

Raising awareness of safeguarding when working with volunteers -

Focus on 16-18 year olds and those affected by mental health

Session 2: Spotting the signs early - Safeguarding young adult volunteers and those affected by mental health



What we will be covering:



- Session One: Current legislation around safeguarding youths and young adults. Being aware of risks and preventative factors and myths around safeguarding, particularly around mental health.
- **Session Two:** Signs to look out for, red flags within young adults and those affected by mental health.
- **Session Three:** Looking at how safeguarding will look day-to-day and addressing myths around safeguarding young adults and those with mental health.



General Housekeeping...

- We will be covering signs to look out for when safeguarding and red flags to look out for today.
- ► This is just an introduction to safeguarding please remember we are not here to diagnose. It is our job to 'safeguard' and refer if necessary.
- Please use the chat on the right hand side to introduce yourself and where you are from.
- ▶ If you have any questions throughout, please pop your hand up.
- We will do breakout rooms to allow you to share ideas and good practice.
- Please be mindful that certain areas of safeguarding will be discussed, everything shared is strictly confidential.
- All slides will be sent out at the end so no pressure to have to take notes.





Importance of spotting signs:

What signs/behaviours would be indicators to you for safeguarding?



Importance of spotting signs:

Here are some of the common things to look out for:

- unexplained changes in behaviour or personality;
- becoming withdrawn;
- seeming anxious;
- becoming uncharacteristically aggressive;
- lacks social skills and has few friends, if any;
- poor bond or relationship with a parent;
- knowledge of adult issues inappropriate for their age;
- running away or going missing;
- Poor cleanliness and dirty appearance, body or clothes;
- unusual body odour, including a bad smell, alcohol or drugs;
- always choosing to wear clothes which cover their body.

It is important to note that this is not a comprehensive list and we must also take into consideration the individual and what is <u>usual</u> for them.



How do we assess when to intervene with a referral?

Nottinghamshire - Pathway to Provision:

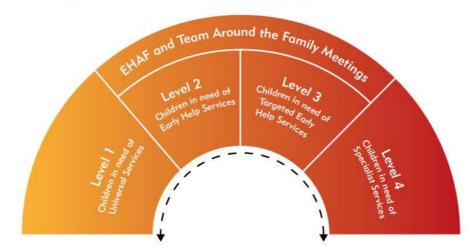


Figure 1: The Nottinghamshire Continuum of Children and Young People's Needs

NB. The Nottinghamshire Continuum illustrates the levels of need rather than numbers of children at each Level.

We can assess the level of need based upon the pathway to provision. Within the documentation it outlines each level giving you a good understanding on when it is best to intervene and seek specialist and services.

https://www.nottinghamshire.gov.uk/media/1731833/pathwaytoprovision.pdf





Child's Developmental Needs Parents and Carers HEALTH BASIC CARE, SAFETY AND PROTECTION . Good physical health . Carers able to provide for child's needs and protect from danger and harm Adequate diet/hygiene/clothing Developmental checks/immunisations up to date **EMOTIONAL WARMTH AND STABILITY** · Carers able to provide warmth, praise and * Accesses health services encouragement . Developmental milestones met including Speech & Language GUIDANCE, BOUNDARIES AND STIMULATION Carers provide appropriate guidance and boundaries * Appropriate height & weight to help child develop appropriate values * Healthy lifestyle Supports development through interaction and play Sexual activity appropriate for age . Good state of mental health Family and Environmental Factors No substance misuse (including alcohol) FAMILY HISTORY AND FUNCTIONING **EDUCATION & LEARNING** Supportive family relationships, Good attendance at school/college/training including when parents are separated . No barriers to learning HOUSING, EMPLOYMENT AND FINANCE Achieving key stages Housing has basic amenities and appropriate facilities · Appropriate levels of cleanliness/ hygiene are maintained **EMOTIONAL & BEHAVIOURAL DEVELOPMENT** · Growing level of competencies in · Not living in poverty practical and emotional skills **FAMILY'S SOCIAL INTEGRATION** · Good quality early attachments Good enough social and friendship networks exist Appropriate use of social media · Positive sense of self & abilities COMMUNITY RESOURCES Demonstrates feelings of belonging & acceptance · Good enough universal services in neighbourhood · An ability to express needs **FAMILY & SOCIAL RELATIONSHIPS** . Stable & affectionate relationships with care givers Good relationships with siblings · Positive relationships with peers SOCIAL PRESENTATION Appropriate dress for different settings Good level of personal hygiene



Age appropriate independent living skills

SELF-CARE SKILLS



Children or young people who don't present significant concerns and are living in circumstances where there may be worries, concerns or conflicts over time but these are infrequent, short lived and quickly resolved by the family themselves or with support and guidance from extended family, the community or professionals with whom they are normally in touch.





Child's Developmental Needs

HEALTH

- Slow in reaching developmental milestones
- Missing immunisations or checks
- Susceptible to minor health problems
- Minor concerns ref: diet, hygiene, clothing, alcohol consumption (but not immediately hazardous)
- Disability requiring support services
- Starting to have sex (under 16)
- Previous pregnancy

EDUCATION & LEARNING

- Occasional truanting or non-attendance, poor punctuality
- At risk of fixed term exclusion or a previous fixed term exclusion
- SEN Support
- Few opportunities for play/socialisation
- · Not in education, employment or training
- Identified language and communication difficulties
- Not reaching educational potential

EMOTIONAL & BEHAVIOURAL DEVELOPMENT

- Low level mental health or emotional issues requiring intervention
- Substance misuse that is not immediately hazardous including alcohol
- Superficial self harming as a coping mechanism
- Involved in behaviour seen as anti-social
- Attachment issues and/or emotional development delay e.g. adopted child
- involved in bullying behaviour

IDENTIT

- Some insecurities around identity
- May experience bullying around 'difference'

FAMILY & SOCIAL RELATIONSHIPS

- Some support from family and friends
- Has some difficulties sustaining relationships
- Undertaking accasional caring responsibilities
- Child of a teenage parent
- Child adopted from care
- Low parental aspirations

SOCIAL PRESENTATION

- Can be over-friendly or withdrawn with strangers
- · Personal hygiene starting to be a problem

SELF-CARE SKILLS

- Not always adequate self-care poor hygiene
- Slow to develop age appropriate self-care skills
- Overprotected/unable to develop independence

Parents and Carers

BASIC CARE, SAFETY AND PROTECTION

- Parental engagement with services is poor
- Parent requires advice on parenting issues
- Professionals are beginning to have some concerns around child's physical needs being met
- Professionals are beginning to have some concerns about substance misuse (including alcohol) by adults within the home
- Some exposure to dangerous situations in home/community/online
- Teenage parent(s)

MOTIONAL WARMTH AND STABILITY

- Inconsistent parenting, but development not significantly impaired
- Post natal depression
- · Perceived to be a problem by parent

GUIDANCE, BOUNDARIES AND STIMULATION

- May have different carers
- Inconsistent boundaries offered
- Can behave in an anti-social way
- · Spends much time alone (TV, etc)
- Child not exposed to new experiences

Family and Environmental Factors

FAMILY HISTORY AND FUNCTIONING

- Parents have relationship difficulties which may affect the child
- Experienced loss of significant adult
- May look after younger siblings
- · Parent has health difficulties
- Some support from family and friends

HOUSING, EMPLOYMENT AND FINANCE

- Families affected by low income or unemployment
- Parents have limited formal education
- Adequate/poor housing
- Family seeking asylum or refugees

FAMILY'S SOCIAL INTEGRATION

- Family may be new to area
- Some social exclusion problems
- Victimisation by others

COMMUNITY RESOURCES

 Adequate universal resources but family may have access issues





Children or young people where there are concerns and are living in circumstances where the worries, concerns or conflicts over time are becoming more frequent or are over an extended period.

In order to resolve the issues these children or families may require support, advice, direction and sometimes planned intervention or additional resources.

These resources would be agreed by professionals already involved.







Child's Developmental Needs

HEALTH

- Some concerns around mental health
- Has some chronic/recurring health problems
- · Missed routine and non-routine health appointments
- · Concerns re: diet, hygiene, clothing
- Conception to child under 16
- Sex with multiple partners
- Administration of substances in a hazardous manner (sharing equipment etc)
- Substance misuse impacts negatively on their risk taking behaviour (e.g. unprotected sex)
- Disability requiring significant support services
- Risk taking behaviour (e.g. unprotected sex)

EDUCATION & LEARNING

- Short term exclusion or persistent truanting, poor school attendance
- At risk of permanent exclusion or previous permanent exclusion
- Has an Education Health and Care Plan and / or High Level Needs funding
- · Not achieving key stage benchmarks
- Limited access to books, toys
- Persistent NEET

EMOTIONAL & BEHAVIOURAL DEVELOPMENT

- · Difficulty coping with anger, frustration and upset
- Physical and emotional development raising significant concerns
- Significant attachment difficulties e.g. child adopted from care
- Escalation of self harming*
- Early onset of sexual activity (13-14)
- Hazardous substance misuse (including alcohol)
- Persistent bullying behaviour
- Inappropriate sexual behaviour including online and via social media
- Offending or regular anti-social behaviour
- Carrying a weapon
- Found with quantities of drugs, more than personal use
- Frequent missing episodes

IDENTITY

- Subject to discrimination
- Significantly low self-esteem
- Extremist views
- Gang membership/affiliation

FAMILY & SOCIAL RELATIONSHIPS

- · Peers also involved in challenging behaviour
- Regularly needed to care for another family member
- Involved in conflicts with peers/siblings
- Adoptive family under severe stress

SOCIAL PRESENTATION

- Clothing regularly unwashed
- Hygiene problems
- Is provocative in behaviour/appearance

SELF-CARE SKILLS

- · Poor self-care for age hygiene
- · Precociously able to care for self

Parents and Carers

BASIC CARE, SAFETY AND PROTECTION

- · Parent is struggling to provide adequate care
- Parental learning disability, parental substance misuse (including alcohol) or mental health impacting on parent's ability to meet the needs of the child
- · Previously subject to child protection plan
- Teenage parent(s)
- · Either or both previously looked after

EMOTIONAL WARMTH AND STABILITY

- · Child often scapegoated
- · Child is rarely comforted when distressed
- · Receives inconsistent care
- . Has no other positive relationships

GUIDANCE, BOUNDARIES AND STIMULATION

- . Few age appropriate toys in the house
- · Parent rarely referees disputes between siblings
- Inconsistent parenting impairing emotional or behavioural development

Family and Environmental Factors

FAMILY HISTORY AND FUNCTIONING

- · Evidence of domestic violence
- · Acrimonious divorce/separation
- Family members have physical and mental health difficulties
- · Parental involvement in crime
- Evidence of problematic substance misuse (including alcohol)
- · Child is subject to a Special Guardianship Order

HOUSING, EMPLOYMENT AND FINANCE

- Overcrowding, temporary accommodation, homelessness**, unemployment
- Poorly maintained bed/bedding
- Serious debts/poverty impacting on ability to care for child

FAMILY'S SOCIAL INTEGRATION

- · Family socially excluded
- Escalating victimisation

COMMUNITY RESOURCES

- Parents socially excluded with access problems to local facilities and targeted services
- If no other concerns or risks are identified, discuss with primary mental health worker linked to school
- ** Homelessness if no other concerns or risks are identified is an issue for district and borough councils. Contact details at section D9 on page 27



A child or young person presenting significant concern and living in circumstances where the worries, concerns, behaviour or conflicts are frequent, are multiple and over an extended period or are continuous. The young person or family may be resistant to help offered and may require proactive engagement. Specialist assessment, plans and interventions are required if the situation is not to escalate into neglect, abuse or long term dysfunction.





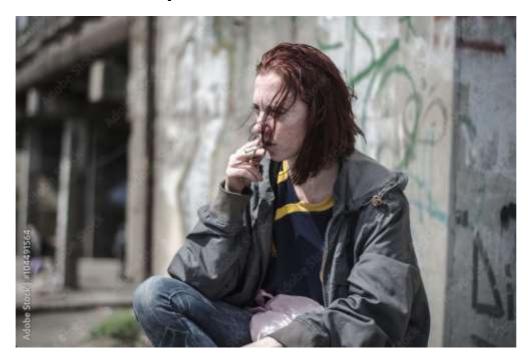
Child's Developmental Needs **Parents and Carers** BASIC CARE, SAFETY AND PROTECTION HEALTH Has severe/chronic health problems . Parents unable to provide "good enough" Persistent substance misuse parenting that is adequate and safe Non-organic failure to thrive Parents' mental health problems or substance Fabricated illness misuse significantly affect care of child · Injury and bruising in babies and children who are not · Parents unable to care for previous children independently mobile . There is instability and violence in the home continually Early teenage pregnancy · Parents are involved in crime Serious mental health issues · Parents unable to keep child safe Seriously obese Victim of crime · Dental decay and no access to treatment **EMOTIONAL WARMTH AND STABILITY** Sexual exploitation/abuse · Parents inconsistent, highly critical Sexual activity under the age of 13 or apathetic towards child Female genital mutilation (FGM)* . Child is rejected or abandoned Disability requiring highest level of support GUIDANCE, BOUNDARIES AND STIMULATION **EDUCATION & LEARNING** . No effective boundaries set by parents No education provision · Regularly behaves in an anti-social way Permanently excluded from school in the neighbourhood History of previous exclusions Child beyond parental control Home education where there are concerns and risks . Subject to a parenting order which may be related to Significant developmental delay their child/young person's criminal behaviour, antisocial due to neglect/poor parenting behaviour or persistent absence from school EMOTIONAL & BEHAVIOURAL DEVELOPMENT · Regularly involved in anti-social/criminal activities **Family and Environmental Factors** · Puts self or others in danger Endangers own life through self harm/substance misuse FAMILY HISTORY AND FUNCTIONING including alcohol/eating disorder/ suicide attempts Significant parent discord and including online/through social media persistent domestic violence In sexually exploitive relationship . Child looked after by a non-relative within . Frequently goes missing from home for long periods scope of private fostering arrangement Child who abuses others Destructive relationships with extended family Severe attachment problems and/or severe emotional · Parents are deceased and there are development delay · Regularly involved in anti-social / criminal activities no family/friends options . In contact with an individual identified as high risk to Being criminally exploited · Puts self or others in danger Fatalistic thinking / fear of repercussions . Parents are in prison and there are no family/friends options Experiences persistent discrimination HOUSING, EMPLOYMENT AND FINANCE . Is socially isolated and lacks appropriate role models · Physical accommodation places child in danger Alienates self from others No fixed abode or homeless** Distorted self image . Chronic unemployment due to significant lack of Extremist views or behaviour basic skills or long standing issues such as **FAMILY & SOCIAL RELATIONSHIPS** substance misuse/offending, etc. Looked after child · Extreme poverty/debt impacting on Care leaver ability to care for child · Family breakdown related in some way to child's behavioural difficulties FAMILY'S SOCIAL INTEGRATION · Family chronically socially excluded Subject to physical, emotional or sexual abuse/neglect COMMUNITY RESOURCES · Restricting and refusing intervention from services . Is main carer for a family member Adoption breakdown Forced marriage of a minor SOCIAL PRESENTATION · Poor and inappropriate self-presentation SELF-CARE SKILLS · Neglects to use self-care skills due to alternative priorities, e.g. substance misuse * FGM must also be reported directly to the police. ** Homelessness if no other concerns or risks are identified is an issue for

* FGM must also be reported directly to the police. ** Homelessness if no other concerns or risks are identified is an issue for district and borough councils. Contact details at section D10 on page 29.





A child or young person living in circumstances where there is a significant risk of abuse or neglect, where the young person themselves may pose a risk of serious harm to others or where there are complex needs in relation to disability.





Safeguarding in reality...



Direct link - https://www.youtube.com/watch?v=6caCqn_nD6o



How do you feel about safeguarding now?

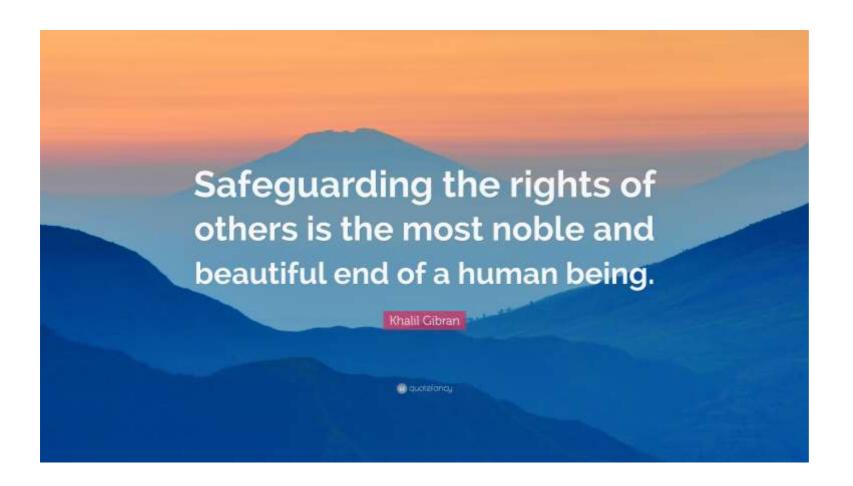
- How did the video make you feel?
- Has it made you view Safeguarding differently?
- Has your opinion changed on the inclusion and safeguarding of young adults?







Safeguarding can be lifechanging!





NSPCC Learning states:

- Volunteering can be a great way for young people to learn and develop new skills, gain experience for their future employment, 'give back' to an organisation that has previously offered them support and help their local community.
- As well as the time, support and skills that young people can offer, organisations can learn from their young volunteers particularly a young person's own experiences both within and outside of your group might be very different to those of adult volunteers. The peer support that young volunteers can provide can also be invaluable.
- If you're working with young volunteers then there are a few things you must consider. Organisations and groups must protect their young volunteers and do all they can to make sure that their volunteering experience is positive. This should be balanced with the needs of the groups and individuals you work with.





Assessing the risk

- As with all voluntary placements, you should carry out a risk assessment to identify any potential safeguarding issues that might occur with the tasks that young people are asked to undertake. These include:
- the potential risks for exploitation of the young volunteers
- the possible emotional impact of tasks
- the impact of pressures young people might be experiencing in their lives (for example during exams)
- Particularly with your younger adults it is recommended to gain parental/guardian consent

Hours and types of work

► There is no specific legislation about young people volunteering for a not-for-profit organisation. Following the rules for employing young people can help ensure you aren't expecting them to work excessive hours or carry out inappropriate tasks. https://www.hse.gov.uk/youngpeople/law/index.htm

You should also consider whether they are able to carry out the work and have everything they need to complete tasks. Your assessment of this should take into account the young person's age and stage of development, their circumstances and any additional needs they might have, in particular, mental





Sexual exploitation and grooming

- Forming healthy working relationships with adults and peers is an important part of being a young volunteer. However, you should be aware of the risks of grooming and other inappropriate behaviour. Measures you can take to mitigate risk include:
- having a code of conduct that sets out how you expect young volunteers and anyone working with them to behave.
- making sure young volunteers know who they can talk to if they have a concern and that they feel safe to do so.
- making sure young volunteers aren't left alone with anyone, unless as part of a designated support role.



Emotional impact and pressures

- ▶ Every club, group and organisation is different. You might work with vulnerable groups of people or your volunteers might undertake activities that are challenging or sensitive. You should think about the emotional impact of these on your young volunteers and make sure support is in place if they are ever worried or concerned about anything.
- In addition, young volunteers might be facing other pressures at home or at school. For example, they might experience additional stress during exam periods or if they have caring responsibilities at home. Consider whether you need to make any adjustments to their role and make sure they know who they can talk to if they need to.





Roles unsuitable for young people may include:

- Driving
- Working heavy equipment
- ▶ Roles where they would be working alongside people who have not had DBS checks, or who you know are not 'young person friendly', however this is also a time for older volunteers/staff to develop their attitudes and get to know and understand young people better. DBS checks are a must though, and regular monitoring of staff who supervise young people we all know that a police check is only a snapshot of a person's history, and not always the full story!
- Anything that puts them in a vulnerable situation, perhaps when they are working in isolation.
- No lone working don't put a young person in a situation where they could be at risk of harm themselves, or could put others at risk of harm.



For young adults suffering mental health concerns, volunteering can be the perfect support for them! A staggering 1 in 4 young adults suffer a mental health concern so it is likely you will come across individuals coping with mental health issues.

Volunteering has been shown to be beneficial to the mental health of individuals. It can improve overall mental health and also help to protect from mental health problems.

The Mental Health Foundation lists some benefits of volunteering:

- It provides structure and routine
- It can help people feel good about themselves
- It can improve feelings of self-esteem
- It provides opportunities to make friends and take part in social activities
- It can provide learning opportunities which can protect mental health







Can you suggest the benefits in volunteering for those affected by Mental Health?



- Ensure they are being properly supported within your individual settings.
- Link to support networks e.g. Young Minds for online support and advice. Also MIND is a fantastic charity online that offers help and support. UK charities:





- If applicable, chat regularly with parents and guardians to keep them up to date with how they are managing within the group and how they are getting on at home. (home/group relationship is key).
- Ensure they are aware of the urgent Mental Health helpline for Nottinghamshire:

Nottinghamshire Healthcare NHS Foundation Trust

0808 196 3779



More local Organisations and groups:

Crisis Team at Bassetlaw Hospital (0800 - 2000) 0300 123 1804

Nottinghamshire Service (2000 - 0800) 0300 300 0065

Centre Place - Talkzone in Worksop support those aged between 11 and 24.

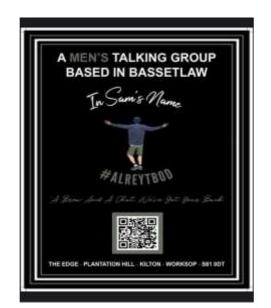
http://www.talkzone.org.uk/



- Nottinghamshire MIND
- Insight Counselling service, generally used by doctors to refer. Offers CBT, emotional coaching.



- SOBS For those affected by suicide/bereavement. This is a support group, one runs locally in Retford at The Well.
- Harmless Self harm and suicide charity. People can self refer to this.
- ► In Sam's Name Men's Mental Health support group.
- Meets fortnightly on a Thursday evening and one Sunday a month for a walk. Support group in Worksop, all welcome. Meet at The Edge Kilton.







- Do build links with employment and training providers that might help people with training and support in areas like self confidence, assertiveness, basic administration and IT skills. Many people with mental health issues will have been out of the work place for a while, or had their career and education interrupted. Often there are projects and services out there which can help with this.
- Do make sure that everyone in your organisation has an awareness and understanding of mental health, and opportunities to address issues of stigma and discrimination. There are specific training that you could tap into e.g. Mental Health First Aid.
- Do be available to people, and flexible in how people can access support.





Your next steps ...

Now that you have completed the session, please let us know in the chat area one thing that you have learnt today that you will take back and implement in your organisation.



Evaluation

Please complete our short evaluation form on how you have found this session.

Being able to measure the success of funded sessions like this one will give us more opportunities to be able to do more.

You can either scan this QR code to take you to the Form, or you can use the link, which we will put In the chat comments for you.



https://bit.ly/bcvs-evaluate



Links of relevant websites:

Notts Pathway to Provision

https://www.nottinghamshire.gov.uk/care/childrens-social-care/nottinghamshire-children-and-families-alliance/pathway-to-provision

NSPCC

https://www.nspcc.org.uk/support-us/ways-to-give/donate/?source=ppc-brand&gclsrc=aw.ds&ds_rl=1279303&ds_rl=1279303&gclid=EAlaIQobChMlrqXL2vC49gIV2u3tCh3oxQQwEAAYASAAEgL65_D_BwE&gclsrc=aw.ds

Nottinghamshire MIND

https://www.nottinghamshiremind.org.uk/

Young Minds

https://www.youngminds.org.uk/



Links of relevant websites:

Talkzone

http://www.talkzone.org.uk/

Nottinghamshire MIND

https://www.nottinghamshiremind.org.uk/

Insight

https://www.insightiapt.org/locations/bassetlaw/

SOBS

https://uksobs.org/support-groups/bassetlaw/

In Sam's Name

https://www.facebook.com/groups/457132082431436/

BCVS

https://www.bcvs.org.uk/



Special thanks to NAVCA

Special thanks to NAVCA for working in collaboration with BCVS to make this safeguarding training possible.





