



Safe & Sound

Safeguarding by Vicky Bell



I am aware that the word 'safeguarding' conjures up many thoughts and feelings in us as individuals, and all the more so if we are fulfilling a role in which we are truly listening to others.

Such feelings may be ones of resignation, fear, trepidation, uncertainty, annoyance, and the accompanying thoughts might include... 'Oh no! Is my mandatory training up to date?'; 'What have we got to do now!?!'; 'Sharing information, nothing ever comes of it anyway'; 'I was really let down by...'; 'Surely, it's not necessary they really don't want me to... ' and a whole host of other such concerns.

So, having said all that, what do I need to say to encourage you to read further? Well, this is a topic that excites me, because at its heart is a practical way of showing our love, care and concern for those we work with; showing them God's love and care in the process.

Just in case you are thinking I must live and work in some ivory tower somewhere, or float blissfully around on a cloud, rest assured the reality is far from that. Just these last two weeks I have been actively involved in a deluge of safeguarding, to such an extent that it was unusual to end a session with a client or supervisee and not then have a task related to safeguarding!

If for no other reason than intrigue,

please do read on and I in return will seek to keep this piece as practical and real as possible, providing you with some points and ideas upon which to reflect and think about regarding what you may do in your practice. I won't be going over what is often included in mandatory training, but I will try to speak from the place of a practitioner, who is dealing with safeguarding on a day-to-day basis.

I currently work as a counsellor and supervisor but have I also have a large amount of experience working in church and faith-based settings relating safeguarding. Most of my experience is related to children and young people (CYP) but not all, and I believe much of what I will be saying is transferable and relevant to vulnerable adults (VA).

SAFEGUARDING IS EVERYONE'S RESPONSIBILITY

To start with, I would offer the reminder that safeguarding is everyone's business and responsibility. It's not just for those of us working in professional settings or for people working with children and young people or vulnerable adults. It's for everyone... so that means you!

For example, any of the adults you listen to or work with may have CYP and VA in their lives and may even be a vulnerable adults themselves.

Someone you are speaking to may be working with (or have concerns about) CYP or VA.

At the end of the day, we are all encouraged to love our neighbour.

Safeguarding is relevant in all areas of pastoral care and counselling, regardless of the context.

The context in which you work or fulfil your role is important; you may have roles in a number of settings, each with slightly different contexts. It is imperative, therefore, that you are familiar with policies and procedures for each of those settings (contexts). These policies and procedures may differ from setting to setting as you operate and work within them.

Keep up-to-date with relevant information, including, for example, numbers to call. If they change and you haven't updated your records, then you're left scratching around for new numbers when you really don't have the time or capacity to worry about that, all of which adds to any anxiety and stress that you may already be feeling.

Another thing to be aware of is changes to procedures and making sure you know where to access that data easily, rather than having to scramble around in search of up-to-date guidelines, worrying about whether or not the version you have is the latest.

Please hear me... these things

can so easily happen to all of us. Pressure of work can mean such details are inadvertently overlooked, not having had to raise a safeguarding concern for ages, and so on. These factors can result in us saying, or thinking, 'I'll get round to it looking at it when I have the time . . . there are more pressing things to do now', and so on.

Something else to consider is that slightly frightening moment when we are sitting in on a training course, for example, staring at a computer screen whilst clicking through endless questions and all the time (secretly) thinking, 'How on earth am I ever going to be able to remember all this, or even know what to do?' If that rings any bells, read on . . .

CONSULTATION IS KEY!

I'll say it again: consultation is the key. The encouraging reality is that we don't actually have to make decisions all by ourselves. There may of course be the occasional time(s) when an immediate response is necessary and unavoidable, and you find yourself on your own or unable to leave the person you are listening to in order to find a quiet place for making a phone call, but I would hope and imagine such situations are relatively rare. I also hope you have been empowered and resourced so that you are able to manage such situations, but if not, maybe consider what actions you can take to minimize the likelihood of this becoming a problem. (I'm not suggesting you do something outside of your role or remit, but it may be helpful to pre-empt such matters by talking through with someone, beforehand. what you would do, and what concerns you have. Consultation!)

In the majority of situations, however, an immediate response is not required, beyond an 'I am concerned, and I need to consult / speak to someone, to consider what needs to happen in order to keep you safe'. At this point you may be able to speak to the individual

about who they would like to inform or / and anyone whom you think may need to be informed, or what action may need to be taken, including seeking relevant permissions if possible. This can save time at a later date and also means you are clear about what the client / person you are listening to consents to. Don't forget it may also be appropriate for that person to share such concern with someone themselves. (This doesn't necessarily remove responsibility away from you, but it empowers and encourages autonomy in the person themselves.)

It is important to be as clear as you can reasonably be, regarding what will happen. Seek to make any such advisory input clear, stressing that you will keep them informed, remembering of course that any information that has been shared with you is often very precious. Your client may be feeling quite anxious or uncertain.

You may have 'counselling conversations' on a regular basis, as I do, but it is important to remember that for the person you are working with, this may be the first time they have told anyone about issues that are personal and of a concerning nature. Consequently

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they may have stepped into an unknown world, emotionally-speaking, and might therefore be very fearful of the consequences and the process itself.

With consultation being key, it's important to know where and with whom you can actually consult! When speaking about consulting I mean a 'boundaried', confidential place / person, which is in accordance with given policies and procedures, where you can chat over, on a need-to-know basis, what you have heard, what actions (if any), may need to be taken and the timescale in question (not every action needs to be taken immediately). You may also find it helpful to record when you next speak to them. When consulting, you can often keep the person's



details anonymous. Regardless of how experienced you are, consultation can always be useful, as it can help us gain another perspective and make sure we aren't missing anything.

WHO SHOULD BE CONSULTED?

It is important that consultation happens within the guidance of relevant policies and procedures. I am not suggesting a chat with a friend or partner, simply because you feel no-one else is available. If there is no-one within your organization whom you may consult, then you can access appropriate national or local helplines and organisations, some of which are listed below. Accessing suitable assistance will help you to think through your options, and may also add to your personal database any local contacts relevant to your specific area of work. (Maybe keep the list handy so that you can easily access it when necessary.)

IDEAS OF PLACES / PEOPLE WITH WHOM YOU CAN CONSULT:

- Known areas of supervision / supervisory colleagues. This will often be the first 'go to' point of reference in terms of consultation, but I am not suggesting that you wait until your next booked supervision session, as this may not be appropriate. It may be useful to think about the supervision contract, checking to see what provision there is for consultation outside of planned supervision time; does this work for you? Can it be changed as your needs and requirements change? (Requirements, for example, linked to a particular client or a change in client group, workload, or case complexity.) Assess whether or not there are any barriers in place regarding your access to the amount of supervision you feel you need?
- Reflective practice group:

maybe specifically the facilitator of this; is this something they offer?

- Organisation(s) you work with, or within: What is the procedure enabling you to speak to your line manager or clinical lead? (If you are a manager or lead, it may be useful to reflect on what's in place for you, including where and with whom you yourself can consult?)
- Consultation lines such as:
 - Local CAMHS (child and adolescent mental health service).
 - Local social care (MASH: multi-agency safeguarding hub).
 - NSPCC (<https://www.nspcc.org.uk/>).
 - Thirty One Eight: A Christian charity of leading experts in safeguarding (www.thirtyoneeight.org/)
 - Beat: An eating disorders charity (<https://www.beateatingdisorders.org.uk/>)
 - Harmless: An organisation working in the area of deliberate self-harm and suicide prevention (<https://harmless.org.uk/>)
 - A safeguarding team within your diocese; local / national

church structure.

- ACC and other professional bodies that may have an ethics helpline; or practice resources covering issues of ethical dilemmas.

(Please note, this is not a complete list but it may give you an idea of some important and useful resources that are available.)

CONTRACTING

Clear contracting at the beginning of every counselling process is vital and can make managing a situation where a safeguarding concern is raised or expressed, much easier to manage. Clear contracting also empowers the person you are listening to, by providing them with information so they can make a choice about saying something that they are aware may result in you having to share that information with someone else.

Throughout any process it is also important to continue to seek to maintain client autonomy. This can be done by: keeping them informed of what may be happening, thereby making them fully aware of any actions you are likely to take (and the potential outcome of these), and discussing with them what actions they desire or are able to take. An example of this may be providing a young



person with the time to tell their parent / carer that they have been self-harming, or experiencing suicidal ideas or being bullied at school, to name some examples, and agreeing that you will be in contact with the parent / carer the following day. (Please note, this is just an example and would not be appropriate in all situations, but I think it is important to remember that often such arrangements are possible and desirable for all concerned.) It is also important to remember that there are times when it is appropriate that information/ concerns aren't shared with some people, even if that is a parent / carer.

Consultation is especially important when it comes to the sharing of information and even more so when consent to do so has not been given. In these situations it can also be really useful to ascertain why the person does not consent. What are their concerns and reasons?

It may be a good idea to ask if there is someone that they would be happy for you to share the information with; maybe, for example, regarding a CYP if they didn't want their parent to know, a teacher / GP/ friend's parent, etc. It may be that following consultation, it is decided it would be possible to share the information with that other nominated individual, but it can be really useful to have that information available, to inform your thinking and decision making.

In a pastoral setting, there may not be formal contracts in place, but it is nonetheless important that a church or organisation is very clear about confidentiality and safeguarding requirements, etc. with those to whom it offers care. This may need to be clarified quite explicitly with some individuals.



MAKING BALANCED JUDGMENTS AND MANAGING OUR FEELINGS

Safeguarding is often about making judgments . . . A process of making judgments that may be very different to the way we have been trained as pastoral carers or counsellors. Our training usually champions and encourages being non-judgmental and in fact this is a crucial quality. As such the need to make judgments with respect to safeguarding (and in this I include making an initial decision as to whether what you are listening to is something that raises a safeguarding concern) can make us feel us feel particularly uncomfortable. I don't have any quick fixes or slick answers regarding management of this, beyond acknowledging it is a feeling that many have; one that can feel really strange and may lead to some conflict with oneself as a practitioner.

These feelings can be especially heightened in the early days of addressing and managing safeguarding concerns and it can be useful to use supervision as a means of expressing them and seeking to come to a place where the feelings themselves don't become any kind of barrier that may produce unmanageable personal distress.

It may also be useful for a counsellor to speak to someone who has had more exposure and experience with respect to safeguarding, and to consult them regarding some of the outcomes of their interventions (precise details don't need to be shared and confidentiality and appropriate boundaries can still be maintained). No doubt, scare stories exist, relayed by those who experience has been less than positive. However, listening to those stories is unlikely to prove beneficial and whilst I do not deny their existence, in my experience there have been many more that have been positive.

Something that has helped me in my work has been to remind those that I am listening to that my need to act comes from a place of concern and care for them. I have seen this be supportive to even the most defensive young person, who is adamant they don't want anyone to know. To hear that I care enough for them to be prepared to act on their behalf has spoken volumes.

This has on some occasions included sitting together with our shared disappointment of an outcome, when disappointment regarding the behaviour of other people simply has to be acknowledged. Unfulfilled hopes can be part of that scenario.

MAINTAINING THE RELATIONSHIP

Another challenge, once a safeguarding concern is raised, is maintaining the relationship with the client / person you're listening to. It is important that this difficulty is acknowledged. It may be a fear that you have, and honesty compels us to admit that ruptures sometimes occur in relationships. The careful implementation of many of the points that have already been raised will make such ruptures less likely (such as clear contracting, keeping the person informed, empowering them and respecting their autonomy as much as possible, and so on). One of my observations, however, is that ruptures in relationships are actually quite rare, and probably more feared for their possibility than their actuality. (This reality does not, however, diminish the impact ruptures can have on a counsellor if and when they occur and is one reason why supervision is so important.)

SELF-CARE

It is important that we consider the impact that managing safeguarding concerns has on ourselves and in that respect, self-care is important. The reality is that dealing with safeguarding concerns has an impact on anyone working in this area. This can range from the additional time required to complete necessary paperwork or actions; hearing the concerns, being confronted with content that is concerning (over a number of weeks or even months), managing a number of complex cases, and coping with inevitable outcomes to concerns that have been raised.

My first challenge to counsellors is to reflect. That is to say, to first of all recognise the impact that managing safeguarding concerns is having. Having reflected, then to assess the resources in place to help you manage and mitigate impact. Are your resources meeting your current need? It is important

to recognise that such needs can change over time, dependent on many variables. If resource needs aren't being met, then consider what can be done to change the situation. Do you need to access supervision more regularly? Do you need to have a conversation with your line manager / boss in order to share how you are feeling? Would additional training help? Might it be useful to access some counselling for yourself if concerns are triggering or resonating specifically with something you are dealing with or something that has taken place in your own life? These are just some examples of questions to ask.

KEEPING RECORDS

I was participating in some safeguarding training once, where the comment was made, 'If it isn't written down it didn't happen'. This was a reference to the need to record all actions taken, including:

- Consultations - record with whom, when, decisions and outcome including clear and accurate recording of who will do what and by when.
- Conversations with others such as parents, professionals, be



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they email exchanges, phone calls, text messages or face-to-face dialogue with anyone privy to relevant information. For example, was an urgent GP's appointment requested? (If so, what was the response and outcome?) Any refusal to act upon agreed action needs to be recorded, not least because it may become necessary to refer to such records at some point in the future, perhaps especially if there has been any failure to follow through on a recommended and agreed course of action.

There is a comprehensive procedure for recording concerns, actions and outcomes. It is important to familiarise oneself



with any such protocol, and to be sure that it is kept fit for purpose. If you are unsure about such details, or have concerns about them, be sure to know who it is you should talk to about such matters.

Check that within the recording process, there is a way of recording emerging concerns, i.e. things that don't need require immediate action but which nevertheless raise a degree of concern. It is useful to log in a way that builds up a chronology, as sometimes the degree of risk and therefore concern is only evident once different pieces of information are collated over a number of occasions. It is therefore important to maintain a written record of these.

It is not my purpose here to speak about how notes and records are kept, beyond highlighting our responsibility to keep records in a way preserves an individual's confidentiality, is in line with relevant policies and procedures including GDPR, and which respects any guidance from the ACC or other relevant bodies.

MONITORING

I have mentioned that some concerns don't necessarily need an instant response, whereas others might. In both scenarios, monitoring may also still be necessary. The reality is that risk rarely goes away just because a concern has been raised. This leads us to need to consider whether or not we are best placed to monitor any risk. Often the answer will be no, perhaps especially if we see people on a weekly basis. It is therefore necessary to consider who is best placed to do this. Maybe someone at school? A parent / carer? A doctor? Possibly, it will be a number of people who are involved in the individual's life. Maybe the person in question attends a youth group at church and has a good relationship there. Might your client agree to any of those people being informed about your concerns so that they can

check in with them when they see them? (These are only ideas and things to think about and there will of course be times when such action is not appropriate.) All such information is useful in terms of our decision making, and needs to feed back into our consultations.

TRAINING

Having stated that I wasn't going to go over training, I do want to make clear that training is important. It needs to be kept up-to-date. Maybe you need to explore options for identifying training needs with respect to specific issues that have arisen? Areas of concerns have developed and changed over the years, emphasising the need for training to keep pace with developing trends. These are all areas that are important to reflect upon, so we shouldn't be afraid to acknowledge new needs in these respects. The reality is that there are lots of opportunities for accessing training on many different aspects and areas of safeguarding and risk, over and above what is mandatory. It may be that you find something really useful that you can then share with colleagues. Opportunities to develop skills and knowledge arise in many ways (articles, books, podcasts, for example, as well as specific courses). Likewise, it is vital to keep up-to-date with your organisation's mandatory training requirements, including refresher courses.

One thing I want to point out is the importance of listening out for third-party disclosures, by which I mean information shared regarding someone else who has explicitly stated that they feel at risk. You may well consider this an extra concern to be raised.

I hope you can take away from this article something that has been useful for you. We are all continually learning and developing and in order to facilitate this it is so important that we spend time reflecting.

Dealing with safeguarding isn't easy and I'm sure we all wish it

wasn't necessary, but we live in the real world, so let's seek to be as informed, as aware and as empowered as we can be so that if and when we come across concerns, we are best placed to empower and support, thereby fulfilling our responsibilities, all the time making sure we care for ourselves too.

Vicky Bell

About the author

I'm Vicky Bell and have been qualified and working as a counsellor since 2008 and Supervisor and Pastoral Supervisor since 2016.



Counselling has been my career since qualifying and I have worked predominantly for large charitable organisations providing counselling services to children and young people in both school and community settings. I also have substantial experience working with adults of all ages. Over the last two years I have also been working in private practice ; I provide text-based counselling and family therapy as well as seeking to intentionally work with the parents/carers of the children I work with.

I have two dogs and love being outside with them in nature, and have the privilege of living within easy walking distance of the sea. These are places where I often feel closest to God. Alongside this my therapeutic work has brought much depth and understanding to my faith. My greatest discoveries from the last year or so have been working with a spiritual director and the Spiritual Exercises in Everyday Life!.....added to this I have never worked so hard as a therapist as I have during this period, but thankfully I can still say I love the work I do!