procedures (**Confidentiality**)

NOTICE

- **NOTICE concern**

CHECK

- **CHECK YOUR CONCERN**
- ie. a colleague / line manager
- Safeguarding/ Prevent Lead

SHARE

- Who do you **SHARE** with ?
- ie. Safeguarding Lead/Prevent Lead
- DATIX – Clearly identifying it as a Prevent concern

Urgent concerns – contact the Police

Radicalisation-Potential Indicators

- Use of inappropriate language
- Possession of violent extremist literature
- Behavioural changes
- The expression of extremist views
- Advocating violent actions and means
- Associating with known extremists
- Seeking to recruit others to an extremist ideology.

Forced Marriage

- “is where one or both people do not (or in cases of people with learning disabilities, cannot consent to the marriage and pressure or abuse is used”
- It is recognised as a form of violence against both sexes, as domestic or child abuse, and a serious abuse of human rights.
- It is illegal in Great Britain.

What to do

- If you or someone you know is being forced into marriage either in the UK or abroad, contact the Forced Marriage Unit (FMU) FMU provide support and assistance.
- **Foreign & Commonwealth FMU**

  0207 008 0151 9-5 weekdays

  0207 008 1500 out of hours
- **Luton Forced Marriage and Honour Based Violence Unit** 01582 394356

Forced Marriage – (FMPOs)

- Forced Marriage Unit handled 1220 instances where they gave advice or support related to a possible forced marriage.
- Of the 1220 instances, 80 % were female and 20 % male
- Summer holiday is the peak time – extended holidays
- 877 Forced Marriage Protection Orders granted – 131 in Luton
- Luton was the third-highest in the country behind the High Court in London and Manchester.
- In Luton this means for every 1,610 people an FMPO was given by the court. Luton's population is less than half the size of Manchester. The highest ratio of any specific town or city in England.

Freedom of Information – Ministry of Justice 2016

Female Genital Mutilation (FGM)

Female Genital Mutilation (FGM)
Sometimes referred to as female circumcision.

The World Health Organisation (WHO-2010) has classified FGM as:

'all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organ for non-medical reasons'

Any UK National or resident is protected

- It is an offence if anyone aids, abets, counsels or procures any form of FGM for a girl or a woman for cultural or non-medical grounds;
- This act makes it an offence to take a UK national or resident overseas for the purpose of or to aid and abet, procure or carry out FGM;
- The penalty for FGM is up to 14 years imprisonment

FACTORS THAT MAY INCREASE THE RISK A GIRL OR WOMAN'S RISK OF BEING AFFECTED BY FGM

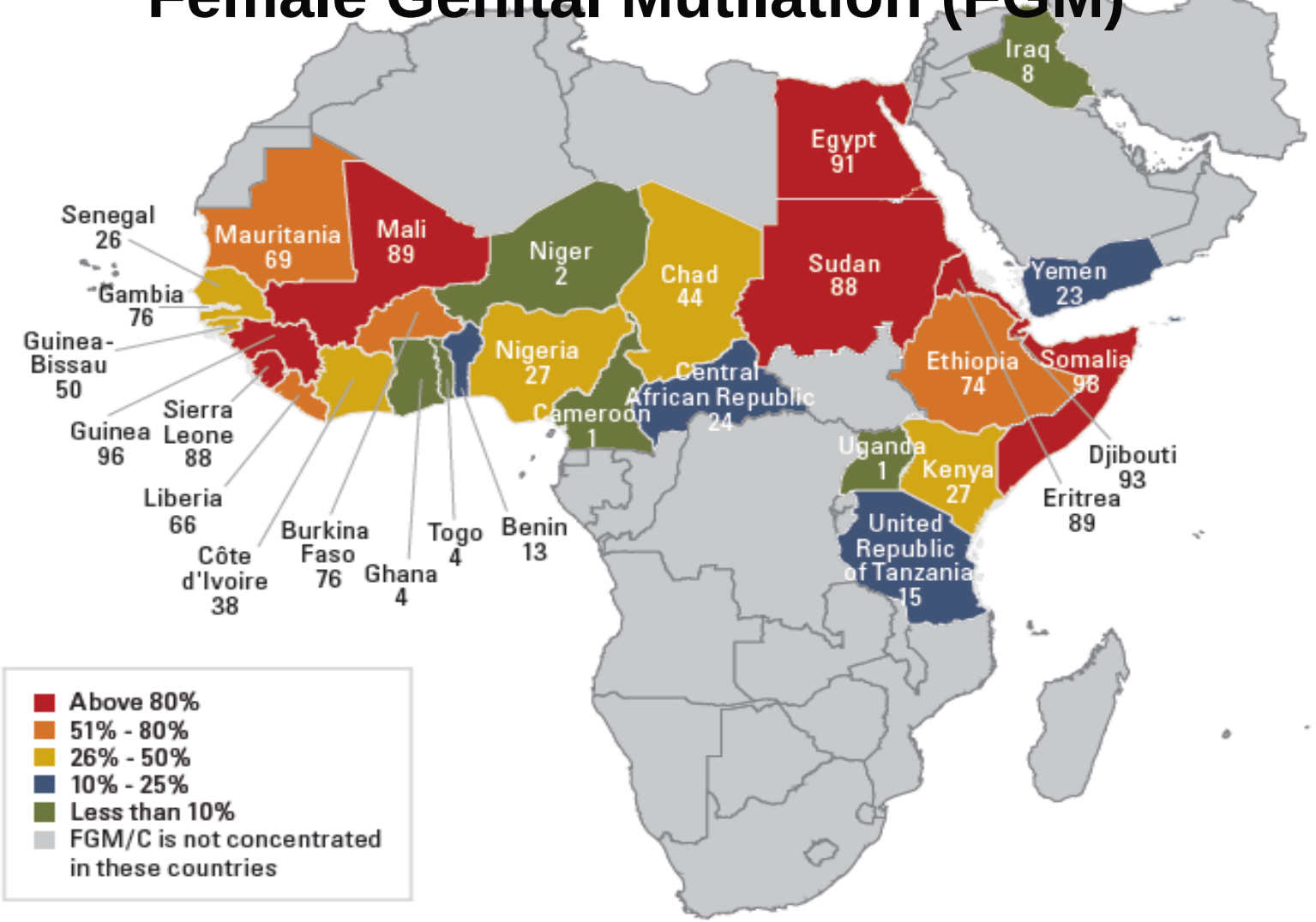
The position of the family and the level of integration within UK society – it is believed that communities less integrated into British society are more likely to carry out FGM.

- **Any girl born to a woman** who has been subjected to FGM must be considered to be at risk of FGM, as must other female children in the extended family.
- **Any girl who has a sister** who has already undergone FGM must be considered to be at risk of FGM, as must other female children in the extended family.
- Any girl withdrawn from Personal, Social and Health Education may be at risk as a result of her parents wishing to keep her uninformed about her body and rights.

Female Genital Mutilation (FGM)

- Statutory reporting since September 2014 – **4,989** new cases nationally 2014/15
- LDUH reported **27** new cases 2014/15
- FGM in all levels of safeguarding training including clear referral pathway
- From October 2015 It is a statutory requirement for qualified health professionals, social workers and teachers to inform the police of any child (under 18) who has had FGM.
- **Bedfordshire Police issued the first ever FGM Protection Order in the UK July 2015 preventing 2 girls being taken out of the country**

Female Genital Mutilation (FGM)



Violent Crime

- Includes - gang involvement with guns and knives.
-
- LDUH sit on multi-agency Tackling Serious Youth Violence Group
- ED shares anonymous data with Community Safety Partnership
- Time and Date of Incident
- Time of arrival to ED
- Specific Location
- Primary means of assault i.e. weapon or body part

Violent Crime

- Immediate Information sharing with police when shooting or serious stabbing/assault occurs.
- Routine check with social care and Youth offending service for all assaults under 18.
- Data is used to inform policing, for example identifying specific “hot spots” of violence and target policing.

LADO (Local Authority Designated Officer)

- LADO Procedures are used in all cases in which it is alleged that an adult who works with children has
- behaved in a way that has harmed, 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 pose a risk to children.

Working Together to Safeguard Children 2015

LADO

- LADO flowchart is included in The Safeguarding Children Policy 2015 and attached to this hand-out.
- HR Deputy Director Jim Machon is the Lead for Allegations against staff working with children for LDUH.
- Further information/contact numbers are available on Luton LSCB website.

Serious Case Review

"is one where abuse or neglect of a child is known or suspected and
- the child has died or
- the child has been seriously harmed and there is concern about how agencies worked together to safeguard the child"

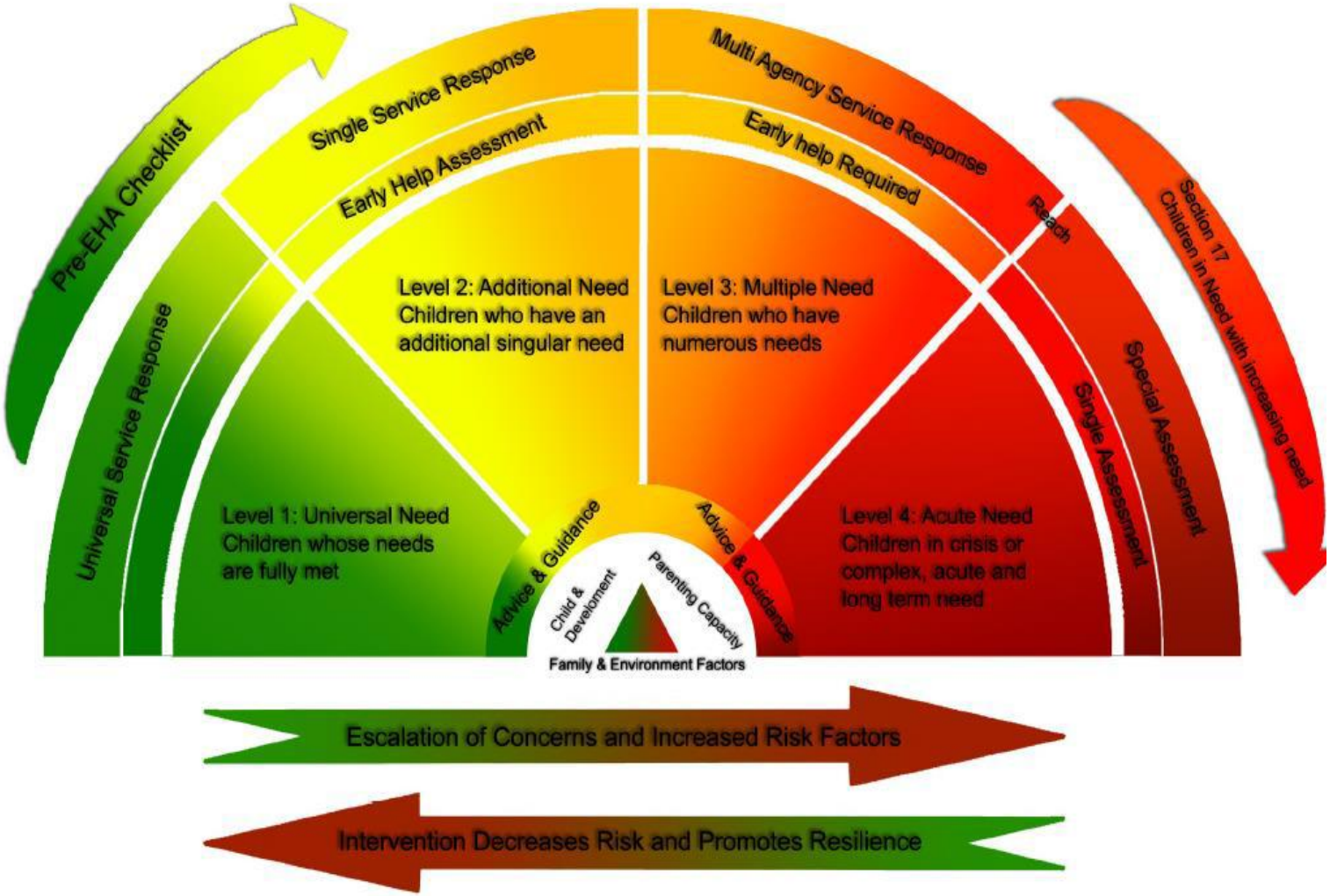
Working Together to Safeguard Children 2015

Documentation

- Accurate, legible documentation is essential, particularly at the first point of contact where there is concern for a child
- It should be factual, not include opinions and be dated and timed, professionals involved should be named

  (to include police I.D.no. contact telephone numbers etc.)
- If a child protection case goes to court, medical records may be accessed and used as evidence. Good documentation is also essential for information sharing.

Levels of Need



Information Sharing

- Remember that the Data Protection Act is not a barrier to sharing information
- Be open and honest
- Seek advice
- Share with consent where appropriate
- Consider safety and wellbeing
- Necessary, proportionate, relevant, accurate, timely and secure
- Keep a record

Taking a history

- Always complete the mandatory fields on symphony -Names of who has PR and who accompanies child.
- Always document a mechanism of injury and describe/draw on body maps.
- Take names and dob of children, and where they are being cared for if a parent is too unwell to go home.

Information Sharing

Paperwork

1. A form used to share information within health, it is not sent to Social Services
2. Information sharing forms are dealt with by direct liaison with school nurse/health visitor/midwife/GP/other
3. The Hospital Safeguarding Team

Information Sharing

MASH Referral

This is a direct referral to Social Care where there are clear or reasonable grounds to suspect child abuse or neglect

Contact Duty Social Worker directly, 24hr numbers available in Safeguarding Children Policy, Intranet and via Switchboard

Follow up phone call with written referral within 24hrs

Any queries with the above please contact the Hospital Trust Safeguarding Office for advice

Support and Supervision

Safeguarding Children Team

Director Of Nursing, Children's Champion	Sheran Oke
Caldicott Guardian, Consultant Obstetrician	Malcolm Griffiths
Named Doctor	Dr Meena Ashworth
Named Nurse for Safeguarding Children	Mary McCaffrey ext.. 7023/Blp 080
Safeguarding Nurses	Louise Billington/Louise McKee ext. 7023 / Blp 153
Named Midwife	Tracey Scivier ext. 8467/ Blp 051
Safeguarding Midwife	Sarah Hall ext. 7023/Blp 387
Safeguarding Midwife	Mel Fulham ext. 7023/Blp 387
Safeguarding Administrators	ext. 8298

Guidance

The Children Act 2004

Working Together to Safeguard Children 2015

A guide to Inter-Agency Working
NSF for Children, Young People & Maternity Services

Standard 5 – Safeguarding and Promoting the Welfare of Children and Young People

NICE Guidance 2009

When to Suspect Child Maltreatment

QUESTIONS?

Stay safe
Enjoy and achieve
Be healthy
Make a positive contribution
Achieve economic well-being