CarmDAS

Safeguarding Children and Young People Policy & Procedure

Policy Reviewed 30 Sept 2026 – next review 30 Sept 2028

Principle:	CarmDAS Safeguarding Children and Young People Policy underpins the protection and prevention from harm and abuse of Children and Young People
Purpose:	To outline CarmDAS' approach to duties to safeguard under the law and our commitment to improve the quality of support and safety of Children and Young People.
Applies to:	This policy applies to all staff and volunteers
Other Related Policies:	CarmDAS Client Handbook CarmDAS Safeguarding Adults Policy CarmDAS Complaints Policy CarmDAS Case Management Policy CarmDAS Intake Policy CarmDAS Eligibility Policy CarmDAS Confidentiality and Information Sharing Policy CarmDAS Equality & Diversity Policy CarmDAS Quality Assurance Policy CarmDAS Employee Handbook CarmDAS Domestic Abuse in the Workplace Policy CarmDAS Recruitment Policy CarmDAS Health & Safety Policy CarmDAS Boundaries Policy

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Introduction
CarmDAS Domestic Abuse Services (CarmDAS) is in contact with children and young people through its staff, clients, volunteers, and occasionally trustees. We recognise not only our responsibility to promote the welfare of children and young people and safeguard them from abuse and harm but to create a culture in which children are valued and their right to be safe is paramount.

We will ensure that all trustees, staff, and volunteers understand their roles and responsibilities, are well trained and are enabled to make confident and informed responses to child safeguarding issues.

This policy aims to provide guidance on what constitutes a safeguarding concern. The policy is only applicable to people under the age of 18 and should be read in conjunction with the separate organisational policies which include the prevention of suicide and self-harm, safeguarding adults, whistleblowing, and serious incidents.

Policy Principles
The principles underpinning our practice in the organisation are:
The welfare of the child is always paramount, and the child's voice is central to any decisions made about them.

- All children whatever their age, culture, language, gender, disability, ethnicity, religious beliefs, sexual identity have the right to be safeguarded from harm and abuse
- CarmDAS will work in a preventative way to prevent escalation of any issues
- All suspicions and allegations of abuse will be taken seriously and responded to swiftly and appropriately
- All trustees, staff and volunteers working with CarmDAS have a responsibility to report concerns in accordance with this policy and the procedures within it.
- CarmDAS will work with other agencies as appropriate in order to safeguard a child/children they have contact with or the child/children of an adult they are supporting.

Safeguarding and Definitions
Safeguarding is a term which is broader than 'child protection' as it also includes prevention. Safeguarding and promoting the welfare of children is defined for the purpose of statutory guidance under the Social Services and Wellbeing (Wales) Act 2014 (SSWBA 2014) and replaces some provisions in the Children Act (1989 & 2004).

The guidance issued under this Act entitled Working Together to Safeguard People: Volume 1 defines safeguarding as:

- protecting children from maltreatment;
- preventing impairment of children's health or development;
- ensuring that children are growing up in circumstances consistent with the provision of safe and effective care; and
- undertaking that role to enable those children to have optimum life chances and to enter adulthood successfully.

The SSWBA (2014) requires all agencies working with children, young people, and their families to take all reasonable measures to ensure that the risks of harm to children's welfare are minimised. Where there are concerns about children's welfare, all agencies should take appropriate actions to address those concerns, working to agreed local policies and procedures in full partnership with other local agencies.

In the initial stages of working with a family, all clients should be provided with information on the role and responsibilities of children's services. This should be delivered in a time-sensitive manner, and the information should be shared when a rapport has been built between the support worker and the client to avoid causing them any unnecessary concern.

What is a child?
Under the terms of the SSWBA Act (2014) anyone under the age of 18 is considered to be a child. In this policy, when referring to any person under the age of 18, the term 'child' or 'children' will be used throughout.
CarmDAS staff, volunteers and associates may come across child safeguarding concerns in their various roles and activities when:

- Undertaking scoping analysis with adults and children
- Undertaking 1-2-1 support with a child
- Undertaking group support/ intervention with a child and/or parent
- Engaging in conversation with adults or other professionals about the child/family
- Providing direct helpline services to adults and children
- Providing online services to adults and children
- Delivering awareness raising programmes to children and young people in community settings
- Receiving calls/emails from members of the public
- Delivering training, events and/or research and campaigns with professionals or community members

Definitions of Abuse
Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child either directly by inflicting harm, or indirectly, 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 a stranger. They may be abused by an adult or adults, or another child or children. Abuse can take place wholly online, or technology may be used to facilitate offline abuse.

Physical abuse means deliberately hurting a child or young person. It includes:

- physical restraint; such as being tied to a bed, locked in a room
- inflicting burns
- cutting
- slapping
- punching
- kicking
- biting
- choking
- stabbing or shooting
- withholding food or medical attention

- drugging
- denying sleep
- inflicting pain
- shaking or hitting babies
- fabricating or inducing illness (FII) (RCPCH, 2009). Occurs when a carer actively promotes the sick role of a child by exaggeration, non-treatment of real problems, fabrication (lying) or falsification of signs, and/or induction of illness.

Emotional abuse is the ongoing, persistent, emotional maltreatment of a child. It's sometimes called psychological abuse and can seriously damage a child's emotional health and development. Emotional abuse can involve deliberately trying to scare or humiliate a child or isolating or ignoring them. Children who are emotionally abused are often suffering another type of abuse or neglect at the same time.

Emotional abuse includes:

- humiliating or constantly criticising a child
- threatening, shouting at a child or calling them names
- making the child the subject of jokes, or using sarcasm to hurt a child
- blaming, scapegoating
- making a child perform degrading acts
- not recognising a child's own individuality, trying to control their lives
- pushing a child too hard or not recognising their limitations
- exposing a child to distressing events or interactions such as domestic abuse or drug taking
- failing to promote a child's social development
- not allowing them to have friends
- persistently ignoring them
- being absent
- manipulating a child
- never saying anything kind, expressing positive feelings or congratulating a child on successes
- never showing any emotions in interactions with a child, also known as emotional neglect.

Sexual Abuse

Under UK law, no person under the age of 16 has the legal capacity to consent to sexual activity. This is an absolute rule aimed at protecting children from sexual exploitation and abuse. Any sexual activities involving individuals below this age are considered unlawful and will be subject to mandatory reporting to the appropriate legal authorities.

There are 2 different types of child sexual abuse. These are called contact abuse and non-contact abuse.

Contact abuse involves touching activities where an abuser makes physical contact with a child, including penetration. It includes:

- sexual touching of any part of the body whether the child's wearing clothes or not

- rape or penetration by putting an object or body part inside a child's mouth, vagina or anus
- forcing or encouraging a child to take part in sexual activity making a child take their clothes off, touch someone else's genitals or masturbate.

Non-contact abuse involves non-touching activities, such as grooming, exploitation, persuading children to perform sexual acts over the internet and flashing. It includes:

- encouraging a child to watch or hear sexual acts
- not taking proper measures to prevent a child being exposed to sexual activities by others
- meeting a child following sexual grooming with the intent of abusing them
- online abuse including making, viewing or distributing child abuse images allowing someone else to make, view or distribute child abuse images showing pornography to a child
- sexually exploiting a child for money, power or status (child exploitation)

Child Sexual Exploitation (CSE) is a form of sexual abuse. A young person is forced or persuaded to take part in a sexual act (including sharing images) in exchange for something – this could include affection, gifts, drugs/alcohol, accommodation, friendship, or money. The young person may be forced or threatened or may believe they are in a consensual relationship with the other person.

Neglect

Child neglect is a failure on the part of either the male and/or female caregiver or pregnant mother to complete the parenting tasks required to ensure the developmental needs of the child are met. This failure may be associated with parenting issues such as such a drug and alcohol misuse. Neglect should be differentiated from poverty and occurs despite reasonable resources being available to enable the carer/s to complete the parenting tasks to a good enough standard. Whilst neglect is likely to be ongoing and cause cumulative harm one-off incidents and episodic neglect can affect the health and development of the child.

There are a range of parenting behaviours that can be described as neglect:

- Medical neglect: a failure to seek and provide appropriate medical, dental and optical care
- Nutritional neglect: occurs when the carer fails to pay sufficient attention to the diet for the child who may become obese or fail to thrive
- Supervisory neglect: happens when the carer fails to provide the level of guidance and supervision that ensures the child is safe and protected from harm
- Educational neglect: is more than securing school attendance it includes a failure on the part of the carer to provide an environment allowing the child to achieve their cognitive potential
- Physical neglect: happens when the child does not receive appropriate physical care necessary for their age and development and/or where the child lives in a physical environment that is not conducive to their health and development healthy and/or is unsafe

- Identity neglect: occurs when a parent or carer fails to recognise or address the child or young person's needs in terms of, for example, culture, religion, gender and sexuality.

Bullying may be defined as deliberately hurtful behaviour, usually repeated over a period of time, where it is difficult for those bullied to defend themselves. It can take many forms, but the three main types are physical (e.g. hitting, kicking, theft), verbal (e.g. sexist, racist, or homophobic remarks, threats, name calling) and emotional (e.g. isolating an individual from the activities and social acceptance of their peer group).
The damage inflicted by bullying can frequently be underestimated. It can cause considerable distress to children to the extent that it affects their health and development or, at the extreme, causes them significant harm (including self-harm).

Domestic Abuse
The Domestic Abuse Act 2021. Children who live in a home where domestic abuse takes place are recognised as victims in their own right rather than witnesses for the first time.

The Bill recognises a child who sees, hears, or experiences the effects of domestic abuse and is related to the person being abused or the perpetrator, as a victim of domestic abuse.

This places a duty on local authorities to provide support to victims of domestic abuse and their children in refuges and other safe accommodation. This bill increases protections for families affected by domestic abuse under Domestic Abuse Protection Orders and the Domestic Violence Disclosure Scheme.

Children experiencing domestic abuse in their own dating relationships should also receive support and safeguarding from the local authority under the Children's Act (1989 & 2004).

Honour-based violence is a crime or incident, which has or may have been committed to protect or defend the 'honour' of the family and/or community. It is not a form of violence, but the reason or motive given or assumed for violence. It is a fundamental abuse of human rights and should be viewed as a child protection issue.

Honour based violence manifests itself in a diverse range of ways with children including forced marriage, rape, physical assaults, kidnap, threats of violence (including murder), female genital mutilation or witnessing violence directed towards a sibling or another family member.

Whilst it can sit within the framework of domestic abuse as much of the violence does originate from intimate partners and the immediate family, further violence can be instigated by extended family and members of the community who support the family's actions or collude in or perpetrate the violence on behalf of the family.

Forced Marriage
Children can also be subjected to abuse perpetrated in order to force them into marriage.

A forced marriage is defined as a marriage conducted without the valid consent of both parties, where one or both spouses do not consent to the marriage and duress is involved. Duress can include physical, psychological, financial, sexual, and emotional pressure.

The Forced Marriage (Civil Protection) Act (2007) makes provision for protecting children into marriage without their free and full consent. It gives the courts a wide discretion to deal flexibly with each individual case, employing civil remedies that offer protection to victims without criminalising family members.

Female Genital Mutilation (FGM) is illegal and is prohibited by the Female Genital Mutilation Act (2003). It is acknowledged that some families see FGM as an act of love rather than cruelty, however, FGM causes significant harm both in the short and long term and constitutes physical and emotional abuse to children. FGM is an offence, which extends to acts performed outside of the United Kingdom. Any person found guilty of an offence under the Act will be liable to a fine or imprisonment up to 14 years, or both.

If a woman has already undergone FGM and this comes to the attention of any professional, consideration needs to be given to any child protection implications, e.g. for younger siblings, extended family members and a referral made to social services or police if appropriate. If the woman is the mother of a female child or has the care of female children, a referral to Social Services should be made. This will help to identify the most appropriate way of informing parents of the legal and health implications of FGM and assessing the potential risk to female children in the family.

Grooming is when a person builds a relationship with a child, young person or an adult who is at risk so they can abuse them and manipulate them into doing things. The abuse is usually sexual or financial, but it can also include other illegal acts.

Child Criminal Exploitation as set out in the Serious Violence Strategy published by the Home Office, is where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial or other advantage of the perpetrator or facilitator and/or (c) through violence or the threat of violence. The victim may have been criminally exploited even if this only undertaken through the use of technology.

Guidance for Staff, Volunteers and Trustees
This section provides a synopsis of the CarmDAS Safeguarding Children policy and procedure. Appendix 1 of this document contains flow charts that detail procedures to follow in relation to safeguarding children. Staff must download the Wales Safeguarding Procedures on their work mobile phones and laptop https://socialcare.wales/cms-assets/documents/16.-Wales-Safeguarding-Procedures-app-activities.pdf.

Dealing with Disclosures

Identifying Abuse or Maltreatment
Suspected abuse may be identified in the following ways:

- witnessing abuse or maltreatment of a child or young person
- receiving information about abuse, suspected abuse or concerns about the care or treatment of a child from another person or agency
- having concerns or suspicions about possible abuse or inappropriate care
- seeing evidence of abuse such as bruises which are not normally caused by falling over, burns or other unusual marks or injuries
- noticing behaviour or appearance that gives cause for concern with no satisfactory explanation
- noticing interactions between an adult and a child which give cause for concern
- It is important not to immediately assume that any of the indicators within the above list automatically mean that abuse is taking place. There may be other reasons. But it is essential to be aware of the possibility that abuse may be taking place and to take action where there are concerns. You should also discuss concerns with your direct line manager or dedicated safeguarding lead.

Responding to a disclosure of abuse or/and neglect
The NSPCC has created a short video resource with advice and guidance on how to respond to a child's disclosure of abuse, which staffs. This is a useful resource for staffs, trustees, and volunteers to prepare them for disclosures of abuse.
https://www.youtube.com/watch?v=bvJ5uBlGYgE

If receiving a disclosure of abuse or neglect from a child or young person, Staff and volunteers should follow the following guidelines:

- Stay calm and adopt a 'believing' approach.
- Acknowledge the abuse.
- Speak in private, unless there are safety concerns, then ensure you have a staff with you
- Listen carefully and make sure the child or young person knows they are being taken seriously regardless of the nature of their concern.
- Show sympathy and concern.
- Clarify key basic details, for example, timelines and physical evidence, while adopting a supportive approach that allows the child to feel genuinely heard without feeling pressured or led. It is crucial that the child's words are their own and that they perceive the conversation as a safe space for honest expression.
- Explain what you are going to do next.
- Remind the child or young person that confidentiality can be broken if you fear there is a risk to them or others.
- Make sure emergency services are called if required.
- Document carefully what the child or young person has told you, use the child's own words/ language as much as possible.
- Ensure the safeguarding report is entered onto Oasis and the Safeguarding Lead is notified of the concern.

- Seek support from your line manager or direct Safeguarding Lead
- Maintain boundaries.
- Make sure records are kept secure.
- Determine immediate safety concerns – if child is at immediate significant risk of harm call the police and report to Children's Services (see appendices 1 & 2 for Process)

In some circumstances, the children making a disclosure will do so whilst on the premises of another organisation or service, for example school. In this case, these concerns should also be reported to the dedicated Safeguarding Lead of said organisation and inform them of the actions that you are going to take as mentioned above.

Disclosure of historic abuse will follow the same process. This is to ensure that the child is currently safe and other children or vulnerable adults are prevented from further harm.

Gaining Consent

- Confidentiality and the limitations of confidentiality should always be discussed during the initial meeting with the parent and/or the child. This should be explained in an age-appropriate manner.
- The welfare of the child is paramount, and staffs have a duty to pass on information relating to suspected child abuse to Children's Social Care (Section 47 of the Children Act 1989).
- Staffs can obtain consent from the parent/guardian or child (where appropriate and safe to do so) in order to share information.

However, consent is not required if:

- Seeking permission is likely to increase risk to a child/the child is at immediate risk of harm.
- Permission has been refused but sufficient professional concern remains to justify disclosure
- Seeking permission is likely to impede a criminal investigation

Reporting a disclosure.

You should follow the below guidance when reporting a safeguarding disclosure:
If abuse or neglect has been disclosed, you have a legal duty and obligation to report the concern.

If another professional or a client has stated that they have already raised the concern, you must still raise a concern yourself. You have an obligation to raise your own concerns, so it is imperative that you do not take this information lightly.

You must inform your line manager/direct safeguarding lead unless there is an emergency taking place and you need to call emergency services (999, police, ambulance, or fire service).

Your direct safeguarding lead/ line manager will provide you with support and further guidance if necessary.

You will then need to raise the concern both internally and externally. Details of the concerns must be recorded on the safeguarding tab within Oasis client management system and flagged on the system. Any Social Services Involvement needs to be added to each child's information tab in addition.

If you do not have contact details for a client (for instance they have sent in an email or called in but not disclosed personal details), send what you have as local authority children services/police they may be able to identify the person through their phone number or email address.

Reporting the Safeguarding Concern Externally
Once you and your direct safeguarding lead/ line manager have decided that the safeguarding concern meets the threshold, you must report the concern immediately to the local authority children services.

The concern must be reported to the local authority in which the abuse or neglect took place.

- If self-harm or suicidal ideation is disclosed, you must report this, local authority children's services. We would continue to support the client to access appropriate health services. Read the Suicide and Self Harm Prevention policy to remind yourself of the process.
- Each local authority has their own safeguarding concern form. You must ensure you fill in this form and send it back to the address on the form.
- You must send all forms by a secure private method typically by email as agreed with Children's Services protocols. All documents will be password protected.
- Once you have submitted the report, you will need to check within 24 hours that it has been received.
- You should have a debrief with your line manager the next day after a disclosure.
- Refer child and/or parent to local support services if appropriate.

Disclosures made against Staff.
If there is an allegation or concern raised against any staff that works with children internally or externally, or if you have concerns about a staff's behaviour, this must be reported directly to the designated Safeguarding Lead. These concerns must then be submitted to the CEO and reported to:

- Central Referral Team on 01554 742322
- Emergency Duty Team on 03003332222 (Out of Hours).

Concerns about the CEO or Designated Safeguarding Lead will be reported directly to the Board of Trustees who will follow the same procedure.

CarmDAS will fully comply with any investigation undertaken by the police or social services. All allegations will be reported to the trustee board. A disciplinary procedure may need to be undertaken and staffs may be suspended whilst the investigation takes place. Policy and procedures may need to be reviewed after the investigation to ensure further risks are mitigated in the future.

Multi Agency Working Collaboration and Communication
Our organisation is committed to fostering strong collaborative relationships with a wide range of agencies to ensure the safety and well-being of children and young people. Staffs are expected to actively participate in multi-agency meetings and contribute to safeguarding of Children and Young People. Clear and open communication with our partners, including local authorities, health services, schools, and police, is essential for effective safeguarding. All collaborative efforts will align with the Wales Safeguarding Procedures to ensure consistency and compliance.

Information Sharing
Timely and accurate information sharing is crucial in safeguarding children and young people. Staffs must adhere to data protection guidelines while ensuring that relevant information is shared with appropriate agencies to prevent harm. The Wales Safeguarding Procedures provide a framework for information sharing that staff must follow to ensure that any concerns about a child's welfare are communicated promptly and effectively.

Communication with Families
Effective safeguarding involves transparent and respectful communication with the families we support. Staffs are expected to inform families about the multi-agency approach and the reasons for sharing information with other agencies. This communication should be conducted in a manner that respects the family's dignity and privacy, while also ensuring they understand the safeguarding measures being taken. Whenever possible, staffs should seek the family's consent for information sharing, except where doing so would place the child at further risk, as guided by the Wales Safeguarding Procedures.

Accountability and Responsibility
Staff are expected to take an active role in multi-agency initiatives and demonstrate accountability in their safeguarding duties. This includes attending relevant meetings, contributing to multi-agency plans, and following through on agreed actions. Each staff has a responsibility to ensure that they are informed about the current procedures and protocols, including those set out in the Wales Safeguarding Procedures, and to seek clarification when necessary.

Responsibilities and Commitments
CarmDAS will ensure that:

- They uphold the principles of the United Nations Convention on the Rights of the Child, in particular Articles 2,12,19 and 34 (see appendix 4).
- Guidance and responsibilities are upheld in relation to the Children Act 1989 and 2004 as well as those outlined in the Wales Safeguarding Procedures 2019 and the Social Services and Well-being (Wales) Act 2014.
- All Staffs members including volunteers must have access and use of the Wales Safeguarding Procedures app. https://socialcare.wales/cms-assets/documents/16.-Wales-Safeguarding-Procedures-app-activities.pdf
- That all children receive a service that is safe, secure, meets their needs and is trauma informed, needs-led and strengths based.

- That there is a clear line of accountability in place designed to safeguard children and families.
- There is a senior board member who will take leadership responsibility for safeguarding arrangements.
- A dedicated Safeguarding Lead –The Operations Manager and CEO are designated as the primary safeguarding leads for CarmDAS. This designation is explicitly included in their job descriptions to ensure clarity of roles among all staff. All Team Leaders undergo Designated Safeguarding Person Training and in the absence of the Operations Manager and CEO. Team Leaders will assume the lead role. Staffs will be promptly informed about who is the acting safeguarding lead during such periods.
- There is a culture of listening to children which includes co-production based on their wishes, wants and needs.
- A clear process is in place to ensure information is shared safely with other professionals and local safeguarding hubs.
- All staff and volunteers undertake mandatory induction training which includes time to understand policy and procedures and undertake essential training requirements.
- Staff training should be inclusive of the risks harmful practices pose to clients particularly for those that have experienced Female Genital Mutilation (FGM), forced marriage and so-called honour-based abuse. The training should give Staffs the knowledge of how to understand different cultures and/or faiths of children and their families and communities. It should equip Staff with understanding the benefits and challenges that this may present, including the likelihood of risk occurring.
- All Staff and volunteers undertake refresher training in safeguarding and child protection every three years.
- All Staff and volunteers within the organisation will comply with the policies and procedures outlined and it is endorsed and understood by all.
- All Staff and volunteers within the organisation have signed up and have been vetted by the Disclosure and Barring Service and have an up-to-date DBS certification.
- All Staff and Volunteers will be required to complete a Safeguarding Self-Disclosure from prior to starting.
- Staff and volunteers have access to regular and supportive supervision on a frequent basis. This is an opportunity to review safeguarding procedures and disclosures made to staff through supervision and de-brief sessions within Teams.
- Risk analyses are completed in relation to any risk to children and strategies are implemented to minimise risks.
- Annual reporting incorporates any safeguarding risks and referrals, and a review is undertaken to ensure that the most effective measures are in place to protect children and families.
- When working with other agencies, the organisation will follow its own line of policy and procedures that are in the best interest of the child.
- If another agency does not have a Safeguarding for Children policy, then they should use CarmDAS's policy as default.
- We work effectively and liaise with other agencies to ensure that children's safety is paramount, and their needs are always being prioritised.

- Ensure that all clients are aware of the role and remit of children's services.
- Responsibilities and Commitments of the Individual

All staff, volunteers and trustees are expected to:

- Prevent abuse and neglect from occurring.
- Abide by the code of conduct and ensure that their position support and help children and do not use their position to manipulate, abuse or exploit children.
- Always maintain professional boundaries and accept that you only have a temporary relationship with the children you engage with.
- Ensure that a child's needs are always prioritised.
- Ensure that you are aware of all the risks that may affect children.
- Respect and empower children to ensure that they are given the most effective support for them.
- Always act in a timely manner, especially when suspected risk or abuse is in question and being investigated.
- Recognise that some children are at risk of abuse and/or neglect from their own parents and are not being protected by their parents. A child's safety should always be prioritised over all other support methods and interventions.
- Agencies like social services and others, are kept up to date with any concerns that you may have about the child or families even if the case is already open to their support.

Board of Trustees

The Board of Trustees holds ultimate responsibility for ensuring that the organisation upholds its safeguarding obligations to protect everyone who encounters their organisation from harm. Their key responsibilities include:

- Strategic Oversight: Ensuring adult safeguarding is embedded within the organisation's strategic priorities and risk management frameworks.
- Policy Approval: Reviewing and approving the adult safeguarding policy and any updates or amendments to reflect best practice and legislative changes.
- Governance and Accountability: Monitoring safeguarding practices through regular reports and ensuring robust governance structures are in place.
- Culture of Safeguarding: Promoting a culture where safeguarding is recognised as everyone's responsibility and the organisation remains proactive in protecting adults at risk. Making sure everyone in their organisation is aware of their safeguarding responsibilities and knows how to respond to concerns.

Chief Executive Officer (CEO)

The CEO is responsible for the operational implementation of the safeguarding policy across the organisation. Specific responsibilities include:

- Policy Leadership: Ensuring the safeguarding policy is effectively implemented and adhered to across the organisation.
- Risk Management: Overseeing safeguarding risks, ensuring they are properly managed, and escalating concerns to the Board of Trustees when necessary.

- Resource Allocation: Ensuring sufficient resources (training, time, personnel) are allocated to safeguarding initiatives.
- Incident Oversight: Ensuring safeguarding incidents are reported and addressed in a timely, appropriate manner, in line with statutory requirements.

CarmDAS Designated Safeguarding Person (DSP)
The Designated Safeguarding Person (Operations Manager) is tasked with the following responsibilities:

- Point of Contact: Acting as the primary point of contact for safeguarding concerns and liaising with external agencies such as local authorities and police as needed.
- Incident Management: Coordinating responses to safeguarding concerns and ensuring all incidents are logged and managed appropriately.
- Training and Guidance: Ensuring all staff receive appropriate safeguarding training and are aware of their responsibilities and procedures.
- Policy Review: Leading on the periodic review of safeguarding policies and procedures, ensuring compliance with relevant legislation.
- Supporting the CEO: Assisting the CEO in the management of safeguarding risks and providing regular updates to the Board of Trustees.

Management Team
The Management Team plays a critical role in embedding safeguarding into everyday operational practices. Their responsibilities include:

- Operational Oversight: Ensuring safeguarding procedures are integrated into day-to-day operations across their departments and teams.
- Supporting Staff: Providing support and guidance to staff in handling safeguarding concerns and referring issues to the DSP when necessary.
- Monitoring and Reporting: Regularly monitoring safeguarding issues within their areas of responsibility and reporting these to the DSP.
- Role-Modelling: Promoting best practices in safeguarding, acting as role models for other staff in ensuring the safety and wellbeing of adults at risk.
- Training Oversight: Ensuring that their teams are up-to-date with mandatory safeguarding training and any updates to relevant procedures.
- Staff and Volunteers

All staff and volunteers, have a duty to actively contribute to safeguarding within the organisation. Their responsibilities include:

- Awareness and Reporting: Being aware of and alert to signs of abuse, neglect, or exploitation, and reporting any concerns to the Designated Safeguarding Person immediately.
- Compliance: Adhering to the safeguarding policy and attending relevant training sessions to maintain awareness of current safeguarding practices.
- Promoting Safe Practices: Ensuring that their own work is conducted in a way that prioritises the safety and wellbeing of adults at risk.
- Cooperation: Cooperating fully with investigations into safeguarding concerns and following guidance provided by the Designated Safeguarding Person.

Working with partner organisations

- Agreements with any partner organisations must include the procedures and lines of reporting in relation to the safeguarding of children. It is likely that CarmDAS Staff will sometimes work to the partner's procedures, and it will be important to check that they reflect the key issues raised in this document.
- In the event of CarmDAS working with partner agencies, a written agreement must be created specifying the arrangements for safeguarding children and the process to be followed in the event of concerns about any child safeguarding matters. This should be compatible with the Wales Safeguarding Procedures 2020.

Procedures

Suspected breaches of policy and procedures
Staff have a duty to inform their line manager if a breach of the policy or procedure has occurred. It is encouraged within the organisation that Staffs should feel comfortable and confident to express their concerns to management.
GDPR and Data Sharing.

The GDPR and Data Protection Act (2018) and Human Rights law are not barriers to justified information sharing. This means agencies can share information, seek advice, and share information without consent if it relates to the safety and wellbeing of others and is deemed necessary and is proportionate, relevant, adequate, accurate, timely and secure and the reasons for doing so are documented.

Further Information

Further information around the safeguarding and protection of children from abuse can be found at:
Wales Safeguarding Procedures www.safeguarding.wales 2019 - Procedures for practitioners working with Children and Young People at Risk of Harm covering:

- Safeguarding children from Child Criminal Exploitation
- Safeguarding children from abuse related to cultural and religious beliefs.
- Safeguarding children who may be trafficked
- Safeguarding children affected by domestic abuse.
- Safeguarding children from child neglect
- Safeguarding children where there are concerns about Harmful Sexual Behaviour
- Safeguarding children who are home educated
- Safeguarding children who go missing from home or care
- Safeguarding children from Child Sexual Exploitation
- Safeguarding children from abuse related to cultural and religious beliefs.
- Safeguarding children who may be trafficked

Policy Review

- This policy and related procedures will be reviewed every two years. Amendments will be made in line with changes in legislations, law, regulations, and good practice guidelines as and when needed.
- This policy is available on our website and is made available at the client's request.
- This policy will be reviewed by the CEO
- CarmDAS will involve clients in the review of this policy through the Peer Support or other relevant client involvement mechanisms.

Policy Review Date 30.9.2028

Signed

Name (Removed for Confidentiality)

Role / Date Chair of Trustees / 30.9.2026

Appendix 1: Flowchart for responding to Disclosures
The Designated Safeguarding Person for CarmDAS is the Operations Manager or the, CEO in her absence. Team Leaders who have received designated safeguarding training will stand in during any absences. The trustee board has a designated Safeguarding Lead.

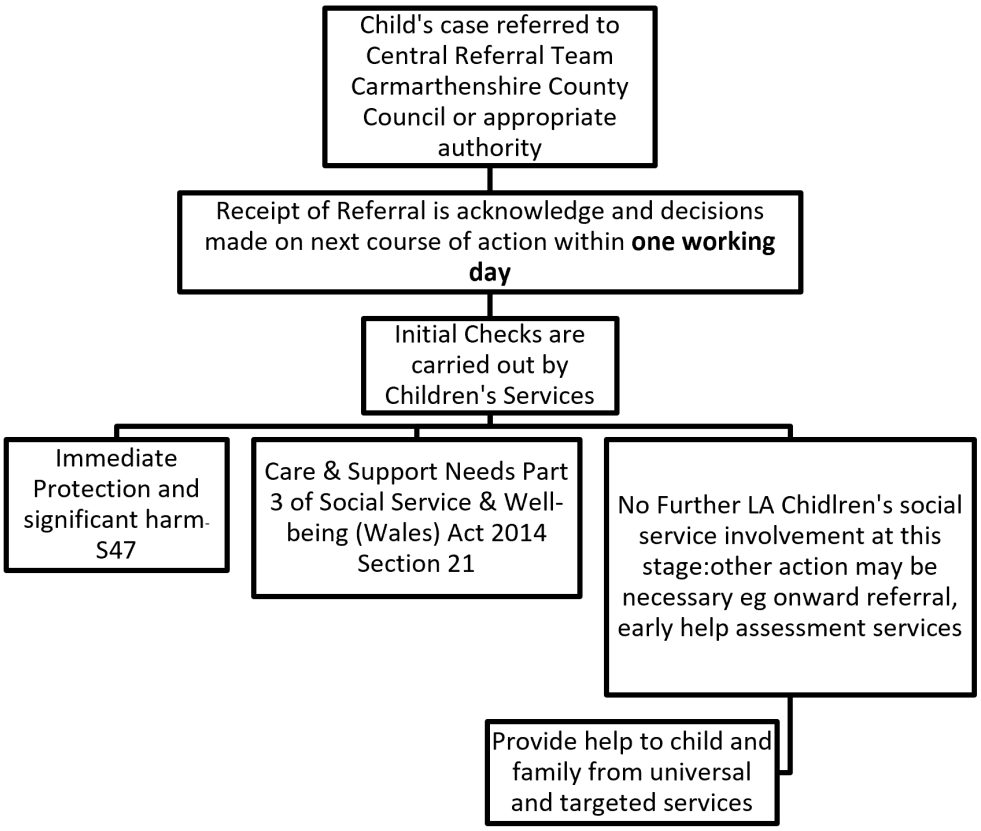
The flow chart below sets out how you respond to any concerns raised about a child at risk of or experiencing abuse. Speak to the Designated Safeguard Officer Lead for further guidance, if appropriate.

Making Referrals
All Child Protection work depends on clear, accurate and complete record keeping. It is essential to have information recorded whilst dealing with a child protection concern as soon as possible during or immediately following the telephone call. This should be recorded on Oasis Client Management System. Referrals if urgent can be made by telephone call to notify Social Services but must be followed up by emailing with a MARF - a multi-agency referral form to Social Services, Social Services emergency duty service if out of hours or the Police. All MARFS must be checked by a DSO before being submitted.

The following information should be given on the MARF:

- The reason for the concerns.
- The full name, address, and date of birth (or age) of the child.
- The names, addresses and dates of birth of family members, along with any other names, which they use or are known by.
- The names of all those with parental responsibility.
- The names of other professionals involved with the family, including the name of the child's school and GP.
- Any information that could potentially cause any risk of harm/safety to staff

Referral to Children's Services Process



Appendix 2 Resources Contacts, Information & Forms

Carmarthenshire Contact Information for Referrals Multi Agency Referral Form (MARF)
Carmarthenshire Safeguarding Team for Children and Young Person Multi Agency Referrals should be sent to:
CRTChildren@carmarthenshire.gov.uk

Children's Services Central Referral Team at 01554 742322

Childrens MARF Childrens MARF (003)

Can be found saved in Oasis Group Documents and on Shared Drive:
Carmarthen Domestic Abuse Services\CDAS Sharepoint - Shared\Referrals\Marf referrals\Childrens MARF.docx"

The Carmarthenshire Safeguarding Team operates under the Mid and West Wales Safeguarding Board, ensuring statutory partnership and coordinated safeguarding across the region

Wales Safeguarding Procedures
These are the national Wales Safeguarding Procedures. They detail the essential roles and responsibilities for practitioners to ensure that they safeguard children and adults who are at risk of abuse and neglect.

These procedures are intended to guide safeguarding practice for all those employed in the statutory, third (voluntary) and private sector in health, social care, education, police, justice and other services. They are applicable for all practitioners and managers working in Wales - whether employed by a devolved or non-devolved agency. They aim to ensure that practitioners understand their role and responsibilities and know which organisation, team or practitioner has lead responsibility for safeguarding as well as the precise roles of everyone involved; Provide guidance to practitioners in contact with adults at risk of abuse and neglect enabling them to identify and address the adult's care, support and protection needs. Ensure practice is in accordance with the legislative requirements and expectations of the Social Services and Well-being (Wales) Act 2014 and the accompanying Working Together to Safeguard People guidance; Safeguarding Wales

Appendix 3: United Nations Convention on the Rights of the Child

Article 2

States parties shall respect and ensure the rights set forth in the present convention to each child within their jurisdiction without discrimination of any kind, irrespective of the child's or his or her parent's or legal guardian's race, colour, sex, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status.

States parties shall take all appropriate measures to ensure that the child is protected against all forms of discrimination or punishment on the basis of the status, activities, expressed opinions, or beliefs of the child's parents, legal guardians, or family members.

Article 12

States parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child.

For this purpose, the child shall in particular be provided the opportunity to be heard in any judicial and administrative proceedings affecting the child, either directly, or through a representative or an appropriate body, in a manner consistent with the procedural rules of national law.

Article 19

States parties shall take all appropriate legislative, administrative, social, and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment, or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child.

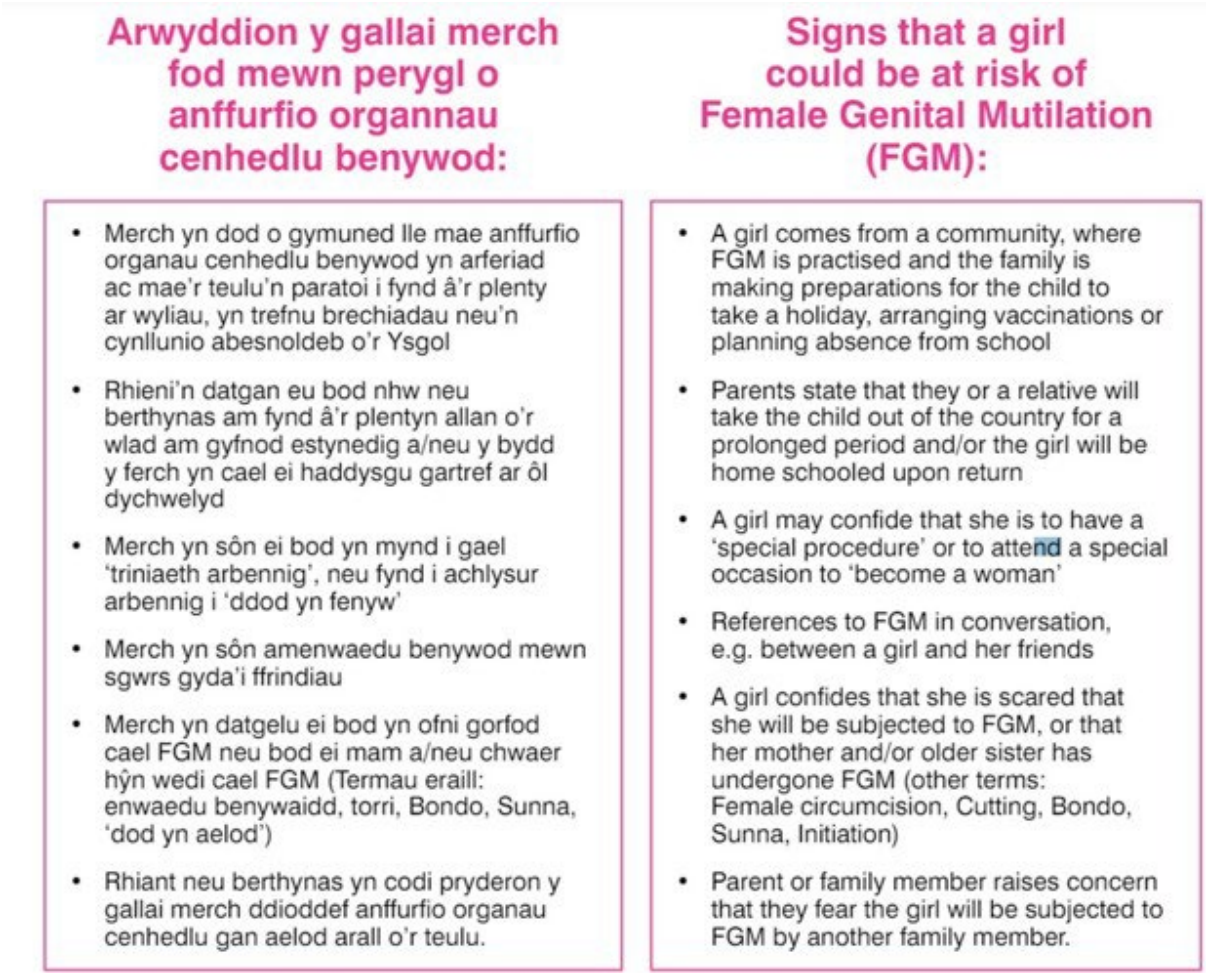
Such protective measures should, as appropriate, include effective procedures for the establishment of social programmes to provide necessary support for the child and for those who have the care of the child, as well as for other forms of prevention and for identification, reporting, referral, investigation, treatment and follow-up of instances of child maltreatment described heretofore, and, as appropriate, for judicial involvement.

Article 34

States parties undertake to protect the child from all forms of sexual exploitation and sexual abuse. States parties shall in particular take all appropriate national, bilateral, and multilateral measures to prevent:

- The inducement or coercion of a child to engage in any unlawful sexual activity;
- The exploitative use of children in prostitution or other unlawful sexual practices;
- The exploitative use of children in pornographic performances and materials.

Appendix 4: Wales Safeguarding Procedures 2019- Flow Chart for FGM and Forced Marriage.

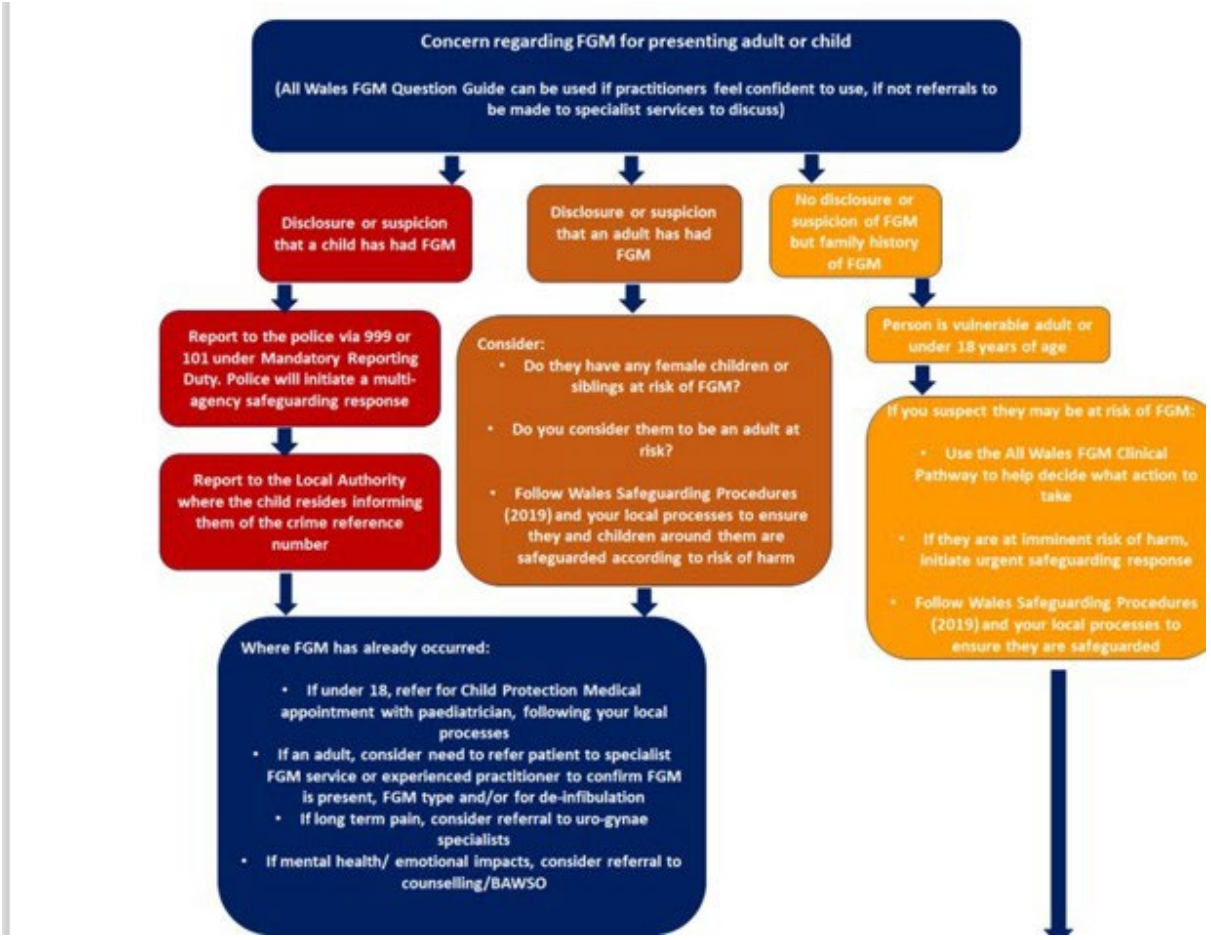


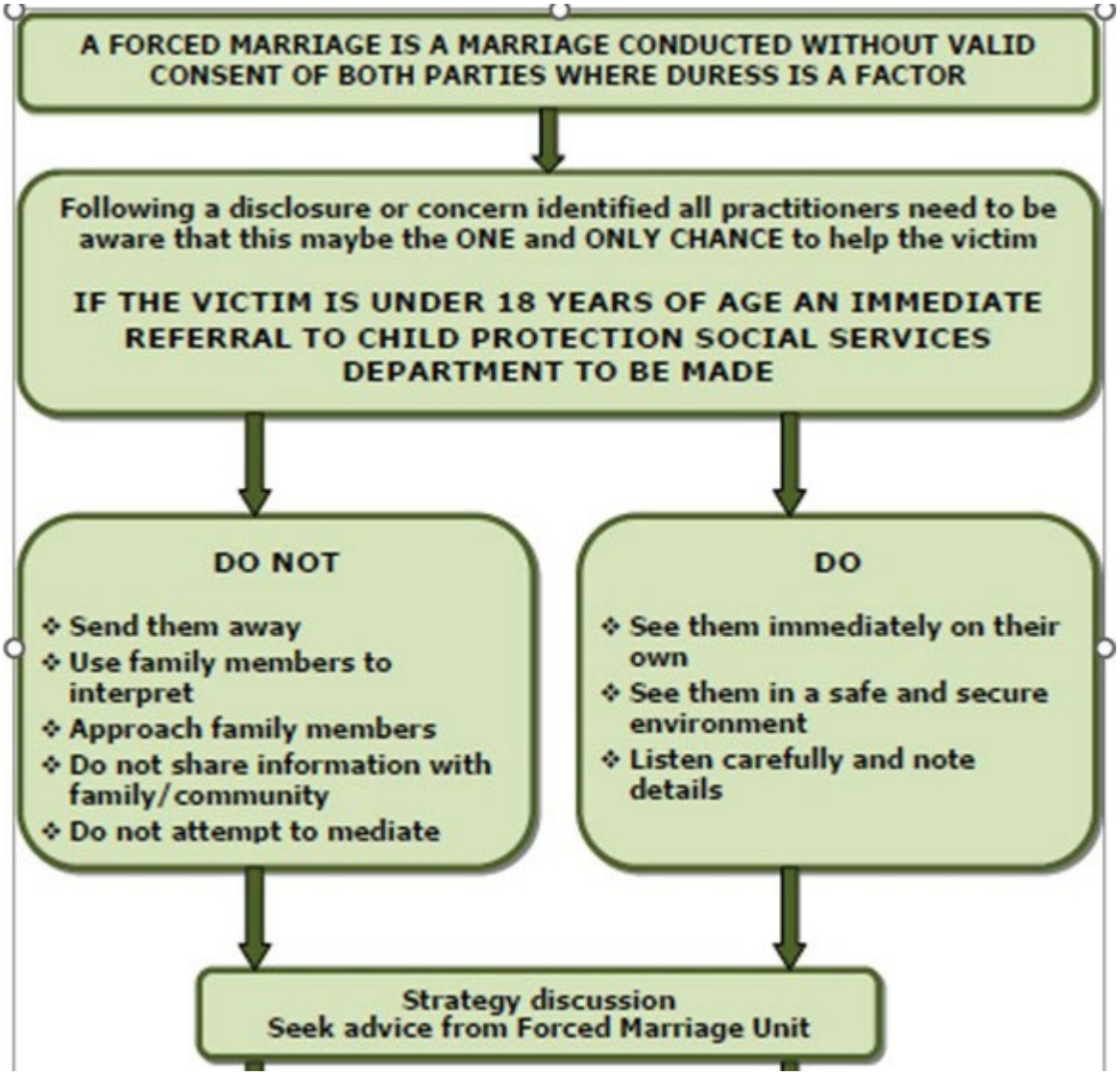
Arwyddion y gallai merch fod mewn perygl o anffurfio organnau cenhedlu benywod:

- Merch yn dod o gymuned lle mae anffurfio organau cenhedlu benywod yn arferiad ac mae'r teulu'n paratoi i fynd â'r plenty ar wyliau, yn trefnu brechiadau neu'n cynllunio abesnoldeb o'r Ysgol
- Rhieni'n datgan eu bod nhw neu berthynas am fynd â'r plentyn allan o'r wlad am gyfnod estynedig a/neu y bydd y ferch yn cael ei haddysgu gartref ar ôl dychwelyd
- Merch yn sôn ei bod yn mynd i gael 'triniaeth arbennig', neu fynd i achlysur arbennig i 'ddod yn fenyw'
- Merch yn sôn amenwaedu benywod mewn sgwrs gyda'i ffrindiau
- Merch yn datgelu ei bod yn ofni gorfod cael FGM neu bod ei mam a/neu chwaer hŷn wedi cael FGM (Termau eraill: enwaedu benywaidd, torri, Bondo, Sunna, 'dod yn aelod')
- Rhiant neu berthynas yn codi pryderon y gallai merch ddioddef anffurfio organau cenhedlu gan aelod arall o'r teulu.

Signs that a girl could be at risk of Female Genital Mutilation (FGM):

- A girl comes from a community, where FGM is practised and the family is making preparations for the child to take a holiday, arranging vaccinations or planning absence from school
- Parents state that they or a relative will take the child out of the country for a prolonged period and/or the girl will be home schooled upon return
- A girl may confide that she is to have a 'special procedure' or to attend a special occasion to 'become a woman'
- References to FGM in conversation, e.g. between a girl and her friends
- A girl confides that she is scared that she will be subjected to FGM, or that her mother and/or older sister has undergone FGM (other terms: Female circumcision, Cutting, Bondo, Sunna, Initiation)
- Parent or family member raises concern that they fear the girl will be subjected to FGM by another family member.


Concern regarding FGM for presenting adult or child
(All Wales FGM Question Guide can be used if practitioners feel confident to use, if not referrals to be made to specialist services to discuss)
Disclosure or suspicion that a child has had FGM
Disclosure or suspicion that an adult has had FGM
No disclosure or suspicion of FGM but family history of FGM
Report to the police via 999 or 101 under Mandatory Reporting Duty. Police will initiate a multi-agency safeguarding response
Report to the Local Authority where the child resides informing them of the crime reference number
Consider:
Do they have any female children or siblings at risk of FGM?
Do you consider them to be an adult at risk?
Follow Wales Safeguarding Procedures (2019) and your local processes to ensure they and children around them are safeguarded according to risk of harm
Person is vulnerable adult or under 18 years of age
If you suspect they may be at risk of FGM:
Use the All Wales FGM Clinical Pathway to help decide what action to take
If they are at imminent risk of harm, initiate urgent safeguarding response
Follow Wales Safeguarding Procedures (2019) and your local processes to ensure they are safeguarded
Where FGM has already occurred:
If under 18, refer for Child Protection Medical appointment with paediatrician, following your local processes
If an adult, consider need to refer patient to specialist FGM service or experienced practitioner to confirm FGM is present, FGM type and/or for de-infibulation
If long term pain, consider referral to uro-gynae specialists
If mental health/ emotional impacts, consider referral to counselling/BAWSO


A FORCED MARRIAGE IS A MARRIAGE CONDUCTED WITHOUT VALID CONSENT OF BOTH PARTIES WHERE DURESS IS A FACTOR
Following a disclosure or concern identified all practitioners need to be aware that this maybe the ONE and ONLY CHANCE to help the victim
IF THE VICTIM IS UNDER 18 YEARS OF AGE AN IMMEDIATE REFERRAL TO CHILD PROTECTION SOCIAL SERVICES DEPARTMENT TO BE MADE
DO NOT
Send them away
Use family members to interpret
Approach family members
Do not share information with family/community
Do not attempt to mediate
DO
See them immediately on their own
See them in a safe and secure environment
Listen carefully and note details
Strategy discussion
Seek advice from Forced Marriage Unit





FOR THE PERSON/S HANDLING THE DISCLOSURE IT IS ESSENTIAL TO MAKE AND KEEP RECORDS OF DISCUSSIONS AND DECISIONS MADE AND ACTION PROPOSED AND/OR TAKEN.

In all incidences, please follow Wales Safeguarding Procedures

Appendix 5: Wales Accord on Sharing Personal Information (WASPI)
The Wales Accord on the Sharing of Personal Information (WASPI) provides a framework for service-providing organisations directly concerned with the health, education, safety, and social wellbeing of people in Wales. It concerns those organisations that hold information about individuals and who need to share that information to deliver effective services.
It is a key element of the Welsh Government-led Sharing Personal Information Project which aims to make sure public services, as well as appropriate third and private sector service providers, share personal information about individuals legally, safely and with confidence. The framework facilitates this by establishing agreed requirements and mechanisms for the exchange of personal information between service providers.

All Welsh Local Authorities, Health Boards/Trusts, Police Forces, Fire Services, a large number of charities and voluntary sector organisations have signed up to the Accord.
Other organisations, such as schools, GP practices, Housing Associations and some private sector organisations have also signed the Accord.

The Accord sets out a common set of corporate principles and standards under which partner organisations will share information. Sign up to the Accord demonstrates a commitment, at the highest level from each partner organisation, in meeting the agreed conditions, obligations and requirements for sharing personal information within the framework.

The Accord will be supported within organisations by Information Sharing Protocols and Data Disclosure Agreements.

Information Sharing Protocols (ISPs) identify the operational requirements when sharing specific sets of personal information between multiple organisations on a reciprocal basis. They detail the:

- specific and lawful purpose(s) for information sharing;
- group(s) of clients it impacts upon;
- relevant legislative powers and the consent processes involved;
- data which is to be shared;
- required operational procedures and the process for review;
- means of communicating to practitioners the specific operational requirements.

Data Disclosure Agreements (DDAs) provide the same fundamental principles as an ISP for partner organisations to adhere to but have a propensity to focus on the one-way regular, non- reciprocal transfers of information, generally between just two organisations.

Essentially an ISP or DDA will set out the “who, why, where, when, what and how” of sharing personal information. There will only be one version of the Accord for Wales, whilst there will be many ISPs and DDAs developed to support it.

A set of documentation and templates have been produced to enable partner organisations developing ISPs and DDAs within the WASPI framework.