**TESSA ADKINS SAFEGUARDING CHILDREN**

**- POLICY AND PROCEDURES**

**(based on Play Therapy UK’s Safeguarding Policy – April 2021)**

In this document Tessa Adkins will be referred to as “the therapist”.

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Safeguarding is the action that is taken to promote the welfare of children and protect them from harm.

Safeguarding means:

* protecting children from abuse and maltreatment
* preventing harm to children’s health or development
* ensuring children grow up with the provision of safe and effective care
* taking action to enable all children and young people to have the best outcomes.

The term safeguarding is used to refer to a number of areas of concern relating to children

including:

Child Protection issues

Sexual exploitation

Radicalisation

Physical, emotional abuse or neglect

**Introduction**

The therapist is committed to ensuring the safety and physical and emotional well-being of children. She recognises that PTUK members who work therapeutically will come into contact with children who may be at risk of harm or exploitation including radicalisation. She has a duty to report suspected safeguarding concerns relating to a child to relevant DSL or external agencies dependent on the members place and status of work (working with an umbrella organisation or Private Practice).

**Key Safeguarding Principles**

PTUK takes safeguarding children seriously, advising PTUK members that everyone who comes into contact with children and families has a role to play:

PTUK members working within an organisation should:

* Undertake safeguarding training level 2 and 3
* Read Safeguarding and Prevent Policy and Procedures
* Identify the Designated Safeguarding Lead (DSL) within the setting
* Report concerns to the DSL in a timely manner
* Contact Clinical Supervisor for support

PTUK members working in Private Practice should:

* Undertake Safeguarding training including DSL training
* Write Safeguarding Policies and Procedures
* Manage disclosures in line with policy and procedures identified in this policy
* Store signed and dated records securely in line with General Data Protection Regulations (GDPR).

**Definition of a Child**

For the purpose of this policy, a child is a person under 18 years of age.

**What is Child Abuse?**

Child 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. We know that 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 and it

can increasingly happen online.

**Definitions of Abuse**

For the purpose of this policy safeguarding is defined as protecting children who maybe at

risk of exploitation (including radicalisation), domestic violence, harm, neglect or abuse.

Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm.

Children may be abused in a family or in an institutional or community setting by those known

to them or, more rarely, by others. Abuse can take place wholly online, or technology may be

used to facilitate offline abuse. Children may be abused by an adult or adults or by another

child or children.

**Domestic Abuse**

This is any type of controlling, bullying, threatening or violent behaviour between

people in a relationship. It is not just physical violence. Domestic abuse includes emotional,

physical, sexual, financial or psychological abuse. Abusive behaviour can occur in any

relationship. It can continue even after the relationship has ended. Both men and women can

be abused or abusers.

**Sexual Abuse**

A child is sexually abused when they are forced or persuaded to take part in

sexual activities. This does not have to be physical contact and it can happen online. Children

will often not realise that what is happening to them is abuse. Child Sexual exploitation is a

type of sexual abuse in which children are sexually exploited for money, power or status.

**Neglect**

This is the most common form of child abuse. 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 love, care and attention they need from parents

or carers. A child who is neglected will often suffer from other abuse as well. Neglect is

dangerous and can cause serious, long-term damage – even death.

**Online Abuse**

This is any type of abuse that happens on the web, whether through social networks,

playing online games or using mobile phones. Children and young people may experience

cyberbullying, grooming, sexual abuse, sexual exploitation or emotional abuse.

Children can be at risk of online abuse from people they know, as well as from strangers.

Children can feel there is no escape from online abuse as abusers can contact them day and

night and the abuse can come into the safe places like their bedrooms. In the UK ‘sex texting’

is a reportable offence so schools have a duty to report this to the police when found.

**Physical Abuse**

This is deliberately hurting a child causing injuries such as bruises, broken bones,

burns or cuts. It is not accidental. Children who are physically abused suffer violence such as

being hit, kicked, poisoned, burned, slapped or having objects thrown at them.

Physical harm may also be caused when a parent or carer fabricates the symptoms of, or

deliberately induces, illness in a child. This is known as Fabricated or Induced Illness (FII) There

is no excuse for physically abusing a child. It causes serious, and often long-lasting, harm –

and in severe cases, death.

**Emotional abuse**

This is the ongoing emotional maltreatment of a child. It is sometimes called

psychological abuse and can seriously damage a child’s emotional health and development.

Children who are emotionally abused are often suffering another type of abuse at the same

time – but this is not always the case. Emotional abuse can involve deliberately trying to scare

or humiliate a child or isolating or ignoring them.

**Bullying and cyberbullying**

Bullying is a behaviour that hurts someone else – such as name calling, hitting, pushing, spreading rumours, threatening or undermining someone. It can happen anywhere – at school, at home or online. It is usually repeated over a long period of time and can hurt a child both physically and emotionally. Bullying that happens online, using social networks is often called cyberbullying.

**Child trafficking and modern slavery are child abuse**

Children are recruited, moved or transported and then exploited, forced to work or sold. Children are trafficked for child sexual exploitation, benefit fraud, forced marriage, domestic servitude such as cleaning, childcare or cooking. Children are often forced into labour in factories or agriculture or criminal activity such as pickpocketing, begging, transporting drugs and bag theft.

**Grooming**

This is when someone builds an emotional connection with a child to gain their trust

for the purposes of sexual abuse, sexual exploitation or trafficking. Children can be groomed

online, face-to-face, by a stranger or by someone they know. This might be a family member,

friend or professional. Groomers might be male or female and can be any age. Many children

do not understand that they have been groomed or that what has happened is abusive.NSPCC (2018)

**Peer-on-peer sexual abuse**

This is sexual abuse that happens between children of a similar age or stage of development. It can happen between any number of children and can affect any age group (Department for Education (DfE), 2018). It can be harmful to the children who display it as well as those who experience it. NSPCC (2021)

**Concern about a child’s welfare**

If the therapist notices any indicators of abuse/neglect she should record these concerns and discuss them with her clinical supervisor. If working in a school or other setting she should discuss her concerns with the DSL.

**Procedures for managing a direct disclosure in an organisation**

* listen carefully and stay calm;
* make sure you have understood the matter under discussion, clarifying points if

necessary

* reassure the child that by telling you, they have done the right thing.
* give the child a chance to consent to share the information but tell them that you will need to share the information and inform them who you are going to tell
* take a note of the main points of conversation including names, times, dates, etc,

together with any injuries observed – complete a body map if appropriate (appendix a)

* pass on all information to the organisation’s Designated Safeguarding Lead
* contact your clinical supervisor

**Procedures for managing a direct disclosure in private practice**

* listen carefully and stay calm;
* make sure you have understood the matter under discussion, clarifying points if

necessary

* reassure the child that by telling you, they have done the right thing.
* give the child a chance to consent to share the information but tell them that you will need to share the information and inform them who you are going to tell
* take a note of the main points of conversation including names, times, dates, etc on a recording form (appendix b) - complete a body map if appropriate (appendix a)
* discuss concerns with parents and seek their consent for a MASH contact. Consent should not be sort if you believe that to do so would increase the risk to the child. If there is an immediate concern for the child’s welfare call 999.
* consider requesting a consultation with a MASH social worker to enable you to talk through concerns and consider if a MASH contact is appropriate. Plymouth Gateway Service 01752 668000 (option 1) or for the rest of Devon Multi-Agency Safeguarding Hub 0345 155 1071 or [mashsecure@devon.gov.uk](mailto:mashsecure@devon.gov.uk)

If a MASH contact is appropriate:

* complete a MASH contact form
* the children’s social care team will tell you what happens next, this might include Early

Help Assessment, Statutory assessments or Children in need

* contact your clinical supervisor

**Requirements to work with children**

To work in private practice PTUK members must have:

* An Enhanced DBS
* Be a Certified member of PTUK
* Be receiving clinical supervision
* Conduct the sessions in a safe environment
* Work within PTUK’s ethical framework
* Have adequate professional indemnity and public liability insurance
* Be a member of ICO
* Safeguarding training (Level 3, DSL) This should be undertaken every three years as a minimum
* Have a Safeguarding policy in place

**Safeguarding Complaint about a PTUK Member**

PTUK members work in isolation unsupervised with children, PTUK members follow and

implement the Ethical Framework when working therapeutically with children. PTUK believes

children have the right to be safe at all times. Where a safeguarding concern was reported to

PTUK Senior Management Team about a PTUK member the Procedure for Managing

Safeguarding Concerns Reported by a Members of the Public would be followed.