# Pan-Sussex Child Protection & Safeguarding Policy & Procedures Group - Briefing for staff

The Pan-Sussex Child Protection & Safeguarding Policy & Procedures Group met on 28 April 2025.

This briefing provides updates on changes to the **NEW** <u>Sussex Safeguarding and</u> <u>Child Protection Policy and Procedures Resource</u>

#### **NEW POLICIES AND PROCEDURES WEBSITE**

All of our pan-Sussex safeguarding and child protection policies and procedures have now moved to a new website. This can be found here – Sussex Safeguarding and Child Protection Policy and Procedures Resource. Our new provider, Policy Partner Project, has extensive experience working



Policies, procedures and practice guidance chapters for Safeguarding Children Partnership.

Read More

with local authority social care services and safeguarding boards, and they have been expanding into children's safeguarding. The transition to this new platform is based on feedback from previous satisfaction surveys regarding accessibility and search functionality. We hope you find the new website easier to use. Please send any feedback to <a href="mailto:bhscp@brighton-hove.gov.uk">bhscp@brighton-hove.gov.uk</a>

# **NEW Child Sexual Abuse Pathway**

NHS England have recently recommissioned the Sussex wide Sexual Assault Referral Centres (SARC). This includes the Children's SARC. From the 1st April the moved moving form Pebble House in Brighton to the Saturn Centre at Crawley Hospital and is now provided by Mountain Healthcare. The new CSA pathway can be read here - Child Sexual Abuse Pathway.

### Children of Parents / Carers who Use Substances Problematically

Problematic substance use occurs when substance use is unsafe for the user or others, including prescribed medications. This policy update provides more guidance for practitioners on recognising and assessing the risks of problematic substance use. Practitioners are reminded to share information about parental substance use during pregnancy with maternity services to ensure quality pregnancy care, safeguarding birth plans, and understanding the baby's clinical needs post-delivery.



Working with Interpreters, Signers or Others with Communication
Skills to Safeguard Children and NEW GUIDANCE – Guidance for
Practitioners Working with Interpreters (opens as a PDF)

All agencies need to ensure they are able to communicate fully with parents / carers and children when undertaking child protection work.

Even when parents/carers appear to be fluent in English, they often do not understand technical or specific language relating to their situation and using an interpreter should be encouraged. The cultural context may be new to parents/carers and the terminology challenging and not something previously experienced in the country of origin or cultural group. When emotions are heightened a parents/carers ability to understand and respond appropriately, can be compromised, as processing and responding to information in a second/third language is exhausting and offering interpreter support is advised. <a href="MEW GUIDANCE">NEW GUIDANCE</a> has been created to support practitioners to work with interpreters.

#### Fabricated or Induced illness (FII) and Perplexing Presentations

(including FII by carers) This policy has been reviewed and now clearly defines Fabricated or Induced Illness (FII) and Perplexing Presentations (PP). It emphasises identifying and managing cases where a child's health is harmed by a carer's actions, with a focus on a multi-agency approach, careful medical evaluation, and safeguarding procedures. Key updates include:



- Adverse Childhood Experiences (ACE): Recognising that parents and carers may have experienced ACEs/trauma, a trauma-informed approach is recommended, keeping the child at the centre.
- **Medical Evaluation**: Independent observations and directly asking the child about their condition are crucial; for older children, this should be done without a parent present when possible.
- **Strategy Discussion**: In some cases, a Designated Doctor may need to be consulted for advice or attendance at meetings.
- **Sudden Infant Death and FII**: The Designated Doctor for Child Deaths may need to consult with the Designated Doctor for Child Safeguarding.

# **Non-Recent Abuse Allegations**

This policy has been reviewed and streamlined for ease of reading.

## **Children Living Away from Home**

This policy addresses safeguarding issues for children living away from home, including Local Authority foster placements, private fostering, children's homes, armed forces bases, boarding schools (including residential special schools), and custodial settings. Key updates include:

- All settings must have an anti-bullying procedure, regularly discuss children's worries, and ensure they know where to seek support.
- Additional information about children in residential settings.
- Clarification that if a child is held overnight in police custody, the Local Authority (LA) will be informed.
- More information on children in the youth custody service.

#### **Young People and Substance Misuse**

This policy update emphasises the importance of adopting an anti-racist approach when assessing the risks associated with drug and alcohol use among children and young people. This means actively considering and challenging bias, stereotyping, and systemic inequalities, and recognising how racial disparities can influence risk factors, access to support services, and societal perceptions.



The policy now includes young people with caring responsibilities for family members, those excluded or truanting from school, and those on part-time or reduced timetables as vulnerabilities to substance misuse.

The policy has expanded the list of questions to consider when determining the need for a referral to Children's Social Care for a child in need of protection. Practitioners should familiarise themselves with these questions.

Please contact <u>mia.bryden@brighton-hove.gov.uk</u> about any aspect of this briefing.