# Safeguarding children

**Public and Private law** 

### Introduction

This guidance and the accompanying practice aids are designed to support Family Court Adviser's (FCA) and Children's Guardian's assessments for children who may have been harmed or at risk of harm.

It forms part of the Child Impact Assessment Framework and applies throughout our work with children for their duration of their proceedings, from the outset to case closure in both public and private law. Other parts of the Child Impact Assessment Framework and all relevant concerns for the child will need to be considered as the assessment progresses.

This guidance supports the <u>Child Safeguarding policy</u> which all practice staff must follow. It sets out the requirements placed by Cafcass, on its staff and contractors, relating to its statutory function of safeguarding and promoting the welfare of children. It details the procedures to be followed when completing a section 16A risk assessment; making a referral to children's services; taking urgent action to protect a child; and responding to an allegation made against a person who works with children. It alerts staff to the requirements placed upon them in respect of complex safeguarding and child protection matters, for example child exploitation, radicalisation and female genital mutilation, and the resources available to support staff in this area of work.

As with all assessments, the analysis should begin with thinking about what is happening for each child, considering risk posed to them, the impact of parental behaviour, and their wider experiences and the use of the Assessment and Child's Plan to consider what the child needs form their work with Cafcass.

### Context

Information regarding abuse and harm to children, arising in the ways set out below, may become apparent at any stage of the assessment and may include:

- Alcohol misuse which is harmful to the child
- Drug misuse which is harmful to the child
- The impact of mental health difficulties, including personality disorders, that are harmful to the child
- Child mental health difficulties
- Domestic abuse
- Neglect
- Physical abuse
- Sexual abuse
- Emotional and/or psychological abuse (including radicalisation)
- Child trafficking
- Criminal and sexual exploitation
- Female Genital Mutilation (FGM)
- Honour Based Abuse (HBA).

### Guidance

Key practice points			
Consider child impact and risk	<ul> <li>What has been happening for this child? - Past</li> <li>What is life like for the child and what is happening now? - Present</li> <li>What might happen? - Future</li> <li>How likely is it to be repeated? - Risk</li> <li>How serious would it be? - Impact on the child</li> </ul>		

Three key areas of learning relating to Child safeguarding from Significant Incident Reviews and National learning reviews in 2022-2023:

# 1. Analysis of harm and the risk of harm from Domestic abuse, poor mental health, parental drug use and poor home conditions

- When children are reunified or placed at home, especially when they have not lived with parents or carers before take into account the following questions.
- Are you being parent or child centred?
- Have you considered the safety of children connected but not in these proceedings?
- Are you confident about the assessment of harm and risk of harm?
- What is the support plan, and scrutiny of that?
- Are you using the assessment and child's plan effectively to assess risks across the five domains?
- Have the views of wider family members helped you understand the child's experiences and what life is like for them?
- Do we understand the risks posed by all members of the household and other adults?

### 2. Seeing and engaging children

- Are you planning engagement appropriate to the child's age and thinking about engagement with babies and children under 2?
- Is the engagement with children informing your analysis of harm and risk of harm?
- Do you understand the children's uniqueness and how that shapes their lives and their family relationship, and do we have their specific and individual needs in mind when we make recommendations?

## 3. Management Oversight and Supervision

- Do you have reflective supervision that enables critically reflective practice?
- Do you seek supervision in line with the triggers, for managers do you know who does not seek supervision in line with the triggers and is this challenged?
- As managers you are clear what good management oversight and supervision looks like, what different members of the team may need and how does that engagement add value to the child.
- Do you record actions and learning through PLRs and ensure follow through of actions and learning.

### Reflect on your analysis

- Use the information gathered from using the practice aids to inform your analysis and your planning with and for the child.
- We know that "it is what is done with information, rather than its simple accumulation, that leads to more analytic assessments and safer practice" (Brandon et al 2008).
- When using practice aids, be clear about what the results mean for the individual child you are working with.
- Does there need to be any intervention or support to manage/minimise the risk identified?
- How will the child know when the risk has been reduced, what will be different for him or her?
- Where you believe the child is suffering or likely to suffer significant harm, consider
  the need to refer to the local authority under child protection procedures, for a 16a
  risk assessment and/ or to recommend the court order a report under section 37
  Children Act 1989 from the local authority.

Safeguarding children	Resource	Guidance on use (relating to key issues identified in the case plan)	Source
Drug misuse	SCODA - risk assessment with parental drug misuse	To be used in an interview to establish an evidence base for analysis.	SCODA
	Tool for drug abuse	To be used in an interview to establish an evidence base for analysis.	Cafcass – adapted from Fowler, 2003
Alcohol misuse	Alcohol use tool	To be used in an interview to establish an evidence base for analysis.	Adapted from Department of Health (DoH), 2000

	Mental health	This is a tool to help organise	Dr Sheena
Mental health difficulties	thinking tool	FCAs' thinking and support them to critically review evidence in cases where parents have mental health difficulties. It is not designed to be a prescriptive or definitive measure of risk and should be used in the context of the overall structured professional judgement, in conjunction with the broader evidence in the case.	Webb, Tavistock & Portman NHS Trust for Cafcass, 2017.
	Helping young people affected by parental mental illness	General resources for professionals to be used when working with young people affected by parental mental illness.	Our Time, 2018
	Adult wellbeing scale	To be used in an interview to establish an evidence base for analysis.	Department of Health, 2000
Child exploitation	Child sexual exploitation (CSE) screening tool	This tool can be applied to all children (male and female) under the age of 18. Its purpose is to enable practitioners to assess a child's level of risk of CSE in a concise and consistent manner.	Cafcass
Sexual abuse	Sexual behaviours traffic light tool	This tool lists examples of presenting sexual behaviours within four age categories. All green, amber and red behaviours require some form of attention and response, but the type of intervention will vary according to the behaviour. This tool must be used within the context of the guidance provided and should not be used in isolation.	Brook Sexual Behaviours Traffic Light Tool adapted with permission from True Relationships & Reproductive Health. (2012).

	Tool for	To be used to explore parents'	Cafcass –
	parenting	understanding of their child's	adapted from
	knowledge	needs according to age and	Fowler, 2003
Neglect	and style	stage of development.	·
	Parenting	An assessment tool which can	Department
	daily hassles	be used with the parents/carers	of Health,
	scale	to consider their view of the	2000
		children's needs and how they	
		are coping with these needs.	
	Neglect	The tool methodology was	NSPCC
	<u>Appraisal</u>	derived from the	(date
	<u>Tool</u>	Graded Care Profile which	unknown)
		helps to ascribe levels of risk	
		and was intended for public law	
		practitioners to use when doing	
		their gap analysis in	
		order to help them	
		independently assess levels of	
		risk and so inform and evidence	
		their position	
		regarding interim removal,	
		where neglect is a key issue.	