

Safeguarding Newsletter

Issue 25: June 2017



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Welcome Message from Paul Burnett, Chair, Oxfordshire Safeguarding Children Board

A key piece of legislation that will impact on the work of LSCBs in the future received Royal Assent just before the general election was called.

On 27th April 2017 the Children & Social Work Act became law and starts the process of implementing recommendations that were made by Alan Wood in his review of LSCBs published last year. As well as setting our frameworks for future local safeguarding arrangements the act also includes proposals for local and national practice learning reviews to replace SCRs and reform of CDOP arrangements.

The Act also contains important proposals on social work regulation, care leavers, the statutory inclusion of PHSE in schools and other measures. From an LSCB perspective there will be no immediate impact from the legislation since the Government has yet to publish draft orders and regulations that will revise 'Working Together'. These are planned to be out for a 12 week consultation in the Autumn. This was expected to be September 2017, but is now probably going to be a little later due to the election.

The expectation is that local plans will be drawn up by April 2018 and agreed for implementation by April 2019, but that some areas may propose and have agreed new arrangements ahead of this. In Oxfordshire we have already held a seminar and discussions about local arrangements we may wish to put in place. To date there has been little appetite for major change and a strong belief that we must retain an inclusive Board which enables all partners to have a voice in our overall safeguarding arrangements and direction of travel.



Our new Business Plan for 2017/19 is now published. The 3 key aims and their related priorities are:

1. **To provide leadership and governance** – increasing the effectiveness of the Board, partnership working with the Oxfordshire Safeguarding Adults Board and Community Engagement
2. **To drive forward practice improvement** – working to address neglect and working to safeguard adolescents
3. **To quality assure and scrutinise effectiveness of practice** – to take robust action following learning, to challenge improvements and to assess risk and capacity across the partnership.

Many of you will have attended our recent Annual Conference which was judged a great success. I want to thank those that did attend the event and to assure you that we are acting on some of the ideas and issues that were raised particularly by speakers that contributed to the day. More news of this will be included in our next newsletter.

I hope you will find this newsletter informative in headlining some of the major activities currently taking place across Oxfordshire. As always in the safeguarding world there is much happening and I continue to thank all partners for their commitment, motivation and support in driving forward work that is aimed at keeping our children and young people safe.

Paul Burnett
Independent Chair, Oxfordshire Safeguarding Children Board

Board News

The board met at the end of March 2017 and covered the following:

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| <p>Safeguarding Priorities</p> | <p>Partners from the safeguarding partnership agreed their safeguarding priorities for the coming year. There are eight priorities and they are in the business plan. They include:</p> <p>Aim 1: to provide leadership and governance</p> <p>Priorities: Improve the effectiveness of the board; collaborate with Oxfordshire Safeguarding Adults Board (OSAB) and engage with local communities.</p> <p>Aim 2: to drive forward practice improvement</p> <p>Priorities: Address neglect and safeguard adolescents at risk of exploitation.</p> <p>Aim 3: to quality assure and scrutinise the effectiveness of practice</p> <p>Priorities: Take robust action following learning; to ensure continuous improvement and to assess risk and capacity across the partnership.</p> <p>In practical terms this will mean actions such as:</p> <ul style="list-style-type: none"> • The introduction of a new 'practitioner portal on neglect' on the OSCB website, which collates guidance, resources and local learning for you • A special event for Supported Housing providers to highlight safeguarding concerns that they face and consider how the safeguarding network can work more effectively to respond to these • County wide review the current use of part-time timetables with a focus on safeguarding children and better meeting their needs – we know that children are at increased risk when they are not |
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| | <p>at school</p> <ul style="list-style-type: none"> • More work on domestic abuse – in particular young victims of it - with one outcome to be a new training programme. |
| Safeguarding in Education | <p>Christine Malone from the Schools Learning and Foundation Years Service at Oxfordshire County Council chairs a group which has a remit for safeguarding in education. She presented a report which highlighted attendance, exclusions, reduced timetables and children missing from school' as an on-going concern. The Head teachers present at the Board meeting explained the complexity of this issue and the challenges that schools face. It was agreed that the Board would address the safeguarding risks and a set of actions is being presented to the next meeting of the board's executive group.</p> |
| Training | <p>Alison Chapman, the county's Designated Nurse, chairs a group which oversees the provision of multi-agency training. The group has commissioned a new website for practitioners to book safeguarding training. This goes live in the summer.</p> <p>This change means that anyone who has not previously downloaded their certificate must do so now - as they will not be able to do so after the summer. It also means that there will not be any specialist online course topics.</p> |
| Impact assessment | <p>Over the last two years the OSCB and the Safeguarding Vulnerable Adults Board has carried out an "impact assessment" survey of partner agencies to check the impact of increased activity in the safeguarding system. Two recommendations were made in the light of increased workloads:</p> <ul style="list-style-type: none"> • Both boards require rigorous scrutiny of activity: Each board to review its own arrangements to ensure that the appropriate mechanisms are in place to check that partnership working remains effective and strong in the light of the increased activity, pressure on budgets, and limited pool of workers and levels of organisational changes • Workforce Development and Support: The Boards need to be reassured that training and support is robust and that partners are engaged with it, as complexity of cases; expectations and activity levels all increase. As organisations and roles change, more complex cases are held in universal services and more support and training is needed for these services. |

Children and Social Work Act

Reforms set out within the Children and Social Work Bill have now become law. The [Children and Social Work Act 2017](#) become an act of parliament after receiving Royal Assent on 27th April 2017.

The Act enshrines in law a number of significant changes.

Summary of key provisions

The Act includes provision about:

Corporate parenting and looked-after children:

- A requirement for every local authority to publish their local offer for care leavers, and provision of personal advisers to care leavers up to the age of 25
- The provision of information and advice to promote educational achievement in relation to previously looked after children
- Permanence provisions in respect of care and adoption proceedings in England and Wales. In respect of adoption, a duty to have regard to relationship with adopters
- Provision relating to the placement of children in secure accommodation elsewhere in Great Britain – namely Scotland.

Safeguarding of children:

- Establishment of a Child Safeguarding Practice Review Panel. Safeguarding partners for a local authority area in England must make arrangements for safeguarding partners, and relevant agencies to work together in exercising their functions for the purpose of safeguarding and promoting the welfare of children in the area.
- Provision to combine safeguarding partner areas and delegating safeguarding functions for two or more local authority areas in England – allowing areas are to be treated as a single area for the purpose of meeting their safeguarding functions.

Children's social care:

- Provisions relating to pre-employment protection of whistle-blowers. Combined authority functions relating to powers to secure proper performance.

Relationships, sex and PSHE education:

- Provision for compulsory relationships education for primary school pupils in England, as well as sex and relationships education for secondary school children.

Social workers in England:

- Provision for a series of changes to the regulation and training of social workers in England such as the creation of a new organisation, Social

- Work England, which will take over from the HCPC as the profession's regulator
- A requirement for the new regulator to obtain the education secretary's approval for professional standards
- New powers for the education secretary to set 'improvement standards' for social workers, and the introduction of assessments for practitioners.

International Awareness of Homophobia, Biphobia and Transphobia

To raise awareness about Homophobic, Biphobic and Transphobic (HBT) bullying and to mark International Day Against Homophobia, Biphobia and Transphobia in May 2017 <http://dayagainsthomophobia.org/> a display of art work created by local LGBTQ+ youth organisations and schools and settings will be hosted by County Hall.

Oxfordshire's Anti-Bullying Strategy wants to celebrate its excellent achievement in the Stonewall Equality Index 2016 (6th out of 50 local authorities that entered nationally). They want to highlight the work that is being done by young people in schools and settings to combat HBT bullying and promote a culture where it's good to be different and everyone feels safe to be themselves. Oxfordshire's Anti-Bullying Strategy are members of the Stonewall Education Champion Programme; and at the start of April this year Oxfordshire County Council also became a member of Stonewall's Diversity Champions to support commitment to equality for LGBTQ+ staff in our workplaces and public in our communities.

Oxfordshire has put the combatting of HBT bullying at the heart of the Anti-Bullying Strategy because we are aware of the particular vulnerability of LGBTQ+ children and young people. This is evident from the results of our online bullying survey – last year 6,500 children took part and results showed that those identifying as lesbian, gay, bi or transgender were more likely to be bullied and to feel significantly more unsafe both at home and at school.

The display in the ground floor public area of County Hall will include work by young people from the My Normal Youth Arts Project, Dr Radcliffe's Primary School, and Wheatley Park Secondary School, alongside resources from Stonewall and information about local support groups. The art work shows the creative expression of young people to raise awareness and support their peers. We aim to photograph and promote the display so that other schools and settings can use the resources and ideas to support the work they are doing to celebrate difference and create a culture inclusive of all.

Publication of Serious Case Review Child A and Child B

A summary:

Oxfordshire Safeguarding Children Board (the Board) conducted a Serious Case Review (SCR) after it emerged that two young children had been seriously abused by a man. He and his female partner were looking after them under a Special Guardianship Order. The children had previously been in the care of Oxfordshire County Council (the Council) and the Council's Children's Social Care (CSC) services had been instrumental in arranging for the children to live with the Special Guardians.

Findings:

A number of learning points and concerns about practice within and between agencies are identified in the SCR. However it is right to say at the outset that there was absolutely no indication that the children might be abused so seriously and extensively, within the Special Guardianship placement.

Themes in common with other Oxfordshire case reviews:

- Normalising and misinterpreting behaviour - linked to Special Educational Needs
- Identifying the increased safeguarding risks for children with learning disabilities and Special Educational Needs
- Identification of physical abuse and following process.

You can access the following documents the learning summary, overview report and the executive summary via the OSCB website:

Learning Summary:

<http://www.oscb.org.uk/wp-content/uploads/Child-A-and-Child-B-OSCB-Learning-Summary-March-2017.pdf>

Overview report:

<http://www.oscb.org.uk/wp-content/uploads/Child-A-and-Child-B-OSCB-Overview-Report-March-2017-1.pdf>

Executive summary:

<http://www.oscb.org.uk/wp-content/uploads/Child-A-and-Child-B-OSCB-Executive-Summary-March-2017.pdf>

Early Help Assessment, Team around the Family & Threshold of Needs

As many of you know the current Common Assessment Framework (CAF), Team Around the Child (TAC) and Thresholds of Need have been reviewed and redesigned.

The Early Help Assessment, Team Around the Family processes and Threshold of Need are vital components of ensuring that children and families get the right support at the right time. **This is sponsored by all OSCB partners.**

From the 1st March we are using the new Early Help Assessment (EHA) and Team Around the Family (TAF) paperwork as well as the revised Threshold of Need. These documents can be found here: <http://www.oscb.org.uk/themes-tools/>

The LCSS will provide advice and support to professionals on EHA and TAFs. They will also be responsible for the storage, reviewing and feedback to professionals on EHAs and TAFs which are completed.

All EHA's and TAF minutes will need to be typed and sent to your local LCSS team. These can be emailed or posted to:

| | | |
|---------------------|--|--|
| LCSS North | Samuelson House, Tramway Rd, Banbury OX16 5AU | LCSS.North@oxfordshire.gov.uk |
| LCSS Central | Knights Court, Between Towns Road, Oxford, OX4 3LX | LCSS.Central@oxfordshire.gov.uk |
| LCSS South | Abbey House, Abbey Close, Abingdon OX14 3JD | LCSS.South@oxfordshire.gov.uk |

For further information about Locality and Community Support Service please see here: **LCSS Communication for Partners**. For training on the new LCSS please see details below in the training update.

The Locality and Community Support Service is a new team, which is part of the wider changes within Oxfordshire County Council. For further information see here: **Changes to Children Services Oxfordshire** and visit the main Oxfordshire County Council website: <https://www.oxfordshire.gov.uk/cms/public-site/children-education-and-families>

The OSCB are launching a new training system from 1st August 2017.

What this means for you...

You will need to log onto the current training portal with Virtual College and download your certificates for any eLearning or face-to-face courses you have completed. Please make sure your certificates are saved once you've downloaded them. This needs to be done by 31st July 2017.

Certificates will not be able to be obtained after this date. It is important you do this otherwise you will not have proof of any training you have undertaken.

Link to current system: <https://oscb.safeguardingchildren.co.uk/>

If you require any further information please contact a member of the OSCB team via

Phone: 01865 815843

Email: oscb.training@oxfordshire.gov.uk

OSCB Procedures Manual

OSCB Procedures Manual is currently being updated and a new and more accessible platform will be launched in early July 2017. We will be able to update procedures more quickly in response to local changes and we will be working more closely with our national provider TriX going forward.

In future we will use the templates provided by TriX as the basis for any new or updated procedures because they represent best national practice and they can then be updated to reflect local perspectives and issues.

Warning over babies sleeping in car seats

**“Long periods sleeping in car seats may be dangerous for young babies,”
The Daily Mail reports.**

The results of a small study suggest spending long periods of time in a car seat may lead to babies having breathing difficulties.

But the researchers pointed out "we cannot be certain of the clinical significance or potential risks".

This novel study used a vehicle simulator to look at the effects of placing a newborn baby in a car seat at the 40° angle required for travelling.

Researchers tested 40 newborns that were a mix of preterm and full-term.

They found that while sat at this angle for 30 minutes – either stationary or when in motion – the babies' heart and breathing rate increased, and their blood oxygen levels were lower compared with lying flat in a cot.

The difficulty is knowing whether this would put the infants at serious risk – for example, whether their risk of stopping breathing goes up.

We don't know how many harmful effects may occur while a baby is travelling in a car seat, so a larger study is now needed.

Until then, the safety of a baby travelling in a moving vehicle is paramount. It's important to continue to use [car seats](#) as instructed for any journeys – and is also required by law.

Francine Bate, chief executive of [the Lullaby Trust](#), the charity who funded the study, advised parents to keep a watchful eye on babies travelling in a car seat, and to also avoid driving long distances without taking a break.

Where did the story come from?

The study was carried out by researchers from Great Western Hospitals NHS Foundation Trust, Swindon, the University of Southampton and the University of Bristol. It was funded by the Lullaby Trust and published in the [peer-reviewed](#) journal, Archives of Disease in Children: Fetal and Neonatal Edition. The article is [openly available](#) to [access online](#).

The Mail gives fairly balanced coverage of this study, including making the recommendation that babies should travel in a properly secured child seat during car journeys, as required by law.

What did the research involve?



**Practise fitting a baby
car seat before your
baby is born**

The study aimed to assess the effects of placing healthy full-term and preterm infants in a car seat positioned at an angle of 30° or 40°, either while static or moving. The intention was to replicate the normal routine of parents preparing for and then taking their baby on a car journey.

Mothers of 40 infants – 19 full-term and 21 preterm – were recruited when the babies were ready for hospital discharge. The babies were monitored continuously for their breathing rate, heart rate, blood oxygen levels and carbon dioxide levels on breathing in and out while spending 30 minutes in three different positions.

Half the infants were randomly allocated to be tested in the following order (protocol A):

- on a horizontal surface, seated angle of 30° (static)
- on the simulator, seated angle of 40° (static)
- on the simulator, seated angle of 40° with movements to simulate being in a car travelling at 30 mph (motion)

The other half received this sequence in a different order (protocol B): static 40°, moving 40°, then static 30°.

The babies' breathing and heart measures when they were lying in a cot (baseline) were compared with those during the tests.

The static 30° positions were tested using the babies' own car seats, as they were ready to go home. The 40° tests used the same seat placed on a motion simulator in the lab.

What were the basic results?

In the full sample of 40 babies, the average pregnancy duration was 36 weeks (range 31 to 39 weeks) and the average birth weight was 2.5kg (range 1.5 to 3.2kg). Babies were tested an average of 13 days after birth.

Looking at the static 30° positions, the only difference compared with baseline was more occasions where the blood oxygen levels were less than optimal.

There were, however, more changes when the babies were angled at 40° and in motion. Babies in these positions had significantly higher heart and breathing rates, and lower blood oxygen levels. Their carbon dioxide levels rose slightly, but not significantly so.

There were also more episodes where blood oxygen levels were notably lower than normal – less than 85% saturation, when normal would be in the high 90s. Comparing the preterm babies with the full-term infants, the changes were still in the same direction, but were less so than with the preterm infants.

The order of testing (protocol A or B) made no difference.

How did the researchers interpret the results?

The researchers concluded that: "Term and preterm infants showed significant signs of potentially adverse [heart and breathing] effects in the upright position at 40°, particularly with simulated motion."

They went on to say a larger study is required to investigate the significance of these results.

This valuable pilot study is said to be the first to have assessed the effects of a newborn baby sitting in a car seat in the more upright position needed to safely secure them inside a moving vehicle.

The findings suggest spending 30 minutes sat in a car seat while stationary at the lower angle of 30° has minimal effects. But being placed in a car at the necessary 40° angle, static and in motion, can have significant effects on the newborns' breathing and heart rate.

It's difficult to say whether the findings seen when a baby was positioned at the 40° angle could be harmful and put them at potential risk of stopping breathing, for example. We also have no information on the effects of spending longer than 30 minutes in this position.

And although minimal effects were seen when the babies were placed at a 30° angle, we don't know whether it could start to have an effect if the baby was left in the seat in this position for longer.

Because no studies have been done before in moving cars or simulators, the possible nature, frequency and magnitude of any adverse effects are unknown.

This makes it difficult to know the optimal sample size that would be needed to reliably capture any harmful effects – studies in a larger sample of babies are therefore needed to confirm these results.

The authors say the American Academy of Pediatrics currently recommends that all preterm infants should undergo monitoring in a car seat before discharge to check for low breathing or heart rate, or low oxygen saturation.

They say many UK neonatal units also follow a "car seat challenge" before discharging preterm babies from hospital. Even so, this doesn't take into account the effects of motion.

Further studies are needed to ensure the safety of newborns travelling in car seats. But for now, car safety remains paramount – parents and carers should continue to use car seats according to their instructions.

Dr Renu Arya, consultant paediatrician at Great Western Hospitals NHS Foundation Trust, who led the research project, said: "Parents should not stop using car safety seats to transport their infants. Infants must be protected in moving vehicles, and UK law requires car seats be used whenever infants travel in cars."

But it may be a good idea to rethink leaving a baby in a car seat for prolonged periods when they're not travelling.

Taking regular breaks when driving long distances is also recommended. As well as giving a baby a chance to move out of their car seat, it will also help keep the driver alert and reduce the risk of accidents.

The [Royal Society for the Prevention of Accidents](#) recommends taking at least a 15-minute break every two hours.

Link to report:

<http://www.nhs.uk/news/2016/10October/Pages/Warning-over-babies-sleeping-in-car-seats.aspx>

Thirteen Reasons Why and Blue Whale Challenge

Netflix series 'Thirteen Reasons Why'

There has been some concern globally about this Netflix series partly due to the storyline but mainly because of the graphic portrayal of the characters death – the way she cuts herself and how her parents respond. The responses of other pupils in the series has also been criticised for 'glamorising' suicide. The concerns are that vulnerable young people may pick up on the method and perhaps develop distorted beliefs about how others might respond to their death.

At the same time there are views that the series provides opportunities to talk about the issues experienced by the characters and to discuss suicide, challenge beliefs that others are responsible for a person's self-inflicted death and encourage help seeking.

The Jed Foundation (a US site) has developed the attached talking points and this blog advising viewers <https://www.jedfoundation.org/13-reasons-jed-point-view/> which colleagues might find helpful.

It is important for practitioners to be aware of this series and to be prepared to engage in a dialogue about it with young people, parents or professionals with the focus being on promoting mental wellbeing, being open about the issues covered and signposting to supportive agencies. Beyond that it will be difficult to monitor and curtail access. Practitioners should also be mindful that not all young people, vulnerable or otherwise will be adversely affected by watching this series and coercive measures to prevent viewing are unlikely to be helpful.

Blue Whale app

Of more concern perhaps is the Blue Whale App that encourages self-harm and suicide and is getting growing attention in the media:

<http://www.essexlive.news/deputy-headteacher-of-woodlands-school-warns-parents-about-potentially-deadly-social-media-game/story-30279882-detail/story.html> <https://www.connexionfrance.com/Practical/Health/Deadly-Blue-Whale-Challenge-spreads-to-France>
<http://www.dailymail.co.uk/news/article-4446556/Police-warn-Blue-Whale-suicide-game-heading-UK.html>

Public Health England have given the advice below and are advising that the name of this site is not used in dialogue or correspondence, however clinicians need to be aware of the name as it presents a risk.

Public Health England recommends that concerned parties should replay generic advice. The following pointers should be helpful:

- We encourage extreme caution on sharing online content to young people that may be distressing or upsetting. If young people express any concern or

worries over material they have seen online, or posts or comments that friends or other people have made, it is important to listen to them and offer support. Remember that harmful and distressing materials can be reported through social media channels.

- Providing information and signposting to support for all young people is important at all times. It may also be useful to provide advice on how young people can support themselves and their friends.
- Increasingly people use the internet to express themselves and share their thoughts and feelings, or to participate in online activities. Sometimes we may see things, read things or participate in things that we find upsetting and it's important to know what to do if this happens to look after ourselves and support each other.
- Samaritans, in partnership with Facebook has produced a guide on what to do if you are concerned about a friend. This information also applies to how to help colleagues or students.
<http://www.samaritans.org/sites/default/files/kcfinder/files/help-a-friend-in-need.pdf>
- If you have concerns that someone is suicidal, useful information can be found here:
<http://www.samaritans.org/how-we-can-help-you/what-speak-us-about/if-you%E2%80%99re-worried-about-someone-else/what-should-i-do-if-i>
<http://www.samaritans.org/how-we-can-help-you/what-speak-us-about/if-you%E2%80%99re-worried-about-someone-else>
<http://www.samaritans.org/media-centre/media-guidelines-reporting-suicide>
<https://www.reportingonsuicide.org>

Further guidance has been developed by the Suicide Prevention Lead Nurse at Oxford Health NHS FT about social media generally and responding to disclosures which can be obtained from the OSCB.

Help a Friend in Need



POSSIBLE SIGNS THAT A FRIEND IS NOT COPING WITH LIFE

If you see someone posting worrying messages or content on Facebook, or behaving out of character, it may be a sign that this person needs help. If you have a gut feeling that something is not right, you should act on it.

Facebook is proud to work with the Samaritans, to share potential signs that a friend might be struggling to cope and may need your help. This guide was originally created in partnership with The Jed Foundation and The Clinton Foundation.

Be aware of status posts, messages, photos or videos that include the following themes.

- Talking about feeling alone, hopeless, isolated, useless, or a burden to others: “I feel like I’m in a black hole”; “I don’t want to get out of bed...ever”; “Leave me alone”; “I can’t do anything right”, ‘It’s like the whole world is against me’
- Showing irritability and hostility that is out of character: “I hate everyone”; “F*@K the world”
- Showing impulsive behaviours: Like an increase in substance use, driving recklessly or taking other risks
- Insomnia posts: “3am again and no sleep”
- Withdrawal from everyday activities and losing interest in their appearance: “Missed another chem lab – I’m such a waste”; “Another day in bed under the covers”
- Use of Negative Emoticons: Repeatedly using emoticons that describe feeling:

TRUST YOUR INSTINCTS

If you see someone posting messages, photos, videos or links that suggest the person is not doing so well, you should reach out, talk to them as they may need some help. As a friend you know them best.



Tips from Facebook and Samaritans

HOW TO HELP A FRIEND IN NEED



“I’ve noticed you haven’t been yourself lately. Are you okay?”

If you have a friend who seems to be struggling with a problem or something they may not be handling very well, there is a lot that you can do to support them. Don’t shy away from it, reach out, let them know they are not alone and that it’s ok to ask for help.

Be clear and direct, do not use hints such as the “Like” button or replying with an emoticon, as these could be misinterpreted by the person you’re trying to help.

We understand that it can be tough to start this conversation, here are some suggestions:

- “I’m worried about you because you seem...”(e.g., sad, withdrawn, etc). – Have examples ready such as, “I was worried when I saw your comment say... “Be specific about what you noticed.
- Sometimes it’s easy to want to try and fix a person’s problems, or give them advice. Let them make their own decisions. “Do you want to talk about it?”; “What can I do to help?”
- Respect what they tell you. If they say no, don’t pressure them. You might say: “It’s okay if you don’t want to talk to me, but it is important that you talk to someone.
- Check they know where to get help e.g. Samaritans. Phone: (UK) 08457 90 90 90 (ROI) 116 123, family members, their GP or mental health services.
- If you say the wrong thing, don’t panic; show you understand, they are going through a tough time



WARNING SIGNS THAT SOMEONE MAY NEED URGENT HELP OR MAY BE AT RISK OF SUICIDE

While it can be hard, particularly online, to tell how someone is feeling, if they indicate that they may be thinking about suicide, you should always take this seriously.

Here are some examples of things someone at risk of suicide might say:

- Talking about suicide or wanting to die: “I want out”; “Everyone would be better off without me”
- “There’s no reason to live”
- Intense and urgent feelings of struggling to cope or intense guilt or shame, feeling trapped: “I can’t take it [the pain] anymore”; “There is no way out”; “I’m done”; “I’m so sorry for all the trouble I’ve caused everyone”
- Showing rage or seeking revenge: “I’ll show you all”; “She’ll be sorry”
- Saying goodbyes, giving away personal possessions, posting pictures with sad captions of those they love: “I’ll miss you all”; “You won’t have to worry about me anymore”
- Glorifying or glamorising death, or making death seem heroic: “Death is beautiful”
- Asking about suicide methods.

HOW TO HELP A FRIEND IN URGENT NEED

If you think a friend is feeling suicidal or might need help, please contact Samaritans, who are available round the clock, every single day of the year.



You can reach Samaritans on:

Phone: (UK) 08457 90 90 90 (ROI) 116 123 Email: jo@samaritans.org

1. Face to Face at a local branch for more information visit: www.samaritans.org
2. You can also report someone who may be suicidal to Facebook directly here.
3. If the person has made an explicit threat of suicide, you could contact the emergency services on 999.

REMEMBER TO:

- Listen without judgment, assumptions, or interruptions. Let them know that you believe what they are saying and take them seriously.
- Know your limits and do not place yourself in physical danger – the best way to help is to connect your friend to appropriate support.

No matter what, you shouldn't be embarrassed or worried about offending or upsetting your friend. Helping your friend may take some courage, but it is always worth the effort to support their health and safety.



Samaritans is available round the clock for anyone struggling to cope

Phone: (UK) 08457 90 90 90 (ROI) 116 123
Email: jo@samaritans.org
Web: www.samaritans.org

FOR MORE INFORMATION ABOUT SUICIDE PREVENTION ON FACEBOOK,
GO TO: <https://www.facebook.com/help/suicideprevention>

FOR MORE INFORMATION ABOUT HOW TO SUPPORT HELP YOURSELF OR
A FRIEND, VISIT: www.samaritans.org

This guide, while evidence based, is for informational and educational purposes only and is not intended to constitute medical advice or be a substitute for professional diagnosis and treatment.

OSCB Training Update



Early Help Assessment training

The Locality and Community Support Service (LCSS) has been created as part of Oxfordshire County Council's, Children's Services Integration Programme to support partner agencies across Oxfordshire.

There is training via OSCB on the Early Help Assessment (formerly CAFs) process and the Team Around the Family (TAFs) paperwork. Please find available dates via OSCB training portal.

You will need to register / log on to the online training system to book onto a course: <http://www.oscb.org.uk/booking-training/>

Female Genital Mutilation multi-agency training

Course outline:

This course will explore the issues involved in female genital mutilation, with speakers from the police, health and Oxford Against Cutting.

Objectives:

- To gain more insight into the issues involved in female genital mutilation
- To have an overview of how local issues in Oxfordshire are being tackled
- To have an awareness of how to support young people where FGM is a concern
- To know how and to whom to report concerns
- To understand the importance of the multi-agency role.

Target Audience:

Social Workers (including LCSS and EH), Health Visitors, Education, other professionals working with children and young people.

Venue:

Didcot Children and Family Centre, Park Road, Didcot, OX11 8QX

Date and Time:

June 22nd, 9.30 to 12.30

Launch of Safestories website



SAFE! (Supporting Young Victims of Crime) have launched a new website for young people www.safestories.org. Safe Stories was created to highlight some of the issues being faced by teenagers as a result of mobile and internet technologies. The characters of Maddie, Mitchell, Katie and Jess were created during group sessions with young people who had been supported by SAFE!

Their stories are based on their own experiences and whilst the end results are not a 'true story', you can be sure that each element is based on a real situation. The stories are designed to encourage a 'one step removed' approach to talking about an issue and an indirect approach to problem solving. If we can think about what Maddie or Katie might feel, we can reflect on our own experience, and seek personal solutions. The video stories are designed to be accessed directly but can also be used in conversation with young people by professionals and parents. It is also designed to encourage any young person to seek help if they are struggling with an issue such as these.

SAFE! is also available to provide support for young people, aged 8 and upwards, who have been victims of crime, (including severe bullying), The support is based on protective behaviours and helps young people regain their confidence and sense of safety. To find out more about the support offered, including how to make a referral, please visit: <http://www.safeproject.org.uk/>

Campaign for body confidence

The Be Real Campaign's mission is to change attitudes to body image and help all of us put health above appearance and be confident in our bodies. They have produced a toolkit for schools as in order to tackle body confidence later in life, it is essential that it begins from an early age. Further information can be found here: <http://www.berealcampaign.co.uk/schools/>



THE CAMPAIGN FOR BODY CONFIDENCE

County Lines Gang Violence, Exploitation & Drug Supply 2016



An updated report by the National Crime Agency (NCA) has found that the use of 'county lines' by gangs, is a growing issue, exploiting vulnerable adults as well as children and young people.

County lines exploitation describes how gangs from large urban areas supply drugs to suburban and rural locations.

The NCA National Briefing Report can be viewed here:

www.nationalcrimeagency.gov.uk/...county-lines-gang-violence-exploitation-and-drug-...



NoBody Campaign

NoBody is a campaign to help young people understand what a healthy relationship is and re-think their views of controlling behaviour, violence, abuse, sexual abuse and consent:

<https://www.gov.uk/government/collections/disrespect-nobody-campaign>



The campaign has created a series of striking posters (see right) that can be downloaded and printed here:

<https://www.gov.uk/government/publications/disrespect-nobody-campaign-posters>

Anti-Bullying News

Jo Brown, Anti-Bullying Coordinator at Oxfordshire County Council has published her latest newsletter featuring updates on the latest developments in this area. This can be viewed here: <http://schools.oxfordshire.gov.uk/cms/schoolsnews/anti-bullying-newsletter-may-2017>

Oxfordshire Safeguarding Children Board was proud to once again sponsor the anti-bullying competition. Further information can be found in the anti-bullying newsletter and winning entries can be seen here: <http://oxme.info/cms/life/anti-bullying-week-2016-competition-winners>



Oxfordshire County Council is pleased to announce that we are working with the Anti-Bullying Alliance (from April 2017 to October 2018) to become an All Together Area and work to reduce bullying of children in schools. As part of this scheme FREE training is being provided to schools and the wider children's workforce in Oxfordshire.

This training will support Children's workforce professionals to reduce bullying amongst children, with a particular focus on children with Special Educational Needs and Disabilities. Attendance from any children's workforce professional is welcomed including; Social workers; Healthcare professionals; Youth Offending Teams; Early Years Providers; Post 16 providers; youth workers; School Governors; Information, Advice and support workers, LCSB's.

Further information can be found here: [Oxfordshire All Together Programme Children's Workforce flyer](#)