



A COUNSELLING SERVICE FOR YOUNG PEOPLE
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Policy Name

Child Protection Procedure and Risk Assessment
Procedure(WEBSITE)

Date reviewed by Policy Action Committee:

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Version 2.1

Next Review:

September 2025

If any changes are made to these policies, the Board of Trustees will be notified that the policy has been amended.

CHILD PROTECTION PROCEDURE and RISK ASSESSMENT PROCEDURE

CHILD PROTECTION

This procedure applies if during the course of a session your client presents with a child protection issue. Clients who are over the age of 18 are classed as vulnerable adults so are also covered by this procedure. **Please refer to Time to Talk's Safeguarding Policy in addition to this document.**

Each week there is a designated, trained safeguarding lead – **DSL** (Designated Safeguarding Lead), who will be one of the following:

- Davina Nicholson
- Viki Gale
- Kate Adams

Counsellors are advised to contact the DSL, with whom they may discuss the issues and make an action plan. This is recorded in the Safeguarding Log in TEAMS.

They/You may also contact Time to Talk's supervisors; Lara Hickey-Webb (Parent Supervisor) Michael Bizley or Sara Bevins.

Further advice on issues concerning a Young Person's mental health can also be sought from the Common Point of Entry (CPE, which is CAMHS) Tel: 0300 365 1234 or 0300 365 2000 for over 18's (out of hours = 0800 129 9999) or Children's Services (CAAS) 01635 503090 (out of hours = 01344 351999).

As per the safeguarding policy, child protection issues include; abuse (sexual, physical, emotional and mental), severe neglect, severe self-harm, suicidal intent or threat of any sort of harm from another. Child protection issues also include those young people who are at danger of female genital mutilation (FGM), Domestic Violence (DV), modern slavery or at danger of radicalisation. We also need to be aware of young people who may be a danger to others via acts of terrorism or other forms of aggression.

If a young person is living in a home where their care givers have ALL 3 of the following issues: - Domestic Violence, addiction or alcoholism AND mental health issues then children's services MUST be informed. Please refer to the Risk assessment procedure below for further guidance.

ACTIONS FOR COUNSELLORS IN THE EVENT OF A DISCLOSURE: -

Listen to what your client wants to tell you of the situation, do not stop them speaking but do not seek more information than the client wants to tell. The information may be used in evidence should the case ever go to court. (Information told for the first time to a police officer under controlled evidential conditions carries the most weight in any subsequent court proceedings.)

Give the YP reassurance about their courage in speaking and tell them you need to pass this on (as per original confidentiality agreement).

Client safety following a session:

1. Using the guide to Risk Assessment below and your own judgment do you believe the client is safe to leave Broadway House / Thatcham Family Hub?

If you do NOT believe the Young Person is safe to leave Broadway House / Thatcham Family Hub: -

- At the end of the session ask one of the other counsellors to sit with your client while you call the DSL and, depending upon the action plan, the CAAS (Children's Services); on the after-hours number = 01344 351999. Both counsellors may have to apologetically cancel the next client – explain it is an emergency and unfortunately you cannot see them tonight.
- Record all the facts including the advice given by Children's Services
- Follow the advice given by the DSL and /or Children's Services

If Young Person is safe to leave Broadway House / Thatcham Family Hub: -

- If you feel the client is safe to leave Broadway House / Thatcham Family Hub but you have some concerns – inform your client of your concerns and phone the emergency contact person, given by the client on their original client agreement, informing this person of your concerns, or see the emergency contact at the end of the session. If relevant do a safety plan, an example of which is included at the end of this document.
- At the earliest convenience discuss with the DSL and make an action plan if appropriate.

- 2. IN ALL CASES, Keep your client informed of your concerns, record all the events and actions taken, in your client notes, keep the Clinical Director or DSL informed and discuss in supervision.**

A GUIDE TO RISK ASSESSMENT

There are some situations where it is very clear that the Young Person is at risk, for example if they are talking about somebody abusing them physically or sexually. Or if they report that they are planning to take their own life or they report taking class A drugs. Many cases are less clear, and the following is intended as a guide, IF IN DOUBT CHECK IT OUT with other counsellors, the DSL and/or Clinical Director, and your supervisor.

When assessing the level of risk for a Young Person aim to consider;

- Predisposing factors, what the client tells of family and background, the nurture and nature elements of a client. These can be protective factors, so that even if a Young Person is very low if they have a good support network around them – they are at less risk, whereas if one or more parent has mental health issues or drug and/or alcohol issues the Young Person is more at risk.
- Perpetuating factors such as where they live, the factors in a young person's life which they cannot change such as their social context or a learned helplessness, the things that continue to affect their life.
- Precipitating factors, i.e., Triggers such as a relationship breakdown, parent's divorce, loss or transition.
- Protective factors; These can be anything in a Young Person's life that might protect them from risk, such as good family support, support from pastoral staff at school or plenty of interest in sport or hobbies.

It is a combination of factors that puts a Young Person AT RISK

The following list is not meant to be exhaustive but a helpful illustration as to the level of risk a Young Person may be at, IF IN DOUBT - CHECK IT OUT.

SIGNS FOR CONCERN

Signs for concern are divided into green, amber and red with the obvious correlation of red being the most severe:

Green: Client presents differently to normal, maybe jumpy or fidgety or is crying more than usual or being particularly evasive or angry. Reports of friendship issues, stress (inc. exam stress), smoking, provocative language or repeated conflicts. In this case make notes and discuss in supervision.

Amber: Client presents with the above, is noticeably distressed and reports more persistent symptoms such as OCD issues, severe anxiety, self-harming, eating disorders, and suicidal ideation. Reports of risky behaviour (inc. staying out late, promiscuity, class C drug taking, alcohol use), truancy/repeated absence or isolation. In this case, discuss ASAP with DSL.

Red: Client presents with a combination of factors including but not exclusively the following, (This is when you need to be making an onward referral): -

1. RISK TO SELF

Current suicidal ideas and a plausible plan.
Delusional ideas or auditory hallucinations about harming self.
Hopelessness.
Recent acts of deliberate severe self-harm.
Past history of suicide attempts.
Loneliness/isolation.
Client is homeless.
Medical illness.
Class A drug use or alcoholism.
History of mental illness, themselves or in family.
Evidence of County Lines involvement.

2. VULNERABILITY TO ABUSE

Reports of current abuse or physical signs such as bruising or reports of domestic violence in the home.
Lack of social network places individual at risk.
Class A drug use or alcoholism.
History of mental illness.
Mental illness reported in family.
Evidence of being overly controlled by another.
Evidence of grooming or of being in a relationship where there is an uneven balance of power or of child sex exploitation.

3. DANGER TO OTHERS

Extreme Jealousy and/or ANGER.
Determined plan to injure someone else.
Danger of radicalisation (Refer to Prevent awareness training).
Currently threatening/hostile/suspicious/extremely agitated.
History of Violent acts.
Class A drug use or alcoholism.
Reports of provocation.

If a relevant risk is identified during Assessment, the Assessor will ask the office to send out a Safety Plan (with emergency numbers attached) and guide to completion to the client.

If a relevant risk identified during Counselling, the Counsellor will send a Safety Plan (with emergency numbers attached) and guide to completion to the client.



SAFETY PLAN

TIME TO TALK WEST BERKSHIRE IS NOT AN EMERGENCY SERVICE If you feel desperate these are some Emergency Contacts: -

NHS 111 (Phone or online service) or call 999 for an ambulance.
Mental Health Crisis Service: - **0300 365 1234** OR 0300 3652000(for18+/Adults)
SHOUT (text service):- 85258 Text the word "SHOUT" to this number they will reply. Under 19 Text "YM"
Papyrus: - 0800 0684141 (09:00 – 22:00)
Samaritans: - www.samaritans.org, 116 123
Child Line: - www.childline.org.uk, 0800 1111 (under 19)

OTHER Organisations: -

Young Minds: - www.youngminds.org.uk
Get Connected: - www.getconnected.org.uk
Youth Health Talk: - www.healthtalk.org/young-peoples-experiences

SAFETY PLAN – A plan to help you keep yourself safe. **Complete this with a trusted adult who can help.**

Step 1: Signs: - What might be my triggers **or** the early warning signs that a crisis may be developing? (negative thoughts, sensations, mood, situations, my behaviour) What do I need to watch out for? (e.g., getting too tired, angry, lonely or stressed. Getting rejected by someone, seeing things on social media, being bullied etc.)

1.

2.

3.

Step 2: Internal coping strategies – Things I can do to tolerate/handle my distress & look after myself (relaxation technique, physical activity, soothing actions). Good examples are exercise, being in nature, Yoga, swimming, being with pets, breathing exercises. Also exploring becoming more able to tolerate strong feelings can be very helpful so using self-compassion and mindfulness - riding the wave of the emotion.

1.

2.

3.

Step 3: People, settings & activities that provide distraction/comfort: This is where other people and/or settings come in. This can include other people you can talk to or it might be a club or hobby, you can come up with creative ideas, e.g. Making a cake, writing a card to someone else, colouring, drawing. Going out to the park, a beach, a wood etc.

1. Name _____
Phone _____
2. Name _____
Phone _____
3. Place _____
4. Place _____
5. Activity _____

Step 4: People whom I can ask for help, could be same people in step 3. (people need to know they are on this list)

1. Name (this is preferably someone you live with)

Phone _____

2. Name _____
Phone _____

Step 5:

Making the environment safe, (Making the environment safe can be done with your parent, e.g., making sure they lock away anything that you could use to hurt yourself).

Step 6: Other (Other means literally anything else that can help)

What am I already doing that helps?

Emergency Contacts: -

NHS 111 (Phone or online service) or call 999 for an ambulance.

Mental Health Crisis Service:- 0300 365 1234 OR 2000 (For Adults)

Samaritans: - www.samaritans.org, 116 123

Child Line: - www.childline.org.uk, 0800 1111

SHOUT (text service):- [85258](tel:85258) Text the word "SHOUT" to this number they will reply. If under 19 Text "YM"

Papyrus: - [0800 0684141](tel:08000684141) (09:00 – 22:00)