

Addendum (3 of 3) – Safeguarding Children and Young People During Covid-19

Context:

The way we are currently operating in response to coronavirus (COVID-19) is fundamentally different, however, a number of important safeguarding principles remain the same:

- with regard to safeguarding, the best interests of children and young people must always continue to come first
- if anyone has a safeguarding concern about any child they should continue to act as outlined in the organization Children and Young People Safeguarding Policy
- a DSL or deputy will be available at all times
- safer recruitment processes should continue as previous
- children and young people should continue to be protected when they are accessing support online

This is an addendum to our standard safeguarding policies and details changes we will put in place during this period.

CANW's expectation is that we will continue to have the usual safeguarding responsibilities for service users accessing support remotely. This includes making referrals in the usual way if necessary in adherence to the existing policy. Staff and volunteers are aware that this difficult time potentially puts all children at greater risk. Staff and volunteers will continue to be alert to any signs of abuse, or effects on pupils' mental health that are also safeguarding concerns, and act on concerns immediately in line with the

This addendum to the Children and Young People Safeguarding Policy contains details of our individual safeguarding arrangements in the following areas:

Designated Safeguarding Leads/named persons:

As outlined in the overarching policy CANW has Designated Safeguarding Leads (DSL). They are available to be contacted by phone or email. These are as follows:

SUE COTTON (01254 244700 / 07581068931)

STUART CHAPLIN (01254 244700 / 07739083105)

JULIE DAWKINS (01254 244700 / 07717858729)

Responsibilities:

The safeguarding named persons (as above) are responsible for acting as a source of advice on safeguarding matters and for supporting Service or Project Managers to coordinate any necessary

action that may be required in line with CANW's Safeguarding policies and procedures. DSLs as named above will provide on-call support 7-days a week on a rotational basis. Where concerns need to be escalated it is expected that staff will follow existing guidance. Where a line manager is not available this should be escalated to a senior manager who will be available to provide phone support.

Safeguarding Training and induction

For the period COVID-19 measures are in place, there will be no face to face safeguarding training offered. All training will at present, including refresher and induction, be completed online. A DSL will communicate any amendments made to CANW policy or processes, and local arrangements where this impacts.

Where new staff or volunteers are recruited, they will continue to be provided with a safeguarding induction. Safer recruitment processes will continue as previous.

Online Safety

CANW will continue to provide a safe environment; this includes online support. Staff should adhere to the guidance previously outlined when communicating with students remotely. It is important that all staff who interact with children, including online, continue to look out for signs a child may be at risk. Any such concerns should be dealt with as per the Children and Young People's Safeguarding Policy and where appropriate referrals should still be made to children's social care and as required, the police.

An essential part of the online delivery process will be ensuring children and young people who are being asked to work online have very clear reporting routes in place so they can raise any concerns whilst online. We are to signpost children to age appropriate practical support from the likes of:

- **Childline** - for support
- **UK Safer Internet Centre** - to report and remove harmful online content
- **CEOP** - for advice on making a report about online abuse

Child exploitation and associated grooming comes in many forms. In times of crisis, those who might seek to exploit children and young people can be quick to act and prey on vulnerabilities facing fewer barriers to do so with a reduction in online moderators that work to keep children safe.

Online social media and gaming sites become a lifeline for parents and children adapting to spending more time at home and for addressing social isolation. However, this may come with reduced access to personal, social and health education on how to stay safe. Practitioners should consider if parents and families are able to monitor activity, recognise the signs of exploitation and take action, and what support they might need to promote good online safety and safeguarding through conversations and discussion with children.

Helping families to establish clear boundaries, controls and expectations with children about internet, mobile phone and social media usage can be a protective factor

Developing effective online support

With online support, there is good evidence to suggest that it is:

- A good way to increase accessibility.

- Acceptable to the Client
- Effective
- Possible to build therapeutic relationships just as well as face to face.

Practicalities for delivering effective online support

Do's	Don't's
Use a fit-for-purpose system (ZOOM/Microsoft Teams)	Avoid non-approved communication platforms, such as Facebook, Skype, FaceTime, WhatsApp, etc.
Test your setup is working before you meet clients online by delivering a practice session with a colleague or friend before using software with a client	
Preferably ethernet cable connections, or WiFi is needed.	Avoid using 4G/data connections, as they lead to poorer quality audio and video.
Close all other apps, tabs and windows on your device before a session, especially programs that use a lot of memory or data, or docs with sensitive information, as accidental screen sharing can happen.	Avoid having lots of apps or internet tabs open, as this may slow down your device and/or internet connection.
If connection is not performing well, request others on the same connection not to use high data applications, such as video streaming or gaming.	Avoid letting many people use the same internet connection for high bandwidth apps like video streaming and gaming during clinical sessions.
Use headphones or earphones to reduce audioclippping due to mic-speaker feedback.	Avoid using speakers to hear you clients, as this will lead to audio clipping and make it harder to listen and reduce relational depth.
Ensure you have a private, confidential space, free from background distractions or noise disturbances.	Avoid interruptions during the session by requesting all people in the building to not disturb you.
Avoid having notifications on your device as this will create audio-visual distractions and reduce relational depth.	
Aim to have the main light source facing you, as this will aid camera brightness, reduce glare, and allow the client to see your face clearly, helping to establish relational depth.	Avoid having sources of light such as windows behind you, as this will reduce image clarity for your client.
Have a clear procedure in place for dropped connections – eg phone call immediately	Avoid not having a back-up plan for when internet connect fails.

Consider in advance what materials a client might need to be sent via email before the session.	Avoid trying to figure out how to use a software feature during a client's session or use a client's time to send information needed during the session.
Be familiar with software features that you may need to use during the session, such as screen sharing, before you begin the session with a client	

Beginning Online Sessions

- Ensure the client is comfortable with the link, and that they can hear and see you OK.
- Make it clear that if the connection is not clear
- They can tell you and ask you to say things again, if needed
- They can request others to reduce their use if the connection by, for example, turning off streaming or gaming apps.
- If the connection is of a poor quality, you can switch to phone or reschedule.
- Cover confidentiality, as normal.
- Ensure consent, to support, and via video format.
- Confirm if you, or the client, would like to use the record function. If you wish to record the session, as with any form of recording, normal procedures for recording sessions should be followed.

Developing Therapeutic Relationships Online

As with any supportive relationships, establishing the core conditions of empathy, congruence, and unconditional positive regard is essential. That being said, when working online, particular attention can be given to:

- Make sure your video feed is clearly lit, so clients can see your facial expressions. This will aid relational depth and the therapeutic relationship.
- Nod clearly, and use non-verbal, audible feedback like “mmhmm” to indicate that you are still with them. Use the body language that the client can clearly see to congruently communicate you are still with them.
- Using active listening skills, such as paraphrasing, summarising, and verbal empathic statements to show the client that you are hearing them.

See below for resources that would aid online support:

Effective Therapy via video: Top tips. <https://www.bps.org.uk/news-and-policy/dcp-digitalhealthcare-sub-committee-top-tips-providing-effective-therapy-video>

A Comprehensive Review and a Meta-Analysis of the Effectiveness of Internet-Based Psychotherapeutic Interventions. <https://www.tandfonline.com/doi/full/10.1080/15228830802094429>

Efficacy of synchronous telepsychology interventions for people with anxiety, depression, posttraumatic stress disorder, and adjustment disorder: A rapid evidence assessment.

<http://dx.doi.org/10.1037/ser0000239>

A new emphasis on telehealth. <https://www.apa.org/monitor/2011/06/telehealth>

Phone Support for Young People

This is in relation to general phone-based support for young people:

- CANW is not an emergency service for young people
- The overall aim is to listen, support, signpost and give advice if required.
- If a phone call is received and a young person says they are in immediate risk or danger, please contact your line manager or on-call DSL straight away and adhere to CANW's Children and Young Person's Safeguarding Policy
- Log all calls that are received or made and record concerns; send these to your line manager initially in accordance with CANW policy and process
- Follow guidance in the Employee Handbook relating to conduct and the organisational Code of Conduct policy: the role is to provide professional support
- Listen carefully to young people and allow them the space to speak, a short silence is fine, then precis back to them what they have said. Young people often have the answers to their issues, they often just need to say it out loud. Try and break the issue into bite-size chunks – this is often easier to deal with.
- Be calm, gentle and non-judgmental.
- If you receive abusive or an inappropriate communication, please reiterate boundaries and agreed contract of support
- Young people may just want to talk about their feelings and managing with Covid-19: follow government information, encourage them to use different mediums to express their feelings, writing, drawing and having contact and chatting to other people.
- Some young people may be having conflict with their family, encourage them to talk through what they are doing, and then encourage them to think of other family pressures. Encourage the young person to think of how these pressures could be relieved – positive association
- Ask young people about some of the positive things in their lives - this can often put a balance into their thinking
- If you feel a young person is going to make a disclosure, remember CANW's Safeguarding training: immediately explain that if they tell you something which is a safeguarding issue it will need to be passed on

Risk factors

The following is a brief guide is for practitioners working to safeguard children and families during the COVID-19 outbreak.

As a practitioner you are facing unprecedented challenges to support and safeguard vulnerable children and families, especially as we head into the new period of national lockdown. During this time of uncertainty, it is particularly important to safeguarding children and young people who may be at an increased risk of abuse, harm and exploitation from a range of sources. However, it is equally important to safeguard families, with parents facing significant pressures to continue to protect and promote the welfare of their children. These parents may already be struggling and so with additional pressure the likelihood of harm or significant harm may increase.

Poverty

We have long recognised the relationship between poverty and the safeguarding of children and families. Where families are unable to meet the basic needs of children, this can, in some cases, lead to an increased likelihood of abuse, neglect and harm. During the COVID-19 outbreak, where paid work is threatened or has been lost or where families are forced to isolate, this risk of poverty increases and challenges the ability of families to be able to follow Government health advice.

Taking action

Think about the children, young people and families that you work with and how they are managing in the current context:

- Has anything changed within the family which may lead to financial concerns (for example, a family member may have lost their job and the family could be struggling to pay bills or buy food)?
- Do the family know how the latest Government plans could support them?
- Are the family having to isolate, and so unable to attend school or get supplies from shops?
- Are they aware of local mutual aid support networks and foodbanks?
- If children in the family would usually access free school meals, how is the school continuing to provide this (for example, through supermarket vouchers or food parcels)?
- Support networks - From experience, it is clear that children who are abused and harmed are often unseen and unheard. When we explore this in more depth it can become clear that the whole family system is isolated. Support networks provide help in being able to manage and overcome difficulties and challenges. Due to the current social distancing measures, the ability of children and families to access the usual range of traditional, face-to-face, social networks will be hampered and new means may need to be explored to retain contact as an important protective factor.

Taking action

Think about the children and families that you work with and how they are managing in the current context:

- How might children and families be maintaining their networks in the context of staying indoors?
- Do the family have access to the internet? The internet can be helpful in supporting citizens to stay connected with their loved ones. Using apps like Houseparty, Skype and Whatsapp can enable virtual connection.
- Thinking about families who have limited networks, could they develop new networks in their neighbourhood? We have seen creativity and positivity in recent weeks with communities using technology to communicate and mobilise the support those who need it.
- Do families understand how to keep themselves and children safe online, including how to use parental controls, from the risk of exploitation, bullying and grooming?
- Accommodation - Vulnerable children and families can often face challenges with their accommodation. They may have temporary accommodation or a lack of space, for example the sharing of one room. During the COVID-19 outbreak, the exposure of children and families to unsuitable accommodation will increase as adults may work from home and members of the household are unable to be outside. Whilst children should all be able to access school, this may not always be true of all children in the household who may be forced to self-isolate due to local outbreaks within their schools or school 'bubbles'.

Taking action

Think about the children and families that you work with and how they are navigating these challenges in the current context:

If a family are staying indoors in limited space, do they have a clear routine to each day? Children respond well to routines and boundaries; having a sense of how your time is going to be spent indoors will help a family manage the challenge of a lack of personal space.

Are the family clear on Government guidance with regard to exercise? How are the family thinking about how daily exercise outside can provide stimulation and, potentially, health benefits?

Where problems arise with the family's accommodation, are they aware of when and how to seek support or emergency assistance?

Where problems with paying rent occur, are the family aware of their legal protections under emergency coronavirus laws?

Abuse and harm

Different types of abuse and harm are likely to be more prominent during this time. This does not mean that risk will definitely increase when working with pre-existing concerns. However, practitioners should show curiosity to explore how the risk may become exacerbated.

Domestic abuse

We know that conflict and violence can escalate when families face greater pressure and stress, and the order to limit social contact and stay home can cause anxiety for those at risk. The current situation disrupts routines and behaviours, both positively and negatively and it is important to be aware of how the tension can escalate to violence and abusive behaviours between families, parents and children.

If you are working with families where there has been a concern of domestic abuse, consider how the current situation may further impact on relationships in the household and how effective any mechanisms to diffuse conflict are in the new context. For example, if a previous strategy involved leaving the family home to see or stay with friends or family, how can you support them to adapt and modify their strategies? Victims must also be aware that the order to stay at home during this second national lockdown does not apply to those escaping danger or harm, including domestic abuse and violence.

Substance abuse

Unhealthy coping mechanisms can involve a reliance on substances that provide relief and escapism by adults and children alike. Substances alter the behaviour of parents and create a lack of safety for children and young people. It is important to understand how families are managing the stresses that they face, which are likely to be exacerbated under the current pressures - with associated worries around employment, finances and health.

Where there is an existing dependency or use of substances in the household, it is important to consider how the current context may escalate use. If a parent or individual is reliant on prescription medication, how might stretched national resources affect their capacity to stay well and abstain from using dangerous substances?

Similarly, efforts in health promotion and education with children and young people on the risks of substance abuse remains of paramount importance.

Neglect

Isolation can place children at a greater risk of neglect. This is compounded by the increased economic challenges and poverty that families may be facing, and by the increased exposure of children to neglectful environments as they spend more time in the home. Even with schools remaining open, children may still have reduced contact with the usual range of professionals who can further limit the contact that children have with professionals who can identify the signs of neglect and take steps to intervene and report concerns.

Neglect may become a source of harm for children, even if not the initial reason for social care involvement. Practitioners should maintain a professional curiosity and keep a holistic view of the family and emerging risks.

Children with additional needs

We know that children and young people with additional needs and disabilities are up to three times more likely to be abused or neglected than non-disabled children, and less likely to disclose harm due to communication and other difficulties. Even though these children may have been able to access schooling throughout the pandemic, the availability of access to schooling provides an important safeguard for them. However, with localised outbreaks that affect the opening of schools or require self-isolation, families may still find increased time at home and additional caring responsibilities, where external support opportunities may be limited, a strain.

Practitioners should consider how they seek the voice of the child during these times, and whether online or telephone contact is enough to ensure their wellbeing and safety. This is especially important where communication difficulties make these means less effective.

Strengths-based practice

It is important that practitioners do not become overly risk focused, showing curiosity whilst being mindful of not interfering too much simply because the current situation brings risks and anxieties. In times of adversity, the strengths and resilience of families can shine through.

It is likely that you will find it difficult to manage your time with your workload possibly increasing. When prioritising your work, think about the children and families you work alongside and consider if the nature of your involvement is necessary and proportionate. Whilst many local supports and organisations have reduced capacity to help families during the COVID-19 outbreak, there are many examples of community networks and social enterprises that have started to replace them and address needs.

Practitioners could consider how their understanding of local resources have changed in light of this, and revisit asset mapping of the local support available to share between teams.

Reduction in normal service levels

Emergency legislation has been introduced to help social care to cope under a possible increase in demand and reduction in staffing. Through the act, there are implications for children and young adults including changes made to the obligations under the Care Act (2014) and Mental Health Act (1983).

The act also removes the duty of local authorities under the Children Act (1989) and Chronically Sick and Disabled Persons Act (1970) to carry out a detailed assessment of the needs of young adults, on turning 18 years of age, and their carers when transitioning to adult services.



As schools remain open, all children should be able to access formal face-to-face education, unless there is a local need for certain groups to self-isolate due to outbreaks within school settings. Even for those children temporarily not able to attend school, teachers and staff should have arrangements in place to provide education remotely, make provision for those receiving free school meals to continue to access this (for example, in supermarket vouchers or food parcels) and to fulfil their statutory safeguarding obligations. Contact details and working arrangements for the Designated Safeguarding Lead (DSL) should be made accessible on the school's website and these staff remain a key contact for practitioners, parents and children.

For families who have concerns about allowing their child to attend school, possibly due to underlying health concerns or vulnerabilities, practitioners should work with families to understand their concerns and encourage them to let their children attend.

Whilst continuing to work to safeguard children and their families, local Child and Adolescent Mental Health Services (CAMHS) may have ongoing changes to the way that support is accessed, including moving face-to-face appointments to telephone consultations and reducing community visits to only those deemed high-risk. Where concerns are held that a child or family need CAMHS review or support, the local team or key worker can be contacted in the first instance to seek advice and further discussion.

Approval

This procedure has been approved by the undersigned, and it will be reviewed on an annual basis

Signed off by CEO	Signature: 	Date: Jan 2022
Approved by Board	Signature: 	Date: Jan 2022