Transcript for Working alongside Safeguarding Professionals Webinar

[Introduction]

Hello, and welcome to our working alongside safeguarding professionals webinar. This webinar is two hours long and we'll have a ten-minute break around halfway through the session. However, we want you to be comfortable and do whatever enables you to learn best. If you need to stand up or move around, please feel free to do that. We hope you've found your course documents in your training portal. The handbook is there as an ongoing resource to support you, so do take some time to explore it after the session. There is also a full transcript of the course, so feel free to take notes or not with that in mind. The co-host will add a document to the chat now that contains the scenarios we will use in the session. You can click on it to open it if this is helpful for you. Our courses are principle-based and applicable for all 4 nations of the UK. We will highlight any terminology that is nation

specific and, where there are differences in law and practice between nations, there are nation-specific sections in your handbook that give you the relevant information for your context. If it's comfortable and possible, we would love you to have your camera on throughout the webinar. This allows your trainer to see that you're following the content and also enables those of us who are lip reading to fully participate in conversations. When communicating about subjects like safeguarding, facial expressions can convey acceptance and safety to those of us in the group with lived experience of abuse too – so we encourage you to practice those skills here. We understand there may be times when you need to turn your camera off, for example, if you have children who need your attention or your internet speed drops. You may also need to have your camera off for your own wellbeing. If this is the case, please message the co-host to let them know and keep engaging in other ways, for example through the chat. Please keep microphones on mute when you aren't speaking, this helps with sound quality and minimises distractions. Do unmute and speak when you have questions or comments, we really want to hear from you.

Some of the information shared during the session can be sensitive. If you have children in your home, or others who shouldn't be exposed to this, you may want to use headphones, angle your screen away or take a moment now to find a quiet place before we start the main teaching. Please be mindful that this is not a confidential space, so if you share stories and experiences, please don't use names or other identifying details.

Please take care of yourself during this training. We know that many of us in this group will have personal experience of harm and abuse; please bear this in mind as we continue our training. We know that around 2 in 5 people experience abuse at some point in their lives, and that childhood abuse is often not disclosed for more than 20 years. It may be that this course makes you realise for the first time that you have experienced abuse, or you may experience a trauma response that you need to take a moment to work through. Your wellbeing takes priority. If you need to, feel free to take a break and turn off your

camera. Consider who you can reach out to for support, and remember you can privately message our co-host at any time.

We use the chat facility throughout the training as a place to ask questions, give comments and the co-host may share relevant links there too. If you can't, or prefer not to, use the chat – and we know there are many reasons for this - please don't worry. Our trainers will regularly share any key information and the general flavour of anything shared there. Anything not read out to the whole group is either not applicable to the whole group or is already in the handbook.

If there is anything else we can do to make this training more comfortable and accessible for you, or if you have technical difficulties that you need support with, please message your co-host at any time, or if using the chat function is difficult for you, please unmute and let your trainers know.

Thank you for choosing Thirtyone:eight for your training today. Our motivation is to equip, empower and encourage you in your safeguarding responsibilities. As we start, we just want to recognise

the time, care and commitment you're investing in your church, charity or organisation by attending this training and in everything that you do, thank you. I hope that the message you get today is that you never have to do safeguarding alone. As we begin, I just want to tell you about our helpline; you may want to pop the number into your phone now if it's not already there. The helpline is there to support you with any questions regarding safeguarding. It might be queries about policy, or you might have a live situation which you'd value talking over with us and getting advice. The helpline operates from 7am till midnight, seven days a week, 365 days a year- nine to five Monday to Friday for those regular questions about policies, guidance and process and the out of hours service for any more immediate concerns. Everyone here today will have a different motivation for engaging with safeguarding. For us at Thirtyone:eight it comes from our passionate belief that safeguarding is close to God's heart. Our name comes from a verse in the Bible, Proverbs 31:8 that says, speak out on behalf of the voiceless and for the rights of all who are vulnerable. When we take care of the vulnerable, we are fulfilling God's call. If you're part of another faith

group, you may well recognise this call from your own sacred scripts. Or you might be part of a charity that has care and dignity for the vulnerable at its heart. Whatever your motivation, we want to equip you.

Let’s start by considering what we mean by ‘working alongside safeguarding professionals’. Safeguarding professionals are individuals who work within statutory agencies and have a specific safeguarding role. Statutory agencies are set up by law - a statute - to carry out certain services for people and enact certain tasks. Several agencies have specific duties connected to safeguarding. This responsibility is often shared among various agencies, with each handling specific tasks. Statutory agencies include education, social services, healthcare services and police. We know that multi-agency or collaborative approaches need to be adopted to properly safeguard at-risk individuals – safeguarding is most effective when we work together, and we'll often be working alongside several professionals from several agencies.

Another note to share here is that this training will specifically address the role of faith in safeguarding considerations. We recognise that many of our delegates won't have a faith or come from overly faith-based organisations. But we believe this is an important inclusion for several reasons. Firstly, many individuals who engage with the services provided by faith and community sectors have a religion. In England and Wales, its 63%, in Scotland it's 49%, and in Northern Ireland it's 83% of the population. Understanding people's beliefs and how they interact with that person's everyday life, ways of seeing the world, and behaviours, is crucial for effective safeguarding. Secondly, faith groups are often misunderstood by safeguarding professionals. This training will explore more of these misunderstandings and provide insights to help gaps, ensuring more respectful and effective interventions. Thirdly, faith should be a safeguarding consideration as the outworking of religious views can contradict law, which means that the involvement of safeguarding professionals becomes necessary. Addressing these interpretations is essential for comprehensive safeguarding. And finally, involvement in a faith community and having

a religious belief is an important element of many people's wellbeing. We want to affirm and support that protective factor for people as they move on from involvement in formal safeguarding processes.

Before we jump into the three modules, lets pause and consider this statement: ‘Safeguarding professionals have a responsibility to safeguard people.’ What real life examples can you think of? Which agency or agencies were involved and how did they safeguard an individual and family? How can faith and community groups contribute and collaborate to enhance these efforts? We'd love to hear some of your own experiences and knowledge. Thank you for sharing.

Our learning journey for this training covers three modules; roles and relationships where we look at the legal realities of working alongside safeguarding professionals; referral to resolution which considers the practical elements of how we work alongside safeguarding professionals; and finally, communication and collaboration, the creative opportunities in collaborating with safeguarding professionals. By the end of this training, you should know how to work effectively

with safeguarding professionals, to grasp some of the legal and practical sides of safeguarding, to make sure service users voices are heard and to help create safer communities. Plus, you'll hear from other groups who've worked alongside safeguarding professionals.

[Module 1: Roles and relationships]

Let's start module one. In this module, we'll begin by laying out the roles of safeguarding professionals, the safeguarding roles of workers from faith and community groups, and the relationships between the two. While there are many differences in the roles of safeguarding professionals compared to workers from faith and community groups, we do have a shared goal which is that of enabling people to live free from harm, abuse and neglect. For the statutory agencies or the safeguarding professionals within them, there is a legal duty to do so, whereas for the faith and community group, it's a moral or religious imperative to do so. Now, of course, that's an oversimplification. There are some legal duties on faith and community groups, such as

following enhanced criminal records checks processes and equally, many safeguarding professionals will have chosen their careers because of their moral and religious convictions. As one of our trainers, who's also a social worker, told us: “What social services are looking for is a plan to keep a child or individual safe, and churches, faith groups, community groups, can play a big part in this”. To achieve our shared goal, our role will likely look different to the role of a safeguarding professional. We're going to go into breakout rooms and consider what role you could play in this situation? What goals do each of the parties appear to hold? Are any of them shared? Are any oppositional? Please nominate somebody to read the scenario and give feedback to the group.

Mo and Dory have been on-again-off-again attendees of your faith community for several years. They have two boys. Recently, they broke up due to Mo's escalating abuse of alcohol. Children's services are now involved after the school referred one of the boys for angry outbursts and concerning attitudes towards females. As part of their

child protection investigation, social workers are considering Mo's ongoing access to the boys. Dory has asked you to attend the next meeting to help make her voice heard and inform the decision-makers that she doesn't want Mo to see the boys.

Staff and volunteers from faith and community groups can play a key role in safeguarding beyond noticing the initial concerns we so often talk about in training. If you're involved in a safeguarding meeting of any kind, ask the chair of the meeting or the person who contacts you what is expected of you. Your role in safeguarding processes can be one, two or all three of these things. The first one is to safeguard the at-risk individual. When we use the term ‘safeguard’, we want to emphasise that this is always a collaborative effort. We're not putting on our superhero capes and coming to the rescue, and we can't force someone to do something, particularly in Adult Safeguarding where consent is often needed. The second part of our role could be to support and advocate. Many faith and community groups are in the ideal place to identify needs and amplify the voice of the service-user.

We may already have a deep understanding of their lived realities and the belief systems informing their choices or preferences, and because of this we may be an understanding and insightful advocate for them. Thirdly, we may be there to support the safeguarding process. This could be as a witness, as a person who passes on a report, or even being asked to read out your report at meetings with the person or family you're supporting, listening in. As part of your involvement with Mo and Dory, you may have documented your own safeguarding concerns about their family’s situation. Reflect on the tone of the safeguarding records you currently maintain. If you were to read these records aloud in front of those you support, would this create any issues? If so, why? We'll discuss the significance of language in record keeping later. It's also worth noting that the chair of the meeting might ask you directly for an opinion or a risk score, and it can be uncomfortable for those that you're supporting if they don't know that that's a possibility. We encourage you to mention this to those you’re supporting ahead of time.

When it comes to your role, there are certain safeguarding duties that you hold. But if you struggle to articulate what your safeguarding role is when it comes to the bigger picture, you're not alone. The need for clearer roles and duties for faith and community groups in safeguarding is well established in research. Recent Thirtyone:eight research noted that “…there's a disconnect between social services and faith communities concerning child abuse prevention efforts”. Similarly, the Independent Inquiry on Child Sexual Abuse for Religious Organisations and Settings made the point that “Compliance with the guidance is not legally enforceable, and religious organisations are under no duty to follow it or even take it into account.” Despite this uncertainty, there are essential elements to effectively fulfilling your role.

We need to be familiar with legislation and guidance and follow them within your organisation, even when much of it isn't legally enforceable for faith and community groups. One strong example is the recommendation that safeguarding leads update their training every

two years. In England, this is a requirement for the education sector, but only a recommendation for faith and community groups. Ideally, we should do it anyway. There is more nation-specific information on legislation and guidance in your handbook.

The next area you should consider in your safeguarding role is having basic legal literacy. That can sound incredibly formal and intimidating, can't it? Phrased more simply, legal literacy means having knowledge and understanding of basic legal principles, rights and responsibilities. It means understanding safeguarding terminology and knowing when to seek expert advice. It also means being familiar with how the law expects us to safeguard children and adults at risk and make sure our practices are effective and legally compliant. The Welsh national safeguarding training, learning and development framework helps us do this. The framework applies to everyone from full-time safeguarding professionals to those in faith and community groups who may be only volunteering for an hour a week. Its aim is that people will be

safeguarded well and that there's a shared knowledge and terminology between those working together to keep individuals and families safe.

Finally, we need to be committed to partnership working. The specifics of what opportunities we may be offered and the routes into that differs between UK nations, but we know that effective safeguarding is only possible when there's partnership working. The at-risk individuals in our faith and community groups will also be involved with other spaces, places and professionals. We hold a small piece of the puzzle, and it's only when these pieces are brought together that we can see the bigger safeguarding picture.

Let's consider the role of safeguarding professionals in statutory agencies. In contrast to the roles held within faith and community groups, the safeguarding responsibilities for safeguarding professionals are very well defined and measured. There is a massively oversimplified glimpse at the different statutory agencies that you may work alongside included in your handbook, but the

illustrations on the slide, show that safeguarding professionals have many legal duties to safeguard individuals and are doing so in highly regulated environments. In addition to that, since 2007 safeguarding professionals and others were required to avoid discrimination on grounds of religion and belief when providing services. A quote from gov.tracker from last year says: “Funding pressures and aging population, staff shortages and low public trust are creating unprecedented challenges for the statutory agencies.” Safeguarding Professionals are required to do a lot with increasingly stretched resources.

With those legal duties safeguarding professionals hold in mind, it's easy to see where tensions may appear when working within the faith and community sector. The image on the screen shows a summary of the perceptions of our roles and theirs. On the one hand, there is the perception that what safeguarding professionals do is required, and they have a responsibility to do it, versus faith and community groups’ involvement being optional and unenforced. As we've just seen, the

lack of oversight for the faith and community sector creates a significant contrast between the two contexts.

The second tension is that safeguarding professionals' perspective is scientific or secular, versus the perception that faith and community groups only have a spiritual or religious perception of the situation. The secularisation of services, risks seeing service-users in a sterile, managed way to ensure fairness and uphold that science emphasis of 'social science'. But this isn't a realistic response to our multi-faith, multi-ethnic reality in the UK. A quote from a social work book notes that all too often: "In a professional context, the issue isn't one of non-belief or belief, but of assessing what has happened to a child and the gathering of information." This approach sadly overlooks the importance of religion in an individual's life and goes against the contextual approach to safeguarding that's recently become commonplace in the UK. A final potential tension is the perception of professional versus amateurs - safeguarding professionals are professionals and equipped with the necessary expertise and training

and support, while faith and community groups are viewed as being amateur and lack the same professional training. This perception leads to the belief that faith and community groups do not have anything valid or worthwhile to contribute to safeguarding efforts. Research has found though, even though the perception of amateur does exist, a high number of safeguarding leads have a professional background. It's important if you wear both hats, if you are both a safeguarding professional in your day job and you hold a volunteer role for a faith and community group, that you accept that you can't act in the same way you can in your professional role. That includes not investigating or making significant decisions. Much of the tension highlighted here shows the limited understanding both sides hold about the others' role. To help support the understanding of safeguarding professionals, Thirtyone:eight will be offering free Lunch and Learn sessions on faith literacy for safeguarding professionals, these will be coming soon, so please do look out for that, and you are very welcome to share those resources.

As before, safeguarding professionals often find themselves navigating gaps in resources, time and community knowledge that faith and community groups are well positioned to fill. We can help lessen the pressure on an already overstretched system, and we can provide context and understanding into a service-user's beliefs. A quote from a book called Religion and belief in social work', says that "Religious and spiritual beliefs provide a helping environment and enabling niches where the resilience of individuals, families and groups is built or enhanced", and that, "Social workers will only be competent to engage with people if they also engage with these important aspects of many individuals' lives". We'll look later at some of the forms this can take, but some examples that may represent the work those of you in this room are doing are things like supervised parental contact, outsourced care, family supply support or respite care and food banks.

We're now going to hear from a group that's worked alongside safeguarding professionals in some of those ways. This is Kelly from Youth and Family Matters in the south of England. What you're about

to hear is an edited version of a 10-minute conversation that we were able to have with her about the work that they do.

“Hello, I'm Kelly Price from Youth and Families Matter.”

What services do you offer?

“We work with children, young people and adults in our local community of Totten, and we can help people who might be going through a temporary crisis, or they might be going through something a bit more long term, could be anything, really.”

How have you built relationships with safeguarding professionals?

“We've been running for over 30 years now with Youth and Families Matter, so it's been a long process of building relationships. Over that time, we built those relationships through word of mouth, through going to lots of meetings and networking with people making ourselves known. We provide what we provide, and then people refer into us. So, it's not like we set up projects specifically for the statutory agencies, but they found out what we do, and then when, as appropriate, they

refer to us if they feel that we could support them. So, as I say, we get referrals from Children's Services, but we would also refer to them, and the same with mental health teams and schools - they'll refer families to us to work with. And its maybe kind of a joint, joint working relationship."

How does this benefit the individuals and families you work with?

"I think, yeah, I think it is helpful and meaningful, and it gives people, you know, holistic support from all the different agencies that need to help them and support them, really."

[End of video]

Opportunities to be involved will vary depending on the perspective of your local authority and even the individual opinion of key case workers. But building trust and being a known entity in a community, like Kelly and Youth and Families Matter are, also makes a significant difference. I'd encourage you to remember that this is a long term project, and if we want to work alongside safeguarding professionals

well, we have to be willing to commit to the long term. That brings us to the end of our first module, roles and relationships when working alongside safeguarding professionals. We mentioned that the three possible roles in the process are to safeguard the individual, to support and advocate, or to support the safeguarding process. As you finish this module, we'd love you to take on board this key action. What do you need to do to be more effective in your role? Do you need to improve your legal literacy? Do you need to make a mental shift from only being there as a support or perhaps you need to better understand the challenges currently facing safeguarding professionals in your local area. If it's helpful for you, I'd love you to jot down what comes to mind in terms of the key action you want to apply.

[Module 2 – From referral to resolution]

We're going to move into module two now. We've looked at roles and relationships which briefly unpacked the legal realities of working alongside safeguarding professionals. Now we're moving on to referral

to resolution, the practical elements of how we work alongside safeguarding professionals.

Before we start to unpack that, it’s worth noting you will likely encounter statutory agencies through one of two referral routes. The first is that you contact safeguarding professionals. This is usually in response to a safeguarding concern. The other is that safeguarding professionals contact you. This is usually in recognition of the spiritual or community support that you can offer, and we will touch on both elements through this training.

As a safeguarding recap, referrals to safeguarding professionals should follow standard safeguarding processes. Exact details differ between nations and your safeguarding lead should have knowledge on this, or be able to get advice about who the main safeguarding professional you should be contacting is. Please do feel free to use our helpline as needed. Let’s quickly revisit the main elements now: When we're making a referral to safeguarding professionals, who are we

referring on to? Well, the simple answer is the relevant agency. That's going to be defined by a few key elements, and you may need to refer onto more than one. Consider whether the individual you're concerned about is an adult or child, which suggests that we should contact either Child Services or Adult Services. Do you need their consent to refer? Is the risk imminent, past or ongoing? If it's imminent, we may need to contact an out-of-hour service. If it's a non-recent concern, then we would be able to contact them within normal work hours. If it's ongoing, we would need to assess the potential risk of harm to the young person or others. There is a table in the back of your handbook that talks about the terminology and processes for safeguarding across the four nations, and that includes some of the thresholds for referring there. Threshold means what the situation needs to be like for safeguarding professionals to get involved. Also consider whether or not a crime has been committed. If so, we would want to pass that on to the police as well as social services or health and social care. What do we need to pass on? We share the concern we have and potentially the written record, or the information we have noted there. If you're

unsure if you can or should share the concern with safeguarding professionals without the individuals' consent, then you can always share an anonymised summary and then follow their advice. When do we do this? We do it in a timely manner. If it's an emergency or there's an imminent risk of harm, you should not let the individual leave you, and do that immediately. Often, in these situations, it is appropriate to call 999. How we contact the safeguarding professional depends on the statutory agency. Some areas have multi agency safeguarding hubs known as MASH teams who sometimes have a multi-agency form online that they want you to fill out. In other situations, a phone call or email is required. Do some research ahead of time, so you know how to reach the main children and adult services in your area. Having that to hand is invaluable when you're dealing with a live situation. In the back of your handbook, there's a table for you to fill in as homework for how to contact the local safeguarding professionals in your area.

We're now going to take a moment to think about a case study. I'd love you to think about what details you would record. You can add them to the chat or just keep notes for yourself.

Geoffrey, an elderly gentleman, regularly attends your coffee mornings. You've seen changes in him that you're concerned about. He was known for coming in a different matching tie and socks each week, always looking clean and with styled hair. Lately, he's been coming in soiled clothes, his hair is much longer, and he seems to have lost a lot of weight quickly. His wife recently died, and his adult children had mentioned hiring a care company to support him. Your safeguarding lead informs Adult Services as you believe Geoffrey may be neglecting himself.

When writing a record of concern, it's important to remember that contact with safeguarding professionals can continue long after the initial referral is made. In Geoffrey's situation, you are the group leader who made a report and passed it to the safeguarding lead. The

safeguarding lead then referred the concern to adult services. Let’s return to Geoffrey’s situation:

Four years have passed since you became concerned about Geoffrey, and he recently passed away. You’ve now been called as a witness at a coroner's court inquest. At the time of your concern, you did pass on a safeguarding report to your safeguarding lead who contacted Adult Services, as you believed he may be neglecting himself. Adult services deemed Geoffrey to have the capacity to manage his care, wellbeing and nutrition and did not take the concern any further. Since Geoffrey was seriously malnourished at the time of death, but employed a paid carer, his case is now at coroner's court. You had heard that there was also a police investigation happening.

We'd like you to look at the safeguarding record that was made at the time of concern and you can find this in your handbook and the scenario sheet. What's helpful about this record and what is unhelpful? The safeguarding lead should have updated the record to show that

they'd contacted adult services and what the advice and outcome at the time was. Depending on the reason for being called to court, it could be the group leader who's asked to act as a witness, or it could be the safeguarding lead. In this situation, they've called the group leader as they are someone who knows Geoffrey and can be a witness of fact to the changes they saw in him.

When referring a case to safeguarding professionals, make sure not to under-report out of fear of the consequences. Referring a parent who is struggling with mental health issues to social services does not mean their child will be removed from the family home. It should mean that the family gains access to the support they need. Across the UK, safeguarding professionals will provide early support to allow the family and individual to overcome or eliminate the possibility of harm or abuse. They will only move on to more prescriptive measures if that’s necessary. You can see your handbook for a more detailed breakdown of this in the nation specific pages in the handbook. The bottom of our

pyramid that represents the levels of intervention is the early support stage. Often, faith and community groups are called on to provide this.

Examples can be parenting classes, help applying for benefits, access to foodbanks, referral to mental health services and much, much more.

Not shown on this pyramid is that in some areas of England, there's also a mid-level for adults called MARM which stands for multi-agency risk management. You can read more about that in your England specific information.

Stage two of our pyramid is when the situation is significant enough to require statutory safeguarding intervention. At this point, participation is required, not voluntary. These are situations where there’s clear harm or risk of abuse, for example, a child protection conference might be called.

At the top of our pyramid, we have the criminal justice system. Not all cases dealt with by the criminal justice system are safeguarding concerns, but equally, not all safeguarding concerns will be escalated to the criminal justice system. We’ll explore those in a moment.

We'd love to hear your experiences of referring to safeguarding professionals. What was the resulting level of intervention?

When does the criminal justice system overlap with safeguarding and why do I need to know? We included this in your handbook for reference, but I'm going to touch on a couple of key points here. There are a couple of sections of intersectionality. When we believe a child or adult has been harmed or abused, the police will investigate and gather evidence. If there's the risk of sexual or physical abuse, police and social workers may conduct a joint investigation. If the abuse is confirmed and meets the criminal threshold, the Crown Prosecution Service or Procurator Fiscal in Scotland decides whether to charge someone. If a person is charged with an offense, the case goes to court and the victim may be a witness, often with special support. When someone is convicted of abuse, the courts may issue protective orders like restraining or barring orders. If the person is a known risk to others, they may be placed on a sexual offense register or register of barring from certain work.

Post-referral, working alongside statutory agencies could also involve being called as, or supporting a witness. This can take various forms so as before, do clarify what your role is and maintain professional standards in that. In your role with a faith and community organisation, you are unlikely to be called as an expert witness. But other types of witness include; a witness of fact which is exactly what it sounds like. Types of witnesses can also include vulnerable witnesses, so while you're unlikely to fall into that category, your role in that may be to support the individual, or provide pastoral care following the experience. You may be called to be a character witness and the final type of witness is a 'witness in a safeguarding procedure'.

Even if you aren't formally called as a witness, your notes might be called on to inform a process, or you may be contacted by safeguarding professionals for a conversation that will inform their inquiries.

We're now going to consider when safeguarding professionals have referred an individual or family to you. Safeguarding professionals are often keen to engage with faith and community groups in their locality and when there is partnership working, they will usually have some safeguarding requirements that faith and community groups need to comply with. The same is often true for funders, so it's worth investing time in this as they help create safer places for people, and it can create new opportunities for you. These requirements for safeguarding are often known as safeguarding assurances and they vary depending on how formal the arrangement is. We've put them into three broad categories here; formal arrangements, social prescribing and informal arrangements. Formal arrangements are often approved through your local authority or integrated Commissioning Board if you're in England. At this formal level of partnership, you will likely be asked to provide extensive safeguarding assurances, often on an annual basis, and you might have quality visits conducted. You might need to show training certificates, your up-to-date policies and more. We've included a full list of Safeguarding Assurances in your handbook and this may be helpful

to you as a checklist. An example of a formal partnership arrangement is Safe Families who are commissioned by local authorities to work with families. They then partner with local churches to provide the services and will provide assurance that their policies and procedures are in place in respect of safeguarding, safer recruitment, etc. The second level is a bit less formal and it's known as social prescribing. Some of you may represent organisations who offer socially prescribed services. These services are commissioned by the local community, voluntary sector or local authorities. It can come via health visitors or social services teams, and some areas even have health improvement services teams or similar. It's worth doing a web search for what exists in your area. The safeguarding assurances required to partner at this level usually include having and following a safer agreement policy, having up to date training, etc. These might be done in a less formal way than those partnering under formal arrangements. Services that fall under this category can be befriending, gardening, book clubs, and exercise classes where the safeguarding professionals are referring people on to you. Finally, at the level that many of our delegates are

operating at is the level of informal arrangements. You may not be asked to provide any safeguarding assurances for this, but it's obviously good practice to make sure that your safeguarding is in order. People may come to you through informal contacts with statutory agencies such as the NHS via the GP and health visitors, it might be that you've been allowed to put a flyer for a toddlers group on a noticeboard, for example. Faith and community groups are looking to proactively connect with the community via the safeguarding professionals and can link in with their community and voluntary sector, their health visiting team, their GP practices, or even the local social work team. Do put out some feelers and do some networking if you are interested in connecting with safeguarding professionals and asking them to consider referring individuals to you. We're going to hear again from Kelly, whose organisation is an example of social prescribing:

You offer socially prescribed services. Tell me about the safeguarding measures you have in place.

You do need to be professional. So, whilst we do build good relationships with people, we do know our boundaries, and you know, it's important to be careful. I suppose we have all the right kind of governance, you know, policies, procedures, and all those kind of things that you need to have.

In terms of practically, we provide reports when we're asked to for specific people that we're working with. We might get asked to write a report about child that we're seeing in school or a family we're working with. We attend child in need meetings, child protection meetings, and are able to give our point of view in our kind of how we're working with these people, and I think also in terms of safeguarding people, like I mentioned earlier, it's again, knowing what you can and what you can't provide, and signposting where you need to, and being realistic I think about what you can and can't do.

[End of video]

As before, regardless of whether the referral came from you or to you, your reason for being allowed in the room could stem from one of the

three broad areas to safeguard the at risk individual, to support and advocate for them, and/or to support the safeguarding process. We're now going to go into a breakout room. I want you to think about what is the primary reason for your involvement with safeguarding professionals, and can you think of other examples for this?

Rupa. Rupa is currently subject to a child in need plan and lives with her parents who feel that, because Rupa is not white and because the family is religious, that the social workers aren't really understanding the cultural contexts of some of Rupa's feelings and comments. Her mother says to you; "They're not overtly racist, there's just lots of little things I can't quite put my finger on. I feel like they look down on us and I don't know how to talk in the educated ways they do." You've been invited to attend Rupa's child in need meeting.

The 'holy man'. An individual, who used to be an elder, left before you started attending the faith community, so you never met him. You heard that he was a 'holy man', but some people also said he made them uncomfortable. The police have asked you for any safeguarding

records you might have about him, but your current leadership team don’t want to get involved with any investigation. You haven’t been told what the police are looking for.

Joanne. Joanne comes to your ‘music for toddlers’ group and has asked you whether you know about any parenting courses. As a victim-survivor of childhood trauma, she shares with you that when Zach is loud or defiant, she explodes verbally and by slamming things like doors. She doesn’t always see the reaction coming and doesn’t know how to control it, and she thinks she’s reacting more. After talking at length, she decides she will only self-refer to children’s services if you come with her.

We're now going to do an interactive task that looks at what practical things you do to build and maintain strong relationships with safeguarding professionals. Whilst you're thinking about that, I want to mention a couple of points about what partnership looks like.

Good partnership means being present. Can the safeguarding professionals you’re working alongside contact you if they need to?

Are your details up to date? And do they know the best platform to reach you on? Think about availability. Can you be contacted within normal office hours, or if you're working and not reachable, is there another person that they can contact instead? And finally, we encourage you to consider how responsive you are. Will your trustees or leadership need to sign off on any decision making, and if so, are they aware of the need to respond in a timely way? Let's hear some of your answers on practical things you do to build and maintain relationships with safeguarding professionals.

When we're invited to be part of the solution, we also need to be committed to that process. Being committed means presenting information appropriately. Think about Geoffrey in our earlier scenario - did we have a detailed and running record? In our general record keeping, have we used fair and appropriate terminology? There is a section in your handbook that considers this topic, so please do take some time to read it through. We also need to make sure that someone who was unfamiliar with the situation would be able to fully

understand it based purely on our notes. Our records should be legible and comprehensive, and when we share our thoughts in meetings, our words similarly should be clear and easy to understand. Have we acted in accordance with legal requirements? Have we been clear and unbiased? Think about our policies and practices and make sure that they are up to date and applicable to your current activities. The same should be true for your safer recruitment processes – check they are followed and maintained for all new staff and volunteers, and apply them retrospectively for people that have been doing that role since before the safer recruitment processes were adopted. Operating at a professional level and being committed to playing a part in the bigger safeguarding scene also means that people engaging with your organisation know who your safeguarding lead is and how to pass concerns on to them. Being committed also looks like defining your partnership. In any partnership, whether formal or informal, knowing your role and the expectations that are placed on you is essential to effective communication. If you're unclear at any point, then ask! If you think you're there to support a formal safeguarding process when

safeguarding professionals want you there to support the individuals, you need to know that.

The final consideration for this module, referral to resolution, is to think through what resolution might look like. How do we know when a safeguarding situation has been resolved? As a working definition, we would suggest a good resolution ensures the individual's safety, addresses all concerns and involves a comprehensive plan supported by all stakeholders. It's important to note that this never means that a safeguarding concern is complete or finished. Safeguarding situations remain dynamic, and we should be prepared to revisit both the concern and the plan we've put in place if or when things change. All good safeguarding resolutions will include a contingency plan, i.e., what will happen if a change or crisis occurs. Imagine Mo has now been through a sobriety program, has shared custody of the boys, but has recently started to abuse alcohol again. Who will need to be informed? Who will inform them? Will Dory have full custody of the boy's while this is under review? Will there be periodic reviews?

For your role, knowing what signs and indicators or behaviors will trigger a referral is important. These may meet a lower threshold or be different from the thresholds held for the original referral. As a faith and community group worker, you often won't have access to those plans and reports, but you can ask if there was any concerns that you should pass on and who you should contact about that.

Resolution also means that we also reflect and escalate if needed. In reflecting on the situation internally, we should consider whether there was anything we could have done better and set aside time to do this as a team. We should also schedule time to implement the changes that need to happen as a result.

Serious case reviews are a bigger version of these. It’s good practice to read these reviews but do so in a reflective way. Would we have done any better if this had happened within our faith and community group? There is a section on serious case reviews in your handbook.

Whistleblowing ombudsmen and commissioners is about escalating our concerns if we’re not satisfied that the resolution meets that shared

goal of enabling the individual to live free from harm, neglect or abuse. This is about knowing how to escalate our concern. Those working in faith and community sectors sometimes feel that safeguarding professionals don't take their report seriously enough, or they fail to act sufficiently to safeguard the at-risk individual. That could be the result of a lack of capacity, or that safeguarding professionals have failed to grasp the severity of the situation. If this is the case and you believe the individual remains at serious risk of harm and abuse, you can escalate your concern. Ask what whistleblowing policies are in place and follow them. Reach out to ombudsman - various statutory services that have information about these on their websites. We put links for these at the very back of your handbook, and there may also be commissioners that you can speak to. Finally, it can be helpful to reach out to specialist community and advocacy groups such as Age UK, who are usually experts in particular fields but can be helpful sources of support.

Sadly, it's not unusual for outcomes to seem disproportionate, especially when it comes to sentences. There's often concerns and complaints about the leniency of sentencing. In one recent and heartbreaking case of child rape in Scotland, the perpetrator's initial prison sentence was almost doubled on appeal. This quote says this, "The judge described the victim as having participated willingly and enthusiastically in sexual contact conduct and had enjoyed it. This does not, it seems, to reflect anything which was actually said by her." We share this awful quote because it highlights a few things. Escalation and appeals can and do make a difference. Secondly, unconscious bias and unfair judgments are still made about victims who should be supported and advocated for. And thirdly, sometimes the outcomes feel heavy and unfair, which we unpack in the next slide.

How do we respond when outcomes don't go the way we believe they should have, for example, when the injustice or harm and abuse is made worse by the injustice of no or low consequences for the perpetrator? Perhaps the leadership, families or communities around

you are unhappy with how you passed on the concern? Or the harm escalated with catastrophic consequences for those we were seeking to safeguard? Often, safeguarding professionals are provided with supervision, and offered support to help them process some of these difficulties. Some safeguarding professionals will also say they're able to silo these emotions as part of the work-personal life divide. But often workers in faith and community based organisations don’t have access to these coping mechanisms. Before moving on from this module, pause and reflect on what healthy coping techniques you can draw on in situations like this. It might be worth taking a moment to note some of these things down.

Regardless of whether our contact with safeguarding professionals was initiated by us, a service-user, or them, we need to take a practical approach to our involvement. Read through the safeguarding assurances listed in the handbook. Are there any elements missing? Is your safeguarding policy up to date and fit for purpose? How about your approach to record keeping?

[Module 3: Communication and collaboration]

We've now completed modules one and two, the legal realities and the practical elements, and in this final module, we're going to consider the creative opportunities in communicating and collaborating with safeguarding professionals. that we ensure that service users are heard.

The quote I'm about to read comes from a recent research paper that highlights the need for safeguarding professionals to have a better understanding of the UK's diverse communities, as well as the need for people to advocate for this. The quote says: “They're all white and saying the same things, there are no other brown people there. I struggle to explain, because it's only me.” Miriam, a mother. The paper goes on to say; “On their own, Miriam and Charmaine were confronted with an overpowering all- white safeguarding workforce whose combined power have contributed to their children being raised in foster care without much prospect of reunification. As Miriam's quote highlights, it's important to make sure service users voices are heard.

We also need to make sure that the context is understood. Communities you work with may have cultural practices that they weren't aware are considered harmful or abusive. In the UK, consider a Nigerian family living in Britain. They have a strong faith and a deep belief in community as active and engaged members of their church, they're committed to raising their children according to the Bible and their cultural heritage, this includes interpreting the scripture, ‘spare the rod and spoil the child’ to mean that physical chastisement is necessary to prevent a child from being spoiled. The parents often resort to smacking with a wooden spoon as a disciplinary measure. This is illegal in all parts of the UK. For safeguarding professionals, this approach to parenting is simply not acceptable.

The family struggles to understand why they're not permitted to raise their children according to their beliefs and culture, perhaps feeling like their beliefs aren't heard. This example requires us to safeguard the children, to share the faith-based context with safeguarding professionals and to share the legal context with the family. I wonder if

you can identify other forms of abuse linked to faith and belief, where you could play a role in communicating the context and making sure that it's understood by communicating service-users voices.

Communicating service-users voices alone isn't enough to work alongside safeguarding professionals well. We also need to be able to effectively communicate situations. Let's use the following real-life situation to explore those possibilities.

The Orkney child abuse scandal involved the removal of nine children from their homes in Orkney, Scotland, by social workers and police due to allegations of child abuse. The social workers allocated to support the mother in 1989, found it difficult to communicate with her due to the frequent presence of her church friends. This hindered their ability to work effectively in the interest of the children's protection. Sheriff David Kelbie later described the case as "fatally flawed" and "incompetent'. The church friends often supported the mother’s wishes over the safety of the children. For instance, when social workers and

police went to the house to uplift the youngest child, they were told she was in Kirkwall with an older sister. Later, it was discovered that she had taken sanctuary in the local Parish Church. A church friend lied about the child's whereabouts at the mother's request.

There were clear communication issues. There was limited communication between professionals, and we can see that the faith group were disrupting communication early on. The faith or community group could instead have provided support in this situation. If we consider your role in working alongside safeguarding professionals, it should have been the first one, that of safeguarding at-risk individuals. Sadly, in this situation, the faith community attempted to 'support and advocate' for the mother in a way that contradicted their role of safeguarding the child, and participating in safeguarding processes. This isn't acceptable.

Through communication, we can help the safeguarding professionals to understand the faith context and the importance of the shared

community in the children's lives. What concerns does your faith and community group have about the involvement of safeguarding professionals? Sadly, for minority religions and many ethnic groups, systemic racism experienced by their communities makes these concerns very valid. But instead of promoting communication, the faith and community group in the Orkney case, actively sought to disrupt it. We believe that there are better ways to represent those valid concerns, and that we can and should escalate when we see evidence of bias, discrimination or systemic racism.

We're now going to consider for a moment the need for better faith literacy in safeguarding professionals. This is quite well known, as is the fact that it often relies on the professionals' individual understanding or exposure to faith settings. Faith literacy is the 'basic understanding of beliefs, behaviours and institutions of the global religious traditions'. This lack of knowledge can cause safeguarding professionals to misunderstand actions, and the motivations behind the actions. Religion is a protected characteristic in all UK nations, so

discrimination based on religion, even when it comes from an ignorance of that religion, is illegal and inappropriate. Recent Thirtyone:eight research states that “One solution is to increase religious literacy, alongside providing training to reduce any avoidant or utilitarian approaches in practice.” That means moving away from a world where faith and community groups don't want to or know how to engage with safeguarding professionals, which is the training we're doing now, and also ensuring that safeguarding professionals feel upskilled to ask questions related to faith in a way that respects all individuals’ views. Again, we will have free training on faith literacy for safeguarding professionals to facilitate these important discussions. There are some links to other training and resources that can be shared with your safeguarding professionals in the handbook.

Let's pause and consider, ‘what do the Holy Scriptures say about the vulnerable justice abuse, and would those that you're partnering with know these things? That goes both ways, it includes the safeguarding professionals you're working alongside who may need to better

understand our beliefs and religious scriptures to have the right context for behaviours and motivations. But also, to the service-users we're working with and encouraging them to challenge their accepted beliefs based on their holy scriptures. Is there a relationship you have, or a team you've interacted with where you could support this understanding or engagement further? It may be they need to revisit what their faith says about abuse, protecting the vulnerable and justice.

Faith and community based organisations can collaborate with safeguarding professionals to prevent harm and abuse occurring. Remember we talked about our different roles and shared goals right at the beginning? That shared goal of helping people to be safe and thrive remains, and helping those from within our faith and community groups understand some of the legal and social norms around safeguarding is one way that we can achieve that. We do it by creating safer cultures. We want to acknowledge motivation and the underlying beliefs. We want to be clear on what the law is, and in non-criminal

situations or where there's no immediate risk of harm, we want to engage in different ways to achieve the same outcomes. So how would you build a safer culture in the following situations? You may want to consider these as a team:

The report of marital rape in a family where submission to husband is a firm theological belief.

Children in unregulated religious education settings at the expense of a well-rounded education.

An aunt talks about ‘that evil child’ when referring to a child with epilepsy.

There is a handbook section on building healthier cultures which includes a reflection exercise to do with your team which may be helpful to you.

Finally, we're going to look at collaboration in a way that finds solutions. As we've seen, working alongside safeguarding

professionals can take on many different forms and you may be involved at different stages in the safeguarding processes. For faith and community groups, our involvement may be most needed at the time safeguarding professionals prepare to step away. We have a victim-survivor quote here which says: “Without her ex-partner on the scene, she didn't know what to buy. She had no idea the food she liked or disliked and was terrified of making the wrong decision. The reality of that emptiness, the responsibility of learning to be you can feel very, very scary and quite overwhelming.” Faith and community groups can step in to find creative solutions after the crisis has passed. Let's pause and consider, how can our faith and community groups offer resilience building solutions? This can be preventative or after statutory agencies step away. Sometimes the most challenging time for victim survivors is after the initial crisis has passed.

As we come to the end of our training, let's consider that – in a time when safeguarding professionals face unprecedented challenges and

UK nations are expressing willingness to encourage greater involvement from faith and community group, are we able to work alongside safeguarding professionals in a way that enables people to live free from harm, abuse and neglect? We can support safeguarding professionals with their understanding of diverse communities, and provide access to the resources we have available like our buildings and volunteers. As we draw to an end of this module, let's consider the key actions; collaborate with safeguarding professionals to amplify the voices of service users and bridge any communication gaps that might exist, and collaborate for safer communities by engaging in those joint efforts to build trust, to share resources, to create a network of support that prioritises the safety and wellbeing of individuals.

That brings us to the end of our training, we want to thank you for being with us. I hope you now feel equipped to work effectively with safeguarding professionals to understand the legal and practical aspects of safeguarding, to ensure that service-users voices are heard,

and contribute to creating safer communities. Additionally, I hope you've gained some valuable insights from other people's experiences of working alongside safeguarding professionals.

Thank you for your participation in our working alongside safeguarding professionals training. We would really value your honest feedback, please complete the form and help us equip, empower and encourage more delegates in the future. Thank you.