CHILDREN AT RISK PROCEDURE

Introduction and Aim

The Corporate Safeguarding Team has developed an over-arching Safeguarding Policy which sets out the organisation’s commitment and responsibility to safeguarding of both adults and children at risk of harm and victims and domestic abuse.

This procedural document forms part of a suite of safeguarding documents to achieve this aim through advising on the procedural steps which need to be undertaken when a safeguarding incident is suspected or disclosed regarding a child.

It should be followed to ensure the appropriate actions are taken under the legislative framework for safeguarding within Wales for children.

Through the development and implementation of this procedure in conjunction with other safeguarding procedures the Chief Executive and the Board can be assured that the organisation is adhering to the Safeguarding Policy and the organisation’s commitment to safeguarding children.

Supporting Procedures and Written Control Documents

Safeguarding Policy; Adult at Risk procedures, Domestic abuse procedures

Other related documents are:

Safeguarding Training Plan; Safeguarding Supporting Information Document; Procedure for NHS Staff to Raise Concerns; Prevent policy

Scope

This procedural document is applicable to all Public Health Wales staff who come into contact with children either directly or indirectly. In this document ‘staff’ refers to all staff including agency staff, temporary staff, those on honorary contracts and volunteers.

Equality and Health Impact Assessment

Please refer to the completed Please refer to the completed EHIA.
1 Introduction
This document identifies the procedures that staff within Public Health Wales are required to undertake when a safeguarding child concern has been suspected or identified.

Compliance with these procedures will ensure that Public Health Wales provides a consistent and seamless service when dealing with suspected or confirmed concerns. To assist staff with the decision making process of when to share safeguarding information three flowcharts have been developed which offer guidance to staff when faced with these situations. The flowchart ‘When to Share Safeguarding Information (Children)’ is included as an appendix to this document and reflects all legislative requirements within Wales. Further information to assist staff on how to follow the flowchart is found within the Safeguarding Supporting Information Document.

2 Roles and responsibilities

All staff within Public Health Wales have a legal duty to comply with Welsh and UK Government legislation which this procedural document sets out.

3 Procedure/Process/Protocol

When any staff member suspects that abuse or neglect has occurred to a child, they have a duty to report their concerns to the local authority (the relevant Social Services department) and are required to follow the appropriate process/flowchart. The questions embedded within the flowchart specifically lead the member of staff to undertake a holistic assessment of the situation to consider how best to protect the child/young person in question.

Further explanation of the terminology used within the flowchart is found within the Safeguarding Supporting Information Document.

If they have any concerns that a child may be at risk staff should contact the Corporate Safeguarding Team for help and support as well as their line manager. Further advice and support can be obtained from the local Social Services department 24 hours a day.

As far as is possible, and without putting themselves at risk, staff must take any immediate action needed to safeguard the child/young person for whom there is a concern or anyone else who may be at risk.
If the child/young person is in immediate danger, or serious harm has occurred, the police and/or other emergency services should be contacted.

In less urgent circumstances, concerns about children at risk of harm should be shared with Social Services and/or the police in accordance with current Welsh Government guidance. The police should be informed if it is suspected that a serious crime has been committed.

The concern should be shared as soon as possible. However, staff may seek further advice from the Corporate Safeguarding Team and/or line manager if required.

Where there is confidence that it will not place the child at greater risk, the concerns should be discussed with the parent/carer and their consent obtained (if possible) prior to sharing the concerns. If the child/young person has mental capacity and is able to understand their situation, then their consent to sharing concerns should be obtained if possible. If the child is under 16 years old and are considered Gillick/Fraser competent then consider obtaining consent from them.

For clarity, a lack of parental consent should never be an obstacle to taking the necessary steps to protect a child at risk of significant harm; especially if the source of the harm is believed to be from the parents or the family environment. This does not just apply to immediate physical harm, but also to potential emotional harm or sexual abuse.

Staff when faced with a concern about children at risk must be open minded when dealing with these and not take things at face value. Situations and experiences of individuals may not be what is initially presented. Therefore, staff may need to ask some further questions of individuals and those around them to gain a better understanding of the experience of that child/young person. Interviewing a child or young person disclosing abuse requires specialist skills, and should only be undertaken by trained social workers and police officers.

Concerns are initially shared with Social Services and/or the police via telephone. Out of hours’ referrals should be made to the Social Services Emergency Duty Team (EDT) by telephone.

Once information has been shared with the local Social Services department it should be followed up by the completion of the appropriate referral form for that area.
In all cases, staff must also complete a DATIX incident report, record details of the action taken and inform the Corporate Safeguarding Team and Line Manager.

The identity of the staff member sharing concerns may not remain confidential and it is good practice to share these with the child’s parents/carers and child/young person (if appropriate) if it is safe to do so.

If the suspected or known perpetrator is a person employed by or acting on behalf of Public Health Wales, staff must follow the Managing Allegations of Abuse by Staff Procedure.

Staff must not allow themselves to be in a situation where they may be vulnerable to allegations of abuse, such as being alone with a child/young person. However, the safety of staff is important, and in order for staff not to place themselves in a dangerous position, they must risk assess the situation in regard to their own and the child/young person’s safety.

Any discussion about a child/young person’s welfare should be recorded in writing, to include the date, time, name of staff member, their role and contact details. All records should be succinct, legible and clear as to what actions we agreed, and by whom. If the decision is to take no further action, this should be recorded in writing, explaining the reason for the decision. Records should be completed as close to the time of the incident/suspicion as possible to ensure that the information recorded is contemporaneous. DATIX completion should also occur as soon as possible ensuring that person identifiable information is not included in the description of the incident.

Managers are responsible for supporting and guiding staff in the decision making process when child at risk concerns are suspected, through being familiar with the content of this document. They will ensure they have the appropriate level of knowledge and skills to support staff.

They should ensure that staff follow the process and within the timescales. The manager should consult with the Corporate Safeguarding Team or the local Social Services department for advice and support if required.

The Named Lead Safeguarding will have the lead role for the safeguarding of children at risk for Public Health Wales. The Specialist Nurse Safeguarding will support this role and deputise as required. They will provide help, support and guidance to all staff in matters concerning safeguarding children at risk.
The previously discussed information sharing flowchart is included as an appendix to this document.

Advice and guidance to assist staff in the process can be found in the Safeguarding Supporting Information Document.

4 Female Genital Mutilation

If a staff member becomes aware that a child under the age of 18 years has been a victim of Female Genital Mutilation, they have a statutory responsibility to share the information with the police within 28 days and must follow the guidance in the All Wales Clinical Pathway- Female Genital Mutilation (FGM). The Public Health (Wales) Act 2017 prohibits the intimate piercing of a person who is under the age of 18 in Wales.

5 Training requirements

All staff will have their training needs assessed and will undertake appropriate safeguarding training commensurate with their roles and responsibilities.

6 Monitoring compliance

Monitoring of compliance with this document is through evaluation of child at risk concerns DATIX entries.
7 Appendices

When to Share Safeguarding Information (Children)

Is the person under 18 years of age?  
No  Refer to Adult’s Flowchart
Yes  
Is there an Adult at risk in the household?  
Yes  
Is this child experiencing or at risk of abuse, neglect or other kinds of harm, And Do they have need for care and support (whether or not the authority is meeting any of those needs)?  
No  This person is not a Child at Risk  
Ensure safety & consider health care needs!
Yes  Call the Police on 999

Is the child in immediate danger?
Yes  
Obtain Consent to share information from parent/carer if they are available and it will not endanger the child or you, (consider consent from a Gillick/Fraser competent child).
No  
Are they under 16 years of age?
Yes  
Has consent been given?
No  
Is the child at risk of significant harm? or is the refusal of consent an act of Neglect?
Yes  Attempt to obtain Consent to share information from young person and try to engage parent/carer.
No  Do not share information

Act in THEIR best interests. Record your actions. Refer to children’s services, complete a Datix and inform the Safeguarding Team

The Corporate Safeguarding team can be contacted for help and support during office hours:  
Named Lead Safeguarding: 029 20104314 07814166110  
Specialist Nurse Safeguarding: 01792 940936 07970 359004