

Welcome to the RBCH eLearning module

Safeguarding Children Level 1

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Every Child Matters

Department of Health, HM Government
National Society for the Prevention of Cruelty to Children (NSPCC)
National Institute for Health and Clinical Excellence (NICE)

What is Safeguarding Children?

Safeguarding children is the action we take to promote the welfare of children and protect them from harm - it is **everyone's responsibility**. Everyone who comes into contact with children and families has a role to play.

Safeguarding and promoting the welfare of children is defined 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**
- taking action to enable all children to have the best outcomes.

Helping children is a human process.

What is Safeguarding Children?

Effective safeguarding of children can only be achieved by putting children at the centre of the system, and by every individual and agency playing their full part, working together to meet the needs of our most vulnerable children.

The actions taken by professionals to meet the needs of vulnerable children as early as possible can be **critical** to their future.

Children are best protected when professionals are clear about what is required of them individually, and how they need to **work together**.

All children, be they a baby, infant or an older child app, are potentially vulnerable. Their individual needs **must** be identified accurately so that every child receives the support they need before a problem escalates.

All healthcare professionals who come into contact with children and families **must** be alert to any risks of harm that individual abusers, or potential abusers, may pose to children.

All healthcare professionals **must** share appropriate information in a timely way to discuss any concerns about an individual child with colleagues and local authority children's social care.

What is Safeguarding Children?

'In the UK, an estimated 3 children per week die as a result of child abuse and neglect.'

(Ofsted, 2009)

'Infants under one and teenagers aged 16 and 17 are the most vulnerable. Infants are most likely to die as a result of parental abuse, teenagers are most likely to die at the hands of their peers. In 95% of cases, **children know their abusers**. Abuse by strangers constitutes only 5% of all abuse cases in the UK. Evidence suggests that the parental abuse of children can be prevented through interventions targeted at parents and the community **but it has to be spotted.**'

(NSPCC, 2010) What is Child Maltreatment?

Child maltreatment or abuse is any action by another person - adult or child - that causes significant harm to a child. It can be physical, sexual or emotional, but can just as often be about a lack of love, care and attention. Neglect, whatever form it takes, can be just as damaging to a child as physical abuse.

An abused child will often experience more than one type of abuse, as well as other difficulties in their lives. It often happens over a period of time, rather than being a one-off event. Today child abuse can often happen online, hidden from plain sight.

The **NSPCC (2013)** estimate that over **half a million children are abused in the UK each year.**

How does Child Maltreatment occur?

Abuse and neglect can happen to **any child**, in any family, in any home. It often happens over a period of time, rather than as a one-off event.

It occurs most often in families who are under pressure or lack social support, and consequently struggle to raise their children. Severe and often long-term problems, such as poor housing or poverty, can make it hard for people to cope with the challenges that life throws at them. Sometimes children themselves struggle to treat other children as they should.

Sometimes the behaviour of abusers is shaped by circumstances in which they live and by what they have experienced. That's not to say difficult circumstances will inevitably lead to abuse. People's lives can take a different turn at any point. However negative circumstances increase the likelihood of maltreatment occurring.

In Practice

Is the child:

- missing from home or care?
- suffering physical injuries?
- engaging in offending?
- misusing or exposed to drugs or alcohol?
- in receipt of gifts from unknown sources?
- having thoughts of suicide?

Immediately seek to determine the risk, then take preventative and protective action as required.

Looked After Children

Children in care or **looked after** children are children who have become the responsibility of the local authority.

This can happen voluntarily by parents struggling to cope or through an intervention by children's services because a child is at risk of significant harm.

Most children who are in care live safely but a small number do experience harm. There are a number of risk factors related to being in care, which can make children more at risk of abuse and neglect.

Looked after children may require: **more emotional support, more protection** and are likely to have a greater need to **be listened to** by supporting services in regards to change in lifestyle and home status.

Types of Abuse

Child maltreatment constitutes five main categories of abuse:

- **physical abuse**
- **emotional abuse**
- **sexual abuse**
- **domestic abuse**
- **neglect**

Each category is covered in greater detail within this eLearning module.

Suspected Abuse - Appropriate Action

If you suspect that a child may be suffering abuse or harm you must take appropriate action **immediately**. In order to make an informed decision around suspected abuse you can study the sections in this eLearning module or recall previously undertaken Safeguarding Children training.

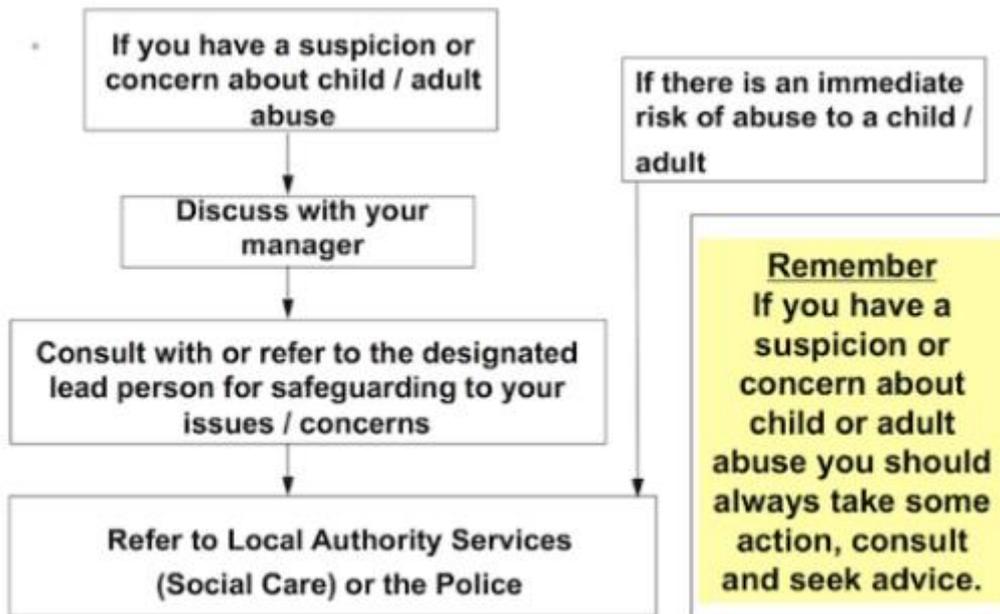
If you are unsure on correct procedure always remember: **a child rarely dies because of sharing information but many have died because people haven't shared information.**

Suspected Abuse - Appropriate Action

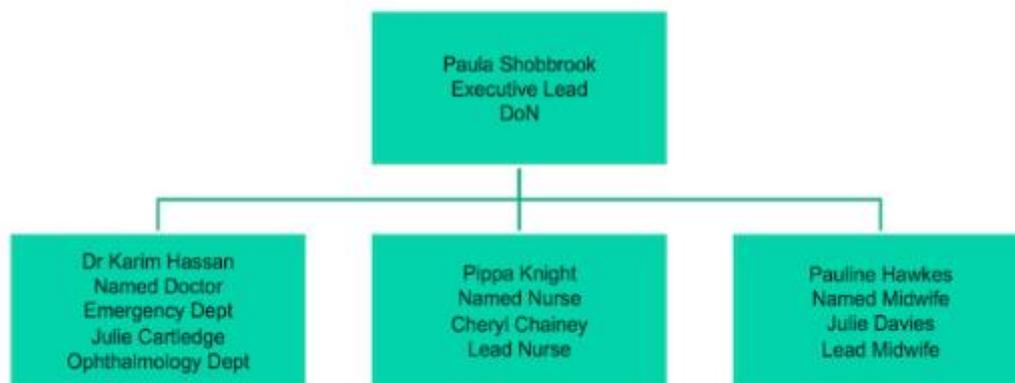
All policies and procedures around making a Safeguarding Children referral at RBCH can be found on the front page of the **Trust Intranet**.

If unsure contact: RBCH Named Nurse Pippa Knight - Ext. **4235**

You can see more information here on what to do if you have a suspicion or concern.



Trust Organisational Chart for Safeguarding Children



Physical Abuse

Physical abuse is deliberately hurting a child, causing injuries such as bruises, broken bones, burns or cuts.

It isn't accidental - children who are physically abused suffer violence such as being hit, kicked, poisoned, burned, slapped or having objects thrown at them. Shaking or hitting babies can cause Non-Accidental Head Injuries (NAHI). Sometimes parents or carers fabricate the symptoms of child illness, perhaps giving them medicine they don't need and making the child unwell - this is known as fabricated or induced illness (FII).

Bruises are the most common presentation of physical child abuse.

Remember to always:

- follow Bruising, Bleeding, Fractures and Possible Injuries in Children who are not Independently Mobile policy
- retain Professional Curiosity regardless of your role (consider and suspect).

Emotional Abuse

Emotional maltreatment of a child may severely impair psychological development and is the second most common reason for children needing protection from abuse. Some examples are:

- devaluing the child - them feeling worthless, unwanted or unloved
- valuing the child only because they fulfil the needs of others
- placing unrealistic or age-inappropriate expectations upon the child
- overprotecting and/or isolating the child from others
- allowing the child to see or hear the maltreatment of others, including domestic violence between parents
- seriously intimidating or bullying the child, causing him/her to feel frightened or endangered.

Retain Professional Curiosity regardless of your role (consider and suspect).

Sexual Abuse

A child is sexually abused when they are forced or persuaded to take part in sexual activities. This doesn't have to be physical contact, and it can happen online (on the internet).

Sometimes the child won't understand that what's happening to them is abuse. They may not even understand that it's wrong.

Sexual abuse is not solely perpetrated by adult males, women can also commit acts of sexual abuse as can other children.

Sexual Abuse

There are two different types of child sexual abuse.

These are called contact abuse and non-contact abuse.

Contact abuse is where an abuser makes physical contact with a child, including penetration.

Non-contact abuse covers other acts where the abuser doesn't touch the child, such as grooming, exploitation, persuading children to perform sexual acts over the internet and flashing

Child Sexual Exploitation (CSE)

Child Sexual Exploitation (CSE) is a type of sexual abuse in which children are sexually exploited for money, power or status.

Children or young people may be tricked into believing they're in a loving, consensual relationship. They may receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. This is known as **grooming**.

Some children and young people are trafficked into or within the UK for the purpose of sexual exploitation. Sexual exploitation can also happen to young people in gangs.

Child Sexual Exploitation (CSE)

Child sexual exploitation can occur through the use of **technology** without the child's immediate recognition; for example being persuaded to post sexual images on the Internet/mobile phones without immediate payment or gain.

In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources.

Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person's limited availability of choice resulting from their social, economic or emotional vulnerability.

These definitions of CSE were created by the UK National Working Group of Sexually Exploited Children and Young People (NWG).

Child Trafficking

Child trafficking is child abuse. Children are recruited, moved or transported and then exploited, forced to work or sold. Many children are trafficked into the UK from abroad, but children can also be trafficked from one part of the UK to another.

Children are trafficked for:

- sexual abuse
- benefit fraud
- forced marriage
- domestic servitude such as cleaning, childcare, cooking
- forced labour in factories or agriculture
- criminal activity such as pickpocketing, begging, transporting drugs, working on cannabis farms, selling pirated DVDs, bag theft.

Types of Domestic Abuse

Domestic abuse can include:

- sexual abuse and rape
- punching, kicking, cutting, hitting with an object
- withholding money or preventing someone from earning money
- not letting someone leave the house
- reading emails, text messages or letters
- threatening to kill or harm them, another family member or even a cherished pet.

Domestic Abuse

Domestic abuse is any type of controlling, bullying, threatening or violent behaviour between people in a relationship. It isn't just physical violence - domestic abuse includes any emotional, physical, sexual, financial or psychological abuse. It can happen in any

relationship, even after the relationship has ended and both men and women can be abused or be abusers.

Witnessing domestic abuse can seriously harm young people and is a form of child abuse. Children witnessing domestic abuse are statistically **at risk** of other types of abuse too. Furthermore, children witnessing domestic abuse is recognised as '**significant harm**' in UK law

Signs, Symptoms and Effects

It's often difficult to tell if domestic abuse is happening. It usually takes place in the family home and abusers can act very differently when other people are around.

Children who witness domestic abuse may:

- become aggressive
- display anti-social behaviour
- suffer from depression or anxiety
- not do as well at school - due to difficulties at home or disruption of moving to and from refuges.

Signs, Symptoms and Effects

Mums or dads who suffer domestic abuse don't always realise how it affects children. They might think that because their child doesn't see what's happening that they're not affected. However, research indicates that living in a home where domestic abuse takes place can be harmful for a child.

Domestic abuse can also be a sign that children are suffering another type of abuse or neglect. **(Stanley, 2011)**

The effects can also last into adulthood. However, once they're in a safer and more stable environment, most children are able to recover from the effects of witnessing domestic abuse.

Signs, Symptoms and Effects

Nearly three quarters of children (over 750,000) on local "at risk" registers live in households where domestic violence occurs. **(DOH/Women's Aid, 2003).**

Domestic violence is a factor in two thirds of cases where children have been killed or seriously injured. **(Analysis of Serious Case Reviews 2003-05).**

The majority of victims of domestic violence and abuse are women aged between 16 and 35 and they frequently have children living with them.

Dorset Police Domestic Abuse Teams

- **Bournemouth** - 01202 222 046
- Poole - 01202 227 835
- Ferndown - 01202 226 089
- Weymouth - 01305 226 547
- Dorset Police non emergency contact number - 01202 / 01305 222 222
- **For an emergency response the police should always be contacted via 999.**

Neglect

Neglect is the ongoing failure to meet a child's basic needs. A child may be left hungry or dirty, without adequate clothing, shelter, supervision, medical or health care.

A child may be put in danger or not protected from physical or emotional harm. They may not get the love, care and attention they need from their parents.

A child who's neglected will often suffer from other abuse as well. Neglect is dangerous and can cause serious, long-term damage - even death.

Neglect is the most common reason for a child to be the subject of a child protection plan or on a child protection register in the UK.

1 in 10 children have experienced neglect. (NSPCC)

Neglect occurs when parents or carers **can't** or **won't** meet a child's needs. Sometimes this is because they don't have the skills or support needed. Sometimes it's due to other problems such as mental health issues, drug/alcohol dependency or poverty.

Although professionals may be worried about a child, it's not always easy to identify neglect. There's often no single sign that a child or family need help. So, professionals look for a pattern of ongoing neglect before they step in.

Types of Neglect

- Physical neglect
- Failing to provide for a child's basic needs such as food, clothing or shelter. Failing to adequately supervise a child, or provide for their safety.
- Educational neglect
- Failing to ensure a child receives an education.
- Emotional neglect
- Failing to meet a child's needs for nurture and stimulation, perhaps by ignoring, humiliating, intimidating or isolating them. It's often the most difficult to prove.
- Medical neglect

Teenage Neglect

Practitioners working with children aged 13-18 years may observe some of the key features described in the previous section. Getting help for the child and family as early as possible gives the best chance of a good outcome.

Neglect and emotional abuse are often not recognised in teenagers and even where they are they may not be taken seriously by professionals. Many of the behaviours exhibited by emotionally abused or neglected teenagers may be interpreted by others as a lifestyle choice or 'acting out', when they may in fact be an indicator of neglect or emotional abuse.

Consequently their conduct may lead them to enter the juvenile justice system rather than the child protection system. A better understanding of teenage neglect and emotional abuse may enable teenagers to access appropriate and timely help.

Internet and Social Networking

Over one in four (28%) children aged 11-16 with a profile on a social networking site have experienced something upsetting on it in the last year, 11% were dealing with upsetting experiences on a daily basis.

The most reported issue experienced on social networking sites was trolling, experienced by 37% of children who has been upset.

Other issues experienced by children who have been upset included:

- pressure to look or act a certain way (14%)
- cyber stalking (12%)
- aggressive and violent language (18%)
- encouragement to hurt themselves (3%)
- receiving unwanted sexual messages (12%)
- requests to send or respond to a sexual message (8%).

(NSPCC)

FGM

Female genital mutilation (FGM) is the partial or total removal of external female genitalia for non-medical reasons. It's also known as female circumcision, cutting or sunna.

Religious, social or cultural reasons are sometimes given for FGM. However, **FGM is child abuse**. It's dangerous and a criminal offence.

There are no medical reasons to carry out FGM. It doesn't enhance fertility and it doesn't make childbirth safer. It is used to control female sexuality and can cause severe and long-lasting damage to physical and emotional health.

Assessing Children

When a child comes to a member of Trust staff with an allegation, he or she must be listened to and heard **immediately**. Any staff member to whom an allegation of abuse is made may need to assess the child or seek immediate assistance.

Limit any questioning to the minimum necessary to **seek clarification only**. Strictly avoid 'leading' the child by making suggestions or asking questions that introduce their own ideas about what may have happened. The best questions to ask are **TED** questions: **Tell - Explain - Describe**.

- **Tell** me what happened
- Please **explain** what you mean when you say...
- Can you **describe** the person? Or Can you **describe** the place?

Alerting Features

Alerting features are pieces of information obtained through questioning of a child or their carer or through general interaction with a child in a healthcare environment. Verbal or written information regarding a child, including any injuries, lifestyle or comments, may lead a professional to **consider** or **suspect** child maltreatment. An **unsuitable explanation** from a child or carer can also be an alerting feature.

Exclude

Maltreatment may be excluded by a trained professional when a **suitable** explanation is found for alerting features. This decision should follow discussion of the case with a more experienced colleague or after gathering wider information as part of considering child maltreatment.

Only a trained professional is able to exclude child maltreatment if it has been considered or suspected following an alerting feature.

If you are unsure on your ability or training to exclude an alerting feature then you should discuss the case with your manager immediately.

Immediate Protection

When considering whether emergency action is necessary an agency should always consider the needs of other children in the same household or in the household of an alleged perpetrator.

Is the child safe to go home?

Where there is a risk to the life of a child or a likelihood of serious immediate harm, local authority social workers, the police or NSPCC must use their statutory child protection powers to act immediately to secure the safety of the child.

If it is necessary to remove a child from their home, a local authority must, wherever possible and unless a child's safety is otherwise at immediate risk, apply for an **Emergency Protection Order (EPO)**. Police powers to remove a child in an emergency should be used only in exceptional circumstances where there is insufficient time to seek an EPO or for reasons relating to the immediate safety of the child.

An EPO, made by the court, gives authority to remove a child and places them under the protection of the applicant.

Parental Responsibility

All mothers and most fathers have legal rights and responsibilities for their children and this is known as 'parental responsibility'. This can be removed in a UK court of law.

Parental responsibility means each parent is expected to:

- provide a home for the child
- protect and maintain the child **including consenting** to the child's medical treatment.

Responsible Parenting is essentially the ability for a parent to provide a **good standard of care** over an extended period.

A survey of healthcare professionals in 2009 found there are **four key elements** to a good standard of parental care which are:

- meeting children's health and developmental needs
- putting children's needs first
- providing routine and consistent care
- acknowledging problems and engaging with support services

Responsible Parenting

The same survey also found **risky parenting** was associated with:

- neglecting basic needs and putting adult needs first
- chaos and lack of routine
- an unwillingness to engage with support services.

(Kellett and Apps, 2009)

Parental Responsibility in Healthcare

Who can consent on behalf of a baby or child who lacks capacity?

Someone with Parental Responsibility provided the decision is in the **best interests** of the child.

- **not all parents have parental responsibility**
- **not all parents are responsible.**

Throughout the United Kingdom, a mother automatically acquires Parental Responsibility at birth.

A father's parental responsibility varies according to where and when the child's birth was registered.

Learn more via:

the **British Medical Association** website

the **HM Government** website

the **NSPCC** website

the **Bournemouth and Poole LSCB** website

Parent and Carer Health

In many cases in which there are concerns about a child's welfare, parents will be facing at least one of the following issues:

- domestic abuse
- substance misuse
- alcohol misuse
- mental health problems
- learning difficulties
- ill-health - does their illness, that brings them to hospital, affect their ability to care for the child, do they need support?

Some parents often struggle with **more than one** of these problems. Such cases will always require **in-depth assessment** by a **trained professional** around the impact of these issues on **parenting capacity**.

If you encounter a parent or carer in a healthcare environment who you consider or suspect may be suffering from health problems that affect children in their care you should:

CONTACT - Pippa Knight - Ext. 4235 - philippa.knight@rbch.nhs.uk

Information Sharing

Effective sharing of information between professionals and local agencies is essential for effective identification, assessment and service provision for Safeguarding Children.

Early sharing of information is the key to providing effective early help where there are emerging problems. Sharing information can be essential for effective child protection services. Serious Case Reviews (SCRs) have shown how poor information sharing has contributed to the **deaths or serious injuries** of children.

Fears about sharing information must not be allowed to stand in the way of the need to promote the welfare and protect the safety of children.

Should I Speak Out?

YES!

A child rarely dies because of sharing information but many have died because people haven't shared information.

Relatively few children are removed permanently from their birth families and the main part of child protection work is helping parents provide better care.

Our work is informed by professional ethics, being able to be authoritative and ask challenging questions about family life.

National Legislation

All of the following are laws of the United Kingdom that are relevant to Safeguarding Children, select each highlighted term for more information:

- [Childrens Act 1989](#)
- [Childrens Act 2004](#)
- [Sexual Offenders Act 2003](#)

You are able to find out more information regarding Safeguarding Children on the Trust intranet. Use your RBCH login information to gain access to the Intranet from a Trust computer.

Trust Aims

At RBCH our aim is to identify those children and young people who are suffering, or likely to suffer harm from abuse or neglect and to take action.

Remember, **early help** is better for children: it minimises the period of adverse experiences and improves outcomes for children.

Summary

That completes this module on:

Safeguarding Children Level 1

Please complete the knowledge quiz and return to your Volunteer Coordinator