

Excellence in Safeguarding Practice Guidance Notes

Introduction

These guidance notes have been compiled using learning from reviews undertaken within Nottingham City and Nottinghamshire, including Serious Case Reviews (SCR), and other types of Multi agency learning reviews. These reviews have highlighted the need when working with cases that are complex, include multiple issues and where parents are resistant and challenging; doing the basics well is essential in order to fully understand risk. Recording this work accurately is of equal importance.

These guidance notes are not intended to replace any of the Nottingham City Safeguarding Children Board (NCSCB) and Nottinghamshire Safeguarding Children Board (NSCB) Safeguarding Procedures, practice guidance or research available in these areas. However they should be considered as a quick reference guide. Learning from reviews undertaken show that when work is not compliant with procedures this is intrinsically unsafe for children.

Excellent Safeguarding

When working with all safeguarding cases and particularly those that have some complexity, practitioners in all agencies **should**:

- Obtain a full history of the case / family and read all available historic records
- Complete a multi-agency Chronology
- Complete a full genogram including information from parents & carers, and the young person and consider inter-generational and community relationships
- Speak to the child(ren) individually to understand their experiences of family life
- Maintain a focus on the child, their experiences and the parenting they receive. Do **not** get distracted by parental issues and complexities
- See the child alone. If blocked from doing so, this should be seen as an issue and seek management advice
- Gain views and information from both parents and other family members
- Ensure all assessments are thorough, analytical, honest and regularly revisited to ensure they remain current
- Ensure that assessments always consider all individuals that allegations are made against
- Maintain a level of professional curiosity when working with families
- Use the Signs of Safety Tools to support assessments (Nottingham City Only)
- Ensure full, accurate records are kept and maintained
- Share information with other agencies and practitioners involved in the case (considering agencies that **may** be involved) either with consent if required or within the child protection legislative framework
- Make decisions with all the information available, in conjunction with other agencies where this is appropriate, with a view to safeguarding and promoting the welfare of the child
- Record and evidence the rationale for decision making
- Use consultation forums where these are available
- Discuss the case in supervision / line management arrangements / with the agency safeguarding lead to enable reflection, broader consideration, risks and case management responsibilities
- Consider the need for safeguarding training / reading / research to help with understanding the case
- Be open to evidence that both supports or challenges the theory you have about the case
- All agencies must follow escalation processes when they are not satisfied with the response from another agency

- When working with very complex families across multiple households the allocation of two workers should always be considered¹; ecomaps can also be a useful tool to assist in better understanding family dynamics and interactions.
- At all times be aware of any emerging professional disagreements. Where conflicting views across the network occur, about the nature of children's needs and risks; this could indicate that no one agency has understood fully the child's circumstances. In these cases there is a need to step back and reconsider by all parties. Where necessary workers should seek support to assist in this process.

Domestic Violence / Abuse

In cases involving Domestic Abuse practitioners **should**:

- Complete a Domestic Abuse, Stalking and Harassment Risk Identification Checklist (DASH RIC) Form to assess the level of risk and use this to refer to the Domestic Abuse Referral Team (DART) in Nottingham City and the Multi Agency Safeguarding Hub (MASH) in Nottinghamshire.
- Speak to the children / young people in the household to understand their experiences of domestic violence
- Recognise that domestic abuse has a number of different impacts on children, both physical and emotional, and this may be different at different ages. Even with very young children there will be emotional impact of experiencing domestic violence.
- Ensure a multi-agency view of the domestic abuse and family relationships is sought
- Do not rely on separation as the only means of protection or as a guarantee of the risks being eliminated. You may not be aware that relationships are continuing and risks may still be present through ongoing contact even after a relationship ends. Remember there is an increased risk to the victim and family when a relationship ends
- Ensure the assessment provides an analysis of the dynamics of the parental relationship and identifies where the risk lies. Information should be gathered from the perpetrator as well as the survivor where it is safe and appropriate to do so
- Ensure assessments take into account issues of coercion and control in the context of the domestic abuse and the wider family power dynamics.
- Access specialist domestic abuse training and research to understand the issues and risks present within abusive relationships
- File recordings of Domestic Abuse **MUST** be accurate descriptions of the reports/ incidents, and reflect exactly what has been reported or witnessed. This is also of critical importance when referring to historic incidents of abuse. Generic ambiguous descriptions must be avoided.

For further guidance refer to specific practice guidance regarding domestic abuse, which is available on the [Interagency Safeguarding Children Procedures website](#).

Emotional Abuse / Distressed Children

Disclosures of Emotional Abuse are extremely rare and practitioners must not rely on one in order to take action. Children will not necessarily recognise their situation as Emotional Abuse. The child's behaviour and relationship with their care givers should be an indication of their emotional wellbeing and the potential for emotional abuse.

In all cases involving Emotional Abuse practitioners **should**:

- Undertake holistic assessments using the Emotional Abuse Assessment Framework* to provide information and understanding of the child's experience and collate evidence using:
 - **Observations of the parent / child relationship** - this is particularly important in pre verbal children and babies, and children with communication difficulties. Record precisely what you see.

¹ Applies to Local Authority Children's Integrated Services

- **Parental risk factors** (e.g. mental health issues and substance misuse issues)
- **Parental behaviours** (e.g. ignoring the child's need to interact, persistently telling a child they are worthless or unloved, bullying a child or frequently making them frightened; persistently ridiculing, making fun of or criticising a child, failing to express positive feelings to the child, showing no emotion in interactions with the child)
- **The impact** of parenting on the child's development.
- Ensure they look beyond presenting behaviours to analyse and understand the reason for these behaviours
- Record behaviours, interventions and their impact on outcomes clearly within records over a period of time. This will provide evidence of the persistent nature of emotional abuse as well as minimise the possibility of repeating interventions.
- Work to understand the family functioning, relationships and dynamics, including the child / young person's position within the family, any complexities of the child's history or experience, and the impact of this on their emotional wellbeing. Practitioners need to build this into their assessments for greater understanding of the child's diversity needs and the impact of emotional abuse.
- Consider the need for a formal developmental assessment as developmental delay may be a feature of emotional neglect or abuse, particularly delays in language. It is important to have a formal developmental assessment if emotional neglect or abuse is suspected

*For more information on the Emotional Abuse Assessment framework see the full Emotional Abuse Guidance on the [Interagency Safeguarding Children Procedures website](#).

Distressed children / young people

Distressed children / young people are frequently missed or labelled incorrectly as disruptive, aggressive and volatile. They are often progressed down specialist pathways for support or can very quickly become involved with the police and criminal justice system unnecessarily. In cases where the child / young person has a disability or diagnoses the distress can too easily be associated with this and the wider social / emotional factors missed. Remember that very young children will not display their distress explicitly; it is more likely to be observed through changes to their usual presentation and behaviour.

In all cases involving distressed children practitioners **should**:

- Avoid making assumptions about potential mental health issues and consider the possible causes of the distress which may be a result of abuse or a stressful home environment.
- Undertake and record observations of a child's behaviour and parent / child interactions in these cases
- Identify an individual who the child / young person is responsive to who can establish a trusting relationship with them
- Undertake all efforts to de-escalate the situation of distress and prevent it from escalating
- Accept that dealing with emotional distress / outbursts take time, factor this into your response and seek support where needed.
- Always consider a full history of the child / young person and their family to create contextual understanding of the circumstances, and any patterns to the distress.

Sexual Abuse

Sexual abuse is a complex and challenging area for all practitioners. Sexual abuse occurs across all groups of children / young people irrespective of class, religion, culture, age or ability, although some children have additional vulnerabilities.

In all cases involving Sexual Abuse practitioners **should**:

- Ensure that there is clear evidence to support protective factors or persons identified as being a protective factor.
- Not wait for a disclosure to act, consideration should be given to the presentation and behaviour of the child / young person in the context of known history.
- Remember children disclose in many different ways and not always directly.
- See past the outwardly caring and concerned parent and question further the cause of any behaviour or distressed presentation.

- Not dismiss allegations or concerns if medical evidence is not found.
- Where one child in a family makes an allegation or disclosure ALL children in the family must be spoken to and assessed.
- Ensure that any disability or medical diagnosis is not used to explain / excuse behaviours / symptoms without full and proper assessment.
- Not assume that sexualised behaviour, emotional or behavioural difficulties are a result of abuse in the past, perhaps by a family member with whom there is no longer contact, as the abuse may be still occurring with another perpetrator
- For further guidance refer to specific practice guidance regarding sexual abuse, which is available on the [Interagency Safeguarding Children Procedures website](#).

Challenging / Resistant Parents

In some cases, parents can behave in a number of ways that can distract practitioners from achieving the goals set out within the action plan / interventions. They may be challenging, difficult and aggressive, or talk for the child, divert attention and control the contact and interventions planned. They may appear to be compliant with the practitioner but resist change and not attend or engage with work sessions.

In all cases involving challenging / resistant parents practitioners **should**:

- Remain calm and professional in their interactions with families.
- Maintain a focus on the child and their outcomes, *what needs to change for the child* and not be distracted by the behaviours presented by the parents.
- Recognise the impact of non compliance on interventions and the outcomes for the child.
- Use the Signs of Safety Tools to assess risk and be honest about these. (Nottingham City Only)
- Discuss the case in supervision / line management arrangements to consider different ways to work with the parents.
- Remember that if you are intimidated by parents, the child is living in that environment.
- Avoid applying an over optimistic view of small changes.
- See a lack of engagement as a reason to heighten concerns and risk ratings of the case; and not as a reason for closure.
- Ensure decisions to end involvement are driven by needs being met and not influenced by poor engagement.
- Be aware of the potential for parents to shift focus from the presenting concern / abuse allegation to the focus being the child's difficult behaviour.
- Seek to understand the parental motivation to change
- Be alert to any situation where a child has been encouraged by an adult to lie. This will have a significant negative impact on the child.
- Recognise that working with highly deceptive individuals is challenging and ensure that this is explored in the context of supervision.

Children with disabilities

Recent reviews have highlighted that when children have a disability, or known medical condition, the service delivery can focus on this at the expense of the wider context of the case, the parenting experiences of the child and any potential safeguarding concerns. Whilst focusing on health and support the basic needs of the child can be overlooked, and risks masked, not recognised, or just not assessed.

In all cases involving children with disabilities the practitioner should:

- Ensure any specialist assessments take into consideration the family situation, family dynamics and possible safeguarding concerns.
- Focus on the child's needs and ensure their basic rights are not being overlooked in the pursuit of wider support and engagement issues.
- Use specialist opinion to inform the wider circumstances of the case, not as the only option.
- Avoid over identifying with the parents and the challenges they face.

- Always capture the views of the child / young person even if they are nonverbal, through observations of their presentation, interactions at home and in different environments.
- Not assume that difficult to manage, aggressive or problematic behaviour is a result of a child's disability or attribute behaviours to developmental difficulties rather than striving to understand the cause of these
- For further guidance refer to specific practice guidance regarding safeguarding children with a disability, which is available on the [Interagency Safeguarding Children Procedures website](#).

Voice of the child

In all the sections above there are references to seeking, hearing and representing the views, feelings and experiences of the child. In addition it is essential that:

- Children need to be seen in a way that optimises meaningful engagement
- Any blocks to engagement with children should be viewed as a safeguarding issue.
- An understanding of family relationships and family dynamics should be explored and built up over time, and not based on limited observation or information.

Help Seeking Behaviour (Managing disclosures and allegations)

Local reviews have highlighted the need for a shift in the way professionals think about and respond to children / young people who make a disclosure about what is happening to them. Workers should view it in the context of **help seeking behaviour**, and alongside the formal procedural response workers should always:

- Undertake a child focussed response
 - Offer personal feedback to the child about what is happening
 - Give them reassurance that they have done the right thing
 - Work to avoid the child feeling they are to blame
 - If the family are to remain together consider how the parent / child relationship will be repaired. Perhaps using a family restorative model, or using words and pictures.

When undertaking assessment of potential physical abuse staff will consider the following issues

- The nature of the injury/injuries
- The explanations provided by the child
- The explanation provided by the parent/carer and any other person involved
- Any contradictions or discrepancies in the explanations
- Family history and known risk factors
- History of other injuries

Staff can be diverted from considering abuse by parents/carers who justify their behaviour by describing this as legitimate punishment. Terms such as physical chastisement and harsh punishment can contribute to this confusion.

Nottingham City and Nottinghamshire Safeguarding Children Boards do not support the use of any form of physical punishment. We advocate other child centred disciplinary approaches.

Identifying the point at which physical abuse is, or may be present will require staff to focus on the child's lived experience and reflect on how the punishment impacts on them.

This will include consideration of the following factors

- The persistence of such treatment
- The severity of the treatment

NICE have produced guidance which is relevant to this issue which can be accessed [here](#).

Self-harm

Self-harm in young children (under 11) is extremely rare.

Practitioners should always be mindful of the underlying factors which may lead a child or young person of any age to self-harm.

Where information comes to the attention of staff which suggests that a primary age child has self-harmed practitioners should give serious consideration to other potential causes for injuries; whether there are other underlying factors, including abuse. All such cases should be discussed with children's social care.

Even in those unusual cases where a primary age child (under 11) is thought to have self-harmed it is important to recognise that this behaviour is an indicator of emotional distress and the child will need support to address this

Even in older children we should consider that self-harm may be indicative of other concerns.

When recording incidents of reported self-harm practitioners should be very precise in their recordings, not use general terms, or make assumptions.

Working with Families / The use of agreements

When seeking to secure engagement with families, practitioners should remember that:

- Agreements work best when they are developed in conjunction with all parties.
- Agreements can never be a contract.
- Agreements should never include the threat of initiating Child Protection procedures as a consequence of non-compliance. Any consequence should be clearly defined within the agreement as the impact on the child.
- Agreements in place for cases of physical abuse - Practitioners should treat the use of written agreements in this area with extreme caution. It is critical that the parent/carer is aided to understand what aspects of their behaviour need to change, and why they need to change, what is the damaging impact on the child; rather than refraining from something because there is an agreement in place.