

Protecting Children and Supporting their Wellbeing

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Contents

1.0	Introduction: Meeting the Wellbeing Needs of all Children	1
2.0	The Context for Child Protection	4
3.0	Role and Responsibilities of Education Services	12
4.0	Identifying and Responding to Concerns about Children	15
5.0	What happens once I've made a referral?	17
6.0	Risk Assessment	19
7.0	Allegations of Abuse by a Staff Member	23
8.0	Children Missing from Education	24
9.0	Children educated at home	24
10.0	Equal Protection Bill	24
11.0	Prevent Strategy	25
12.0	Multi-Agency Guidance for Children and Young People who Display Harmful and Problem	
	Sexual Behaviours (Appendix 13)	25
13.0 O	Inline and mobile phone child safety	27
14.0	Key Reference Documents	27

1.0 Introduction: Meeting the Wellbeing Needs of all Children

This guidance sets out our aspirations for all children in Inverclyde and outlines the procedures for all education establishments to follow to protect children and ensure their wellbeing. This is consistent with current National Guidance for Child Protection Scotland (2021 and updated in 2023) (Supporting documents - National Guidance for Child Protection in Scotland 2021 - updated 2023 - gov.scot (www.gov.scot).) This guidance reflects the Inverclyde Multi Agency Child protection procedures (2023), produced in partnership with six neighbouring Child Protection Committees – East Renfrewshire, Renfrewshire, East Dunbartonshire, West Dunbartonshire, North Lanarkshire and South Lanarkshire and provides a framework within which agencies and practitioners can understand and agree processes for working together to support, promote and safeguard the wellbeing of all children. These can be found here: https://www.inverclyde.gov.uk/assets/attach/16814/Inverclyde-Multiagency-Child-Protection-Procedures..docx

They also serve as a resource for practitioners on specific areas of practice and key issues in child protection, developing a shared understanding of our common objective - to support and protect children, particularly those who are most vulnerable.

Common responsibilities are:

- to protect children from harm and abuse;
- to ensure that all children have a safe, caring and stimulating learning environment;
- · to promote the wellbeing of all children; and
- to respond appropriately when a concern is identified.

It is essential that all employees comply with this guidance where directed.

- **1.2** The <u>Supporting documents National Guidance for Child Protection in Scotland 2021 updated 2023 gov.scot (www.gov.scot)</u> is in 4 parts:
 - Part 1 The context for child protection addresses the definitions, key principles, standards and legislative framework that underpin the approach to keeping children safe and promoting their wellbeing.
 - Part 2a Roles and responsibilities for child protection outlines the core responsibilities of services and organisations including statutory and non-statutory services, third sector organisations, and church and faith communities. The role of Education Services, including schools and early years settings is set out on Pg 45 at 2.48 2.58. The role and functions of Child Protection Committees are addressed here, as well as the key responsibilities of Chief Officers. Effective leadership and staff development and training are also outlined as are the connections with other strategic planning fora.
 - Part 2b Approaches to multi agency assessment in child protection outlines common elements in multi-agency assessment of children and families as well as identifying cross-cutting expectations and themes.
 - Part 3 Identifying and responding to concerns about children provides a framework for identifying and managing risk and outlines the common stages of responding to concerns about a child's safety. This includes early gathering of

information, joint decision-making and planning, joint investigations and medical examinations and assessment, IRDs and Child Plan meetings where Child Protection is the primary issue.

Part 4 – Specific support needs and concerns gives additional information on dealing with specific circumstances that may impact adversely on children as well as addressing operational considerations in certain circumstances. While a range of special or specific circumstances has been included, the national guidance does not provide detailed guidelines on areas of practice/policy that are covered elsewhere. Rather, where appropriate, it signposts to relevant policies and materials or provides a framework of standards that local policies will need to consider.

There are several key changes in the updated 2021 Guidance, one of which is to reflect the greater integration of child protection within the Getting it right for every child (GIRFEC) continuum. This results in the use of GIRFEC language and core components to frame identification and proportionate responses to child protection concerns using the National Practice Model. The updated guidance outlines the continuum of support for all children, from supports provided by universal services such as education, through to protection from significant harm. This reinforces the understanding that the wellbeing and safety of children are inextricably linked and should not be treated as two separate aspects. There is a clear emphasis on the importance of GIRFEC in protecting children, particularly in recognising that all children must receive the right help at the right time.

1.3 'Getting it right for every Child, Citizen and Community'

- 1.4 Getting it Right for Every Child provides a rationale and structure within which services to children are planned, delivered and reviewed by all agencies. Within Education Services, this policy introduces a revised pathway for education and multiagency partnership working. This articulation with the ASL policy (2022) icon ASL Policy) is intended to help everyone involved to work together within an agreed framework to identify and respond to the needs of children and young people.
- 1.5 The local authority is responsible under the Children (Scotland) Act 1995 to prioritise services to children who have been identified as being in need. The promotion of wellbeing is now well established within the Getting it Right for Every Child (GIRFEC) approach as outlined in the Children and Young People (Scotland) Act 2014. The use of the wellbeing indicators as a "common language" for identifying need is now implemented across agencies. Inverclyde's approach for children and young people provides a clearly identified pathway from universal services for all children to those children in need of statutory support, care and protection.
- 1.6 Curriculum for Excellence (2004) alongside Realising the ambition (2020) are forward looking, coherent curriculum for 3- to 18-year-olds that provides Scotland's children and young people with the knowledge, skills and attributes needed for life in the 21st century. For this to be achieved, wellbeing is essential, and it is recognised that a collaborative approach will be most successful.
- 1.7 The National Guidance Pre-Birth to Three: Positive Outcomes for Scotland's Children and Families (2010) shares the philosophy of Curriculum for Excellence (2004) and Realising the Ambition. Staff working with and on behalf of our youngest children and

their families will continue to recognise the importance of pregnancy and the first years of life in influencing children's development and future outcomes.

- 1.8 The Independent Care Review published in 2020 gave inception to The Promise (What is the promise?) . It was built on the views of children and young people and when published the then First Minister pledged that the county would keep the promise and implement the recommendations of the Care review in full by 2030. Prior to this the Children's Charter (2004) reflected children and young people's own views regarding what they need and the standard of care they expect when they have problems or are in difficulty and need to be protected. It showed that children and young people placed more value on relationships and attitudes than on processes and events. This should be reflected in the planning and implementation of all child-focused interventions.
- 1.9 The Children (Scotland) Act 1995 is based on principles drawn from the United Nations Convention on the Rights of the Child (UNCRC) (1989). The values and standards contained within the UNCRC underpin the planning, development and delivery of services for children and young people within Inverclyde. It is important to promote a climate and ethos where we listen to children and young people.

Our local practice emphasises the importance of recording the views of pupils across all of our support documentation. In addition, the Children and Young People (Scotland) Act 2014 places duties on Scottish Ministers to take appropriate steps to further promote and raise awareness and understanding of the rights of children and young people as set out in the UNCRC.

In December 2023 the Scottish Government passed the United Nations Convention on the Rights of the Child (Incorporation) Bill which requires Scotland's public authorities to protect children's human rights in their decision-making when delivering functions conferred by Acts of the Scottish Parliament. It also allows for children, young people and their representatives to use the courts to enforce their rights, Reconsideration Stage | Scottish Parliament Website.

Children must be helped to understand how child protection procedures work and how they can contribute to decisions about immediate safety and their future. Practitioners must ensure they listen to children, seek their views at every stage of the child protection process and give them information relating to the decisions being made subject to their age, stage and understanding. Where appropriate, Advocacy Services should be sought to assist the child to illicit and or articulate their views.

1.10 Inverclyde Council is the corporate parent for looked after young people, that is, those children and young people who are subject to statutory measures of care. Inverclyde is committed to ensuring that looked after children and young people achieve the same wellbeing and success that all parents would wish for their own children. Each child is an individual and when children and young people become looked after we must plan for their future. This approach fits with Getting it Right for Every Child, a central element of which is the ability of agencies to draw support from each other to meet the needs of a young person. Under the Education (Additional Support for Learning) (Scotland) Act 2009 (as amended) all children who are looked after by a local authority are deemed to have additional support needs. For those who need help it will make sure their needs are met as they move through school. Reference should be made to the Inverclyde Education Services ASL policy (2022) in relation to this: icon • ASL Policy

1.11 Inverclyde's Child Protection Committee (ICPC) is the lead strategic inter-agency group, which has the responsibility for the planning and monitoring of child protection work in Inverclyde. The ICPC is made up of senior officers from the Local Authority, NHS Greater Glasgow and Clyde, Inverclyde's Health and Social Care Partnership, Police Scotland, Scottish Children's Reporter Administration and Voluntary organisations.

One of the subgroups of the ICPC is the Child Protection Practitioners Group. This group is made up of colleagues from all agencies who regularly meet to have themed discussions, such as CSE or neglect and at times will have guest speakers. This is a group where information and latest research is shared and it's an opportunity too for networking and building relationships with our colleagues in other services. The Group is usually chaired by a colleague in Social Work. At present, Clare Fallone, the Child Protection Lead Officer (Clare.Fallone@inverclyde.gov.uk), is currently working to have new dates set for meeting up and encouraging a good uptake for participating. This Group would welcome Heads, Deputes, Child Protection Coordinators, Guidance Staff or someone on your staff who is interested in further developing their knowledge of Child Protection. You can contact Clare for more information.

- **1.12** The Corporate Director of Education, Communities & Organisational Development is a member of the Chief Officers Group which demonstrates a very high level of commitment to ensuring the continuous improvement of services to protect children.
- 1.13 The Head of Education has senior officer responsibility and is the Corporate Director's representative on the ICPC. Their specific responsibility is to ensure that all Heads and nominated Child Protection Co-ordinators are trained in the contents of this policy and related current developments in Child Protection legislation. The Principal Educational Psychologist and a Head teacher representative (currently the Head teacher at Newark Nursery School) are also members of the ICPC.

The Principal Educational Psychologist and Education Officer for Inclusion attend quarterly national meetings for Safeguarding leads with Education Scotland.

2.0 The Context for Child Protection

- 2.1 The Children (Scotland) Act 1995 gives local authorities a duty to protect and promote the wellbeing of children in need in their area. This includes giving families appropriate support to help ensure their children are getting the best start in life.
- 2.2 Education Services has a legal duty to contribute to the protection, wellbeing, welfare and safety of all children and young people to fulfil this duty, the service works in close partnership with parents, carers and partner agencies. These are primarily Social Work and Health services, the Police and the Scottish Children's Reporter's Administration (SCRA).
- 2.3 In fulfilling their role and responsibilities in child protection, Education staff must be aware of the legal context of child protection. Children at risk are the concern of the child protection system. This may involve SCRA and the Children's Hearing system acting to protect children in the absence of criminal prosecutions or convictions.
- **2.4** GIRFEC has ten core components, which focus on improving outcomes for children, young people and their families. These are based on a coordinated approach and

shared responsibility. This includes using a common language for identifying and assessing need, and for planning to meet need. At each stage of the GIRFEC process practitioners are encouraged to use a set of five key questions as tool to assist decision making. These questions are:

- What is getting in the way of this child/young person's wellbeing?
- Do I have all the information I need to help this child/young person?
- What can I do now to help this child/young person?
- What can my agency do to help this child/young person?
- What additional help, if any, may be needed from others?
- 2.5 Protecting children involves preventing harm and/or the risk of harm from abuse or neglect. Child protection investigation is triggered when the impact of harm is deemed to be significant.
- 2.6 In assessing whether harm is or may become 'significant', it will be relevant to consider:
 - the child's experience, needs and feelings as far as they are known
 - the nature, degree and extent of physical or emotional harm
 - the duration and frequency of abuse and neglect
 - overall parenting capacity
 - the apparent or anticipated impact given the child's age and stage of development
 - extent of any premeditation
 - the presence or degree of threat, coercion, sadism and any other factors that may increase risk to do with child, family or wider context
- 2.7 Sometimes, a single traumatic event may constitute significant harm for example a violent assault, suffocation or poisoning. More often, significant harm results from an accumulation of significant events, both acute and long-standing such as neglect, that impacts the child's physical and psychological development.
- 2.8 Significant harm is a matter for professional judgement and requires practitioners to make a decision about a child's needs, the capacity of parents or carers to meet those needs, and the likelihood of harm, significant or otherwise. In understanding risk it is important to that the wishes, feelings and reactions of the child inform the assessment of need and risk.
- 2.9 Care and Risk Management (CARM) provides a template for child centred practice in the risk assessment and risk management of the critical few children (12-17 years) who present a risk of serious harm to others. <u>Information for Professionals -</u> <u>Inverclyde Council</u>
- 2.10 All local authorities are responsible for maintaining a central register, known as the Child Protection Register, of all children including unborn children who are the subject of an inter-agency Child Protection Plan. It has no legal status but provides an administrative system for alerting practitioners that there is sufficient professional concern about a child to warrant an inter-agency Child Protection Plan.

2.11 Key concepts and terminology

A clear and consistent understanding of the different concepts and terminology in child protection is essential. If action to support and protect children is to be informed and effective, all stakeholders must have a clear, consistent understanding of what is meant by terms such as 'child', 'child abuse', 'neglect' and 'child protection'. The national child protection guidance provides definitions and explanations of key terms within child protection processes.

2.12 What is child abuse and child neglect?

Abuse and neglect are forms of maltreatment. Abuse or neglect may involve inflicting harm or failing to act to prevent harm. Children may be maltreated at home; within a family or peer network; in care placements; institutions or community settings; and in the online and digital environment.

Those responsible may be previously unknown or familiar, or in positions of trust. They may be family members. Children may be harmed pre-birth, for instance by domestic abuse of a mother or through parental alcohol and drug use.

2.13 Definitions of Harm

2.13.1 Physical abuse

Physical abuse is the causing of physical harm to a child or young person. Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, or suffocating. Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes, ill health to a child they are looking after.

There may be some variation in family, community, or cultural attitudes to parenting, for example, in relation to reasonable discipline. Cultural sensitivity must not deflect practitioners from a focus on a child's essential needs for care and protection from harm, or a focus on the need of a family for support to reduce stress and associated risk.

2.13.2 Emotional abuse

Emotional abuse is persistent, emotional ill treatment that has severe and persistent adverse effect on a child's emotional development. 'Persistent' means there is a continuous or intermittent pattern which has caused, or is likely to cause, significant harm. Emotional abuse is present to some extent in all types of ill treatment of a child, but it can also occur independently of other forms of abuse.

It may involve:

- conveying to a child that they are worthless or unloved, inadequate or valued only in so far as they meet the needs of another person
- exploitation or corruption of a child, or imposition of demands inappropriate for their age or stage of development
- repeated silencing, ridiculing or intimidation
- demands that so exceed a child's capability that they may be harmful
- extreme overprotection, such that a child is harmed by prevention of learning, exploration and social development
- seeing or hearing the abuse of another (in accordance with the Domestic Abuse (Scotland) Act 2018)

2.13.3 Neglect

Neglect consists of persistent failure to meet a child's basic physical and/or psychological needs, which is likely to result in the serious impairment of the child's health or development. There can also be single instances of neglectful behaviour that cause significant harm. Neglect can arise in the context of systemic stresses such as poverty and is an indicator of both support and protection needs.

'Persistent' means there is a pattern which may be continuous or intermittent which has caused or is likely to cause significant harm. However, single instances of neglectful behaviour by a person in a position of responsibility can be significantly harmful. Early signs of neglect indicate the need for support to prevent harm.

GIRFEC sets out the essential wellbeing needs of all children. Neglect of any or all of these can impact on healthy development. Once a child is born, neglect may involve a parent or carer failing to provide adequate food, clothing and shelter (including exclusion from home or abandonment); to protect a child from physical and emotional harm or danger; to ensure adequate supervision (including the use of inadequate caregivers); to seek consistent access to appropriate medical care or treatment; to ensure the child receives education; or to respond to a child's essential emotional needs.

2.13.4 Faltering growth refers to an inability to reach normal weight and growth or development milestones in the absence of medically discernible physical and genetic reasons. This condition requires further assessment and may be associated with chronic neglect.

Malnutrition, lack of nurturing and lack of stimulation can lead to serious long-term effects such as greater susceptibility to serious childhood illnesses and reduction in potential stature. For very young children the impact could quickly become life-threatening. Chronic physical and emotional neglect may also have a significant impact on teenagers.

2.13.5 Child Sexual abuse (CSA)

Child Sexual abuse is an act that involves a child under 16 years of age in any activity for the sexual gratification of another person, whether or not it is claimed that the child either consented or assented. Sexual abuse involves forcing or enticing a child to take part in sexual activities, whether or not the child is aware of what is happening.

For those who may be victims of sexual offences aged 16-17, child protection procedures should be considered. These procedures must be applied when there is concern about the sexual exploitation or trafficking of a child.

The activities may involve physical contact, including penetrative or non-penetrative acts. They may include non-contact activities, such as involving children in looking at or in the production of indecent images, in watching sexual activities, using sexual language towards a child, or encouraging children to behave in sexually inappropriate ways.

2.13.6 Child sexual exploitation (CSE)

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive

a person under 18 into sexual activity in exchange for something the victim needs or wants, and/or for the financial advantage or increased status of the perpetrator or facilitator.

The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact. It can also occur through the use of technology. Children who are trafficked across borders or within the UK may be at particular risk of sexual abuse.

2.13.7 Criminal exploitation

Criminal exploitation refers to the action of an individual or group using an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity in exchange for something the victim needs or wants, or for the financial or other advantage of the perpetrator or facilitator. Violence or the threat of violence may feature. The victim may have been criminally exploited, even if the activity appears consensual.

Child criminal exploitation may involve physical contact and may also occur through the use of technology. It may involve gangs and organised criminal networks. Sale of illegal drugs may be a feature. Children and vulnerable adults may be exploited to move and store drugs and money. Coercion, intimidation, violence (including sexual violence) and weapons may be involved.

2.13.8 Child trafficking

Child trafficking involves the recruitment, transportation, transfer, harbouring or receipt, exchange or transfer of control of a child under the age of 18 years for the purposes of exploitation. Transfer or movement can be within an area and does not have to be across borders. Examples of and reasons for trafficking can include sexual, criminal and financial exploitation, forced labour, removal of organs, illegal adoption and forced or illegal marriage.

2.13.9 Female genital mutilation

This extreme form of physical, sexual and emotional assault upon girls and women involves partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons. Such procedures are usually conducted on children and are a criminal offence in Scotland. FGM can be fatal and is associated with long-term physical and emotional harm.

2.13.10 Forced marriage

Forced marriage is a marriage conducted without the full and free consent of both parties and where duress is a factor. Duress can include physical, psychological, financial, sexual and emotional abuse. Forced marriage is both a child protection and adult protection matter. Child protection processes will be considered up to the age of 18. Forced marriage may be a risk alongside other forms of so called 'honour-based' abuse (HBA). HBA includes practices used to control behaviour within families, communities, or other social groups, to protect perceived cultural and religious beliefs and/or 'honour'.

The consequences of forced marriage can be devastating to the whole family, but especially to the young people affected. They may become estranged from their

families and wider communities, lose out on educational opportunities or suffer domestic abuse.

Some of the potential indicators of honour-based violence and forced marriage are listed below:

- Absence and persistent absence from education.
- Request for extended leave of absence and failure to return from visits to country of origin.
- Decline in behaviour, engagement, performance or punctuality.
- Being withdrawn from school by those with parental responsibility.
- Being prevented from attending extra-curricular activities.
- Being prevented from going on to further/higher education.

Cases of honour-based violence/forced marriage can involve complex and sensitive issues and care must be taken to make sure that interventions do not worsen the situation. For example, mediation and involving the family can increase the risks to a child or young person and should not be undertaken as a response to forced marriage or honour-based violence. Efforts should be made to ensure that families are not alerted to a concern that may result in them removing the child or young person from the country or placing them in further danger.

Concerns may be expressed by a child or young person themselves about going overseas. They may have been told that the purpose is to visit relatives or attend a wedding. On arrival, their documents, passports, money, and mobile phones are often taken away from them. These concerns should be taken seriously, although practitioners must also be careful to avoid making assumptions.

2.13.11 A clear distinction must be made between a forced marriage and an arranged marriage. An arranged marriage is one in which the families of both spouses are primarily responsible for choosing a marriage partner for their child or relative, but the final decision as to whether or not to accept the arrangement lies with the potential spouses. Both spouses give their full and free consent. The tradition of arranged marriage has operated successfully within many communities for generations.

2.14 Standards for Child Protection

- 2.14.1 Education Services has a key role to systematically monitor the effectiveness of practice, policy, and adherence to this policy in every establishment. The peer review process of Inverclyde Education Establishments assures compliance with this policy by ensuring that care and welfare standards are adhered to and proportionate, via a child protection self-evaluation and review process, carried out by the Headteacher rep on the ICPC.
- 2.14.2 Through the inspection process Education Scotland and the Care Inspectorate have a responsibility to assure the quality of care and education of all children. The HM Inspectorate of Education (HMIe) provide the quality framework for monitoring and evaluation of child protection; within HOW GOOD IS OUR SCHOOL 4? Quality Indicator 2.1 focuses on Safeguarding and Child Protection.
- **2.14.3** Education Services and Inverclyde Child Protection Committee (ICPC) monitor and evaluate the provision made to support and protect children. This is done through

ongoing self-evaluation including case file audits. Quarterly IRD audits are carried out as well as reviews of the National minimum data set.

Education Services are in the process of setting up a Child protection subgroup that will meet after each ICPC meeting so that the three reps can share key documentation and messages with a wider group of education reps. This group will also monitor the implementation of this guidance as well as the ongoing audits of school and ELC child protection practice. This will include developing a deeper dive process to be introduced from August 2024, which will see each establishment visited once over a three-year period. The current model of a self-audit review and reflective discussion as part of the peer review process will be further developed, alongside a more enhanced training programme linked to the ICPC.

2.15 Information sharing

- 2.15.1 Information sharing is an essential part of child protection. To achieve the best outcomes for a child, staff must understand when and how it is appropriate to share information. Please ensure that a record is kept of all phone calls and correspondence both using SEEMIS / Pastoral notes and a CP chronology. This should be kept in the CP file (see App 7). The subgroup referred to in 2.14.3 will provide further clarification and updates on this as their work and audits are ongoing.
- 2.15.2 In all cases, the first and most important factor to consider is safety. Any sharing of information should be relevant, necessary, legitimate, appropriate and proportionate and go no further than the minimum necessary to achieve the public interest objective of protecting a child or young person's wellbeing.

2.16 Managing Information

- 2.17.1 Effective management of information is very important. Education Services will ensure meticulous record keeping of all child wellbeing and protection concerns through the use of Pastoral Notes on SEEMIS (Early Years's will use Gateway Pastoral Notes however throughout this document and appendices SEEMiS will be referred to). Recording must also include a robust electronic chronology of events and contacts which help professionals to understand key events in a child's life. This electronic chronology must be reviewed and analysed regularly for effective planning to improve the outcomes for a child. All information related to protecting the child should be filed in a confidential case file and stored securely. (Appendix 8).
- **2.16.2** All establishments with access to SEEMIS must use the pastoral notes function within SEEMIS to record ongoing pastoral involvement with children and young people. This ensures that one contemporaneous record is kept of ongoing issues in relation to a child or young person which can be accessed by relevant staff involved with the child.
- 2.16.3 Establishments are responsible for ensuring the right paperwork and plans are in place for all pupils. This includes planning for those pupils on the Child Protection register. Where this plan is being produced by another service i.e. Children's services / Social Work, under the leadership of a lead professional not in education and the plan hasn't been shared then this should be escalated to the lead professional

responsible for the plan in the first instance. If the plan is not forthcoming the member of school staff linked to the child should raise this with the Head of Establishment who should then raise this with the lead professional / social worker responsible and, if needs be, the linked Senior Social Worker. If the plan is still not shared, this should then be escalated to the establishment's Education Officer who will in turn raise this with the Head of Education who will link with their counterpart and raise this with them i.e. the Chief Social Work Officer. If this requires communication and escalation to a Children's service team out with Inverclyde, then this will be done by the Head of Education.

2.17 Confidentiality

- **2.17.1** All children and young people are entitled to have matters treated in confidence. Where there is no risk to wellbeing, establishments must respect that request. However, when the assessment shows that the child's wellbeing is at risk there can be no guarantee of confidentiality and 'secrets cannot be kept' (Appendix 1).
- **2.17.2** Best practice is that consent should be obtained at the earliest opportunity. Parents, carers, children and young people will be given an explanation about the concerns and information about the duties and responsibilities of agencies towards children at risk of harm. The circumstances making the sharing of confidential information lawful are:
 - where the individual to whom the information relates has consented;
 - where disclosure is in the public interest/function; or
 - where there is a legal duty to do so e.g. there is statutory authority to share information with the Reporter to allow a decision to be made as to whether a compulsory supervision order might be necessary.

If a concern is about Child Protection consent is not needed.

3.0 Role and Responsibilities of Education Services

- 3.1 The role of Education Services is to be alert to the need to act in the best interests of children and in co-operation with other key agencies to keep children safe and well.
- 3.2 In delivering the council policy, the responsibilities of the authority, establishments, services and individual staff extend to:
 - reporting a concern;
 - support
 - inter-agency co-operation; and
 - training

Staff may be involved in monitoring a child's wellbeing and behaviour and have a responsibility to gather and record relevant information.

- 3.3 Education staff play a significant role in the protection of children from abuse through the vigilance of staff and by implementing robust procedures. Education Services empowers children through its education process, to give them confidence and the capabilities to achieve their potential and to keep safe.
- 3.4 Curriculum for Excellence 4 and Realising the Ambition: Being Me too, places great emphasis on children's health and wellbeing, from keeping safe to managing risks such as alcohol and drugs.
- 3.5 Through the development of health promotion in schools, there is a strong emphasis on meeting the health needs of children and young people. Good health has significant positive effects on personal, social and educational achievement. The ethos of health promotion in schools encourages decision- making skills and a sense of responsibility. Learner-centred activities enable pupils to develop high self-esteem and personal and social skills, which equip them to make healthy and safe lifestyle choices.

3.6 Core Principles contained in Promoting Positive Relationships (PPR) in our Education Establishments is central to the work of all establishments. All schools must adopt a positive and inclusive ethos and seek to minimise the need to exclude pupils. They are responsible for identifying and supporting pupils at risk of exclusion. Where a child is Care Experienced or on the Child Protection register then guidance must by sought from firstly the Virtual Head teacher or in their absence the Education Officer for the school, before an exclusion takes place, to ensure that the wellbeing of the child is not compromised by the exclusion. Ultimately if no Education Officer is available then this should escalate to the Head of Education.

Staff Responsibilities

3.7 It is the responsibility of all staff to report a concern directly to the Head of Establishment or CP Co-ordinator. This responsibility extends to all staff working within an establishment including janitorial staff, catering staff, support staff and visiting specialists.

At the start of each new school year all staff should receive annual Child Protection refresher training delivered by the CP Co-ordinator. A PowerPoint for this annual update will be sent to all Heads of Establishment by the Head of Education in June of each academic year. This training should include all non-teaching staff, including admin and facilities staff linked to the establishment. In the case of the catering staff it has been agreed that the senior member of the catering team will attend this training and then share on with the rest of their team.

- **3.8** All staff must be confident and competent to:
 - contribute to a positive ethos which seeks to minimise the risk of harm;
 - ensure the wellbeing of all children and young people;
 - focus on prevention and early intervention strategies;
 - respond professionally and effectively to any concern, in particular where there is imminent risk to a child;
 - share relevant information within Education Services itself;
 - co-operate on an inter-agency basis to share information which contributes to a child's wellbeing and make certain that they are familiar with the ICPC policy, education service and establishment policy; and
 - know and understand their own role and responsibilities;
 - complete CP Record of Concern (Appendix 3)
- 3.9 Heads of Establishment and Managers will ensure that all relevant parties, including parents and carers are involved and kept fully informed of all associated developments, which relate to the child or young person.

3.10 Role of Head of Establishment Child Protection Co-ordinator

The Head Teacher or Head of Establishment is the key member of staff with responsibility for all child protection issues. This role may be shared with Depute Head teachers in larger schools.

Responsibilities include:

 ensuring that these education service child protection guidelines are brought to the attention of all staff annually as part of the annual update presentation including reference to the ICPC policy; that they have access to the guidelines, are issued with the 'Child Protection Action Guidance' leaflet. Appendices 1 and 2 should be prominently displayed in the staffroom and Appendix 3 should be emailed to all staff

- ensuring that temporary staff have access to a copy of the 'Child Protection Action Guidance'
- ensuring the guidance in these Child Protection Guidelines and Procedures and the 'Child Protection Action Guidance' leaflet are followed;
- ensuring, as appropriate that all staff know that there is a named Child Protection Co-ordinator, including the prominent display in key areas of the establishment of the Child Protection Co-ordinator poster – Appendix 11
- ensuring inclusion of child protection issues within the establishment's improvement planning process;
- promoting career long professional learning (CLPL) within the establishment and enabling attendance at child protection training for self and staff; all staff should receive Level 1 child protection training endorsed by Inverclyde Child Protection Committee through e-learning or attendance at training. The head of establishment should ensure that evidence is kept of this e.g. attendance records for the annual update.
- advising assisting and supporting staff members;
- establishing a positive ethos which supports and values children and contributes to their welfare and general protection;
- supervising ongoing child protection work, including personal and social development initiatives;
- informing Parent Council and parents of policy, procedures and initiatives and, as appropriate including relevant information in establishment handbook; and
- developing links with other Education Services' establishments and with other agencies to promote the protection of children.
- Ensuring that all planning for pupils is in place relating to child protection and as laid out in 2.16.3, escalating this matter should planning from other services not be forthcoming.
- Ensuring that all paperwork and files relating to child protection for a pupil is securely passed on at the point of transition to another establishment

Partnership Working

- 3.11 Services in Inverciyde work together to support children and their families. They work in partnership to focus on providing services to meet the needs of children and their families. Services that include Social Work, Police, Health Services and the Scottish Children's Reporter's Administration (SCRA) work together with Education Services to share information, plan and take collaborative action that is in the best interests of children.
- 3.12 Education Services will ensure that all authority engaged providers, including partnership nurseries, further education colleges, New Scots team, voluntary organisations and private providers will be given a copy of this guidance by the relevant Education Officer. The key principles and points of practice bring a consistent approach to a shared responsibility when working with children and young people.
- **3.13** Working in partnership with parents and carers is best practice and is essential. It is important to share relevant information. It is also crucial that staff listen to and respect

the views of the child or young person and explain clearly the need to share relevant information.

3.14 Where concerns relate to ongoing concerns about wellbeing such as physical neglect, the Head of Establishment will already be collaborating with parents and carers and will be working within the GIRFEC context, this guidance and the Education Service's ASL policy. Parents will be informed and asked for consent to share information when the integrated assessment process begins. It is not necessary to have consent to share information if there is a wellbeing concern about a child.

The Assessment of Care Toolkit could also be used as a tool if concerns about neglect emerge – see Appendix 14.

Career Long Professional Learning and Training

- 3.15 It is the responsibility of all staff to ensure that they are familiar with this guidance and associated CLPL materials and activities.
- **3.16** Every Education Services establishment has a Child Protection Co-ordinator. They have an important role in working with child protection trainers and CLPL Co-ordinators to provide easy access to appropriate documents, information and literature for all staff, including students, temporary and supply staff.
- 3.17 Inverclyde Child Protection Committee (ICPC) has a CLPL online training programme catalogue where all relevant multi-agency training opportunities are outlined. This should be readily available to all staff: Child Protection Inverclyde Council
- 3.18 The Child Protection: Level 1 course is mandatory for all Education Services staff. Child Protection Trainers will work with Heads of Establishment and Managers to provide Level 1 course training in child protection for all permanent staff. Temporary staff should be supported through individual training opportunities and up-to-date printed information.

4.0 Identifying and Responding to Concerns about Children

- **4.1** Any concerns regarding children should be immediately reported to the establishment's child protection coordinator, who will then report this to social work or the police accordingly. Any of the following may have taken place:
 - a specific incident;
 - a disclosure made by a child or parent or carer;
 - information from a third party;
 - adult behaviour or circumstances that may place the child at risk of harm; or
 - child behaviour or circumstances that may place the child at risk of harm.
- 4.2 A notification of concern link form should be made to social work, or the Police as soon as any concerns regarding a child arises. The notification should be made to the Request for Assistance team. If the referral is received outside Office Hours a referral should be made to the Out of hours Social Work Service or the Police. Information for Professionals Inverclyde Council
- 4.3 Contact details -
 - Request for Assistance 01475 715365

Out of hours social work service 0300 343 1505

What information do you need to make a referral?

4.4 Concerns about harm to a child from abuse, neglect, exploitation, or violence should be reported without delay to social work or in situations where risk is immediate, to Police Scotland. Prompts below are not an assessment. They may support accuracy in an initial outline of concerns, assisting prompt, efficient response.

Name role/contact details of person reporting concern

Key contacts

Name of the child, age, date of birth and home address if possible

Name/address/phone of parents/carers or guardians

Culture/language/understanding: any considerations in communication?

Name of child's school, nursery/ early learning centre or childcare

Is it known if the child is on the Child Protection register?

Immediate needs and concerns

What is the nature of the child protection concern?

Where is the child now?

How is he/she now?

Physically: does he/she have any known injuries or immediate health needs and do they require

medical treatment?

Emotionally: how is he/she right now and what does she/he need immediately for their reassurance/understanding?

Communication and understanding; is he/she able to communicate without interpreting/without additional support for communication?

Is the child safe now?

If not, in your view, is there action that might be taken to make them safe?

Record of concerns

When did these concerns first come to light? What happened? (For example because of an injury? through what this or another child has said? because of how a child appears? or due to e.g. parental behaviour?)

Is a person are persons are believed to be responsible for harm to a child?

If so, is/are their name/address/occupation/relationship to the child known?

Are you aware if this person has/these persons have access to other children? (Name, age and address details of such children if available?)

If the concern was raised by this child then who has spoken to him/her?

Is the person who has spoken to the child available to be spoken with?

What has the child said to this point? (Please note and share)

What he/she has been asked, when and by whom? (Please note and share)

If concerns were not reported when they first arose, was there a reason for this

4.5 Investigating child abuse and safeguarding children | College of Policing

What happens next?

- **4.6** You should
 - Record the name and details of the person you made the referral to
 - Ask them to give you feedback on your referral where this is possible (and it does not prejudice any legal action)

What happens when social work/police receive your referral?

- 4.7 On receipt of a referral social work and or police will carry out an initial assessment of the information. where the information indicates a very low level of concern the matter may be diverted to a single agency for appropriate action, or to multi-agency partners to coordinate a plan for a Child in Need.
- **4.8** Where it is deemed to be a child protection matter, child protection procedures will be implemented. The receiving agency social work and or police will -
 - Treat every referral seriously gather information available, assess and analyse this
 jointly and make decisions based on the information.
 - Jointly assess the situation and determine how best to progress the matter, the welfare of the child will always be of paramount consideration.
 - · Identity who will be responsible for feeding back to the referrer
 - Agree the need to arrange an Initial Referral Discussion to plan the child protection investigation.
 - Consider the need for any emergency legal measures required or statutory measures via a referral to the Children's Reporter

5.0 What happens once I've made a referral?

- 5.1 Section 5 of the ICPC guidelines outlines the IRD process that follows a referral being made, including timelines that should be followed.
- **5.2** Education should be represented at an IRD i.e. the establishment's child protection coordinator.

5.3 Consideration of the Need for an Inter-Agency Referral Discussion

- An inter-agency referral discussion (IRD) is the formal process of information sharing, assessment, analysis, and decision-making following reported concern about abuse or neglect of a child or young person up to the age of 18 years.
- 5.5 Concerns may relate to familial and non-familial concerns, and of brothers / sisters or other children within the same context. This includes an unborn baby that may be exposed to current or future risk.
- 5.6 An IRD takes place whenever a child protection referral is received from any agency by police, health or social work and indicates that a child has suffered, is suffering or may be at risk of significant harm, abuse, or neglect. The IRD provides the strategic direction through joint information sharing, assessment and decision making.

5.7 Timescales

5.8 The IRD must be convened as soon as reasonably practical. The national best practice standard is that an IRD should be convened within 48 hours and Inverclyde aspires to this standard. Where there is a risk to the life of a child or the likelihood of immediate risk or significant harm, intervention must not be delayed pending information gathering/sharing. The IRD process may have to begin out with core hours, with a focus on immediate protective actions and interim safety planning. A comprehensive IRD must be completed as soon as practical, normally the next working day.

5.9 Process

- 5.10 The IRD can be a process rather than a single event. Information must be gathered, shared, and recorded at each meeting, to support co-ordinated decision-making and response by the core agencies. Where concerns exist in relation to multiple families / children, a strategic and coordinated response will be required. Additional agencies including adult services, or third sector agencies may also contribute information to inform the decision-making process.
- 5.11 Social work services have lead responsibility for enquiries relating to children who are experiencing or are likely to experience significant harm and assessments of children in need. The police have lead responsibility for criminal investigations relating to child abuse and neglect and share responsibilities to keep the child safe. A designated health professional will lead on the need for and nature of recommended health assessments as part of the process.

5.12 Agency representation

5.13 Core agency representatives will be responsible for joint decision making within the IRD. They must be sufficiently senior to assess and discuss available information and to make decisions on behalf of their agency. This would normally be a senior social worker, a detective sergeant, the identified child protection advisor NHS Lanarkshire/Glasgow, and an appropriate Education Manager. On some occasions, senior managers from private schools, nurseries, adult services or third sector organisations may be included for the duration of the IRD.

5.14 Interim safety plan

5.15 The purpose of an interim safety plan is to ensure a child's immediate safety until such time as a CPPM is held. An interim safety plan is about safety right now and those who are participants in the plan must understand and agree what they must do to ensure a child's safety. The safety plan must be recorded and shared and must be in plain language.

The plan should –

- set out how reduce risk is to managed and reduced
- describe the actions that persons or services will take
- state how the plan will be monitored
- clearly set out how any person or service involved in the plan can immediately signal concern
- contain contact details for those with defined responsibilities within the plan

5.16 Closure of IRD and progression to child protection planning meeting

5.17 Section 8 of the ICPC guidance outlines the process for a Child protection investigation.

The IRD process will not be considered completed until a decision is made as to the need for a child protection investigation which is reflected in the IRD record along with an agreed safety plan which identifies individual tasks and timescales to protect the child or young person during the investigation.

- **5.18** An IRD can be re-convened at any stage, regardless of the decision of the initial IRD.
- 5.19 If a child protection investigation takes place and a CPPM takes place this must be held within 28 calendar days of the concern being raised unless there is an IRD decision that this is not required. A senior social work manager may insist, having reviewed the available information, that a CPPM is held.
- **5.20** A copy of the Request for Assistance form (Appendix 4) should be sent to;
 - The Request for Assistance team
 - Head of Education via the HQ admin@ email address,
 - School nurse (school establishments) and health visitor (early learning and childcare establishments).
 - A copy should be held in the child's confidential case file as well as an account
 of all telephone calls, interviews and discussions, building an electronic
 chronology (appendix 5 /8) noting developments and outcomes

5.21 Attendance at school

Overall attendance at nursery and school should be tracked very closely and carefully by staff. Patterns over time, including very low levels of attendance, could well be a child protection matter in their own right, as well as when taken into consideration alongside other contextual inflation.

All establishments should ensure that for pupils with very low attendance that there is a clear understanding of this, that all key staff are aware and that a plan is place, including other agencies where appropriate.

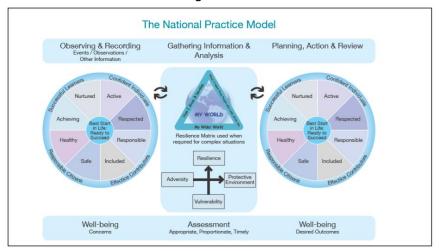
Reference should be made to the Education Service's Attendance Guidance due to be published in 2023/24.

Where an establishment cannot ascertain a child's whereabouts if not in nursery / school then the Decision Making Tree for unexplained absences should be followed – see Appendix 12.

6.0 Risk Assessment

6.1 GIRFEC National Practice Model

6.2 The GIRFEC National Practice Model provides shared practice concepts within assessment and planning. Practitioners should be familiar with the core elements such as the SHANARRI wellbeing indicators, the My World Triangle and the resilience matrix. Together they support holistic analysis of safety and wellbeing, dimensions of need and the interaction of strengths and concerns.



- **6.3** The 'My World Triangle' allows practitioners, together with children, young people and families, to consider -
 - How the child or young person is growing and developing; including whether they
 are suffering or likely to suffer significant harm
 - What the child or young person needs and has a right to from the people who look after them
 - The impact of the child or young person's wider world of family, friends, community, and society.
- 6.4 Whatever the nature of concerns, all practitioners will ensure that child protection processes are underpinned by consideration of rights, relationships and resilience of the child and their family/carers.

Understanding risk is very important in child protection. As part of the GIRFEC practice model for risk assessment and management, practitioners must consider how to respond to situations where risk may be a feature of the concerns; they must take into account safety factors and also consider the impact of risk on other aspects of children's development.

- GIRFEC promotes a holistic approach to supporting a child. Practitioners from different agencies are asked to view their work in the context of the whole child and what is going on in the rest of the child's life. This approach complements the use of professional judgment.
- 6.6 In Education Services, the role of staff is to gather all the available information and carry out appropriate risk assessments to determine initial concern and put in place the relevant supportive action.
- 6.7 It is not the responsibility of Education Services staff to investigate a concern; however it may be appropriate to clarify understanding of a situation by asking for further information without asking leading questions.

- Within local authority services, the role of Social Work Services is set out in legislation. When children or young people need to be protected, social workers will be the Lead Professional. Where it is agreed that there is a risk, there are clear child protection procedures to follow. This could result in a child's name being placed on the child protection register.
- Risk is the likelihood or probability of a particular outcome given the presence of factors in a child's or young person's life. What is critical with respect to child protection is the risk of significant harm from abuse or neglect. When making professional judgements about risks and the needs of a child, the GIRFEC practice model allows systematic consideration of risks and needs.
- 6.10 In the area of children's health, the initial identification of risk is within the universal service. Where children are identified as being in need and/or at risk of becoming looked after (e.g. their health and development is impaired), there can be additional support that may include multi-agency work, as professionals take a holistic view of a child. Early help and support should be offered to children, young people and their families by arranging team around the family (TAF) meeting.
- 6.11 The primary duties of Police Scotland in this context are to ensure that immediate risks to child safety are identified and action is taken which is necessary to safeguard that child. Liaison with partners in Social Work, Health and Education is crucial to the assessment made, using evidence and informed professional judgment. This is consistent with Getting it Right for Every Child process for identifying and acting upon concerns. This shared approach is crucial when assessing risk and the actions required to meet the child's wellbeing needs.
- 6.12 The Scottish Children's Reporter's Administration (SCRA) is a national body focused on children requiring most at risk who may require compulsory measures of care to meet their needs. Children's Reporters are located throughout Scotland. The vision of SCRA is that vulnerable children and young people in Scotland are safe, protected and offered positive futures.
- 6.13 SCRA makes decisions about a need to refer a child to a Children's Hearing, enables children to take part in Hearings, and disseminates information and data to inform and influence improved outcomes for children and young people. The majority of referrals come to the Children's Reporter from partner agencies such as Police, Social Work and Education. Committed to partnership working, SCRA shares information to enhance processes; to benefit children and young people and create the best possible outcomes for them.
- 6.14 Section 60 of the Children's Hearings (Scotland) Act 2011 states that if a child is in need of protection, guidance, treatment or control, and it might be necessary of a compulsory supervision order to be made in relation to the child a referral must be made to SCRA to allow a decision to be made as to whether a Compulsory Supervision Order (CSO) is in fact required. It should be noted that that threshold for when to refer to the Reporter is NOT the "significant harm" threshold used when considering whether a child protection referral should be made.

Factors for SCRA to consider when deciding whether a compulsory supervision order might be necessary include:

• the seriousness of the concern / risk to the child;

- whether the family understand and accept the areas of concern;
- their motivation and capacity to address these areas of concern;
- their willingness and ability to engage and cooperate with supports;
- whether supports provided on a voluntary basis have evidenced adequate improvements.
- 6.15 Concerns of Risk (factors relating to the child) are absconding, child safety, education, emotional care/ development, health-illness/disability, out with parental control, physical care/neglect, self-harm, sexual exploitation, offender behaviour, substance misuse, or other.
- **6.16** Concerns of Risk (factors relating to parents/carers) are alcohol abuse, asylum seekers/refugees, domestic abuse, drug abuse, housing/ accommodation, learning disability, mental illness, parenting, physical illness, or other.

7.0 Allegations of Abuse by a Staff Member

- 7.1 This guidance applies to all Inverclyde children whether they currently reside in Inverclyde or are living in residential houses out with Inverclyde. It is important to treat any allegation of abuse seriously and differentiate about a complaint about the standard of service and allegations of abuse.
- 7.2 If an allegation of abuse is made against a staff member within the Education Service it is the responsibility of the Head of Establishment to inform the Head of Education or Education Officer if not available as soon as they are made aware of the allegation.
- 7.3 The Head of Establishment should agree with the Head of Education or Education Officer an appropriate person to carry out initial enquires. This is to clarify the what the specific allegation is, when it happened, where is happened and if there were any witnesses. HR advice should be also be taken at this time.
- 7.4 The child or young person's concerns must be taken seriously; equally the staff member's perspective should be heard.
- 7.5 Once initial enquiries are carried out and it is determined that an allegation of abuse has been made, a referral should be made to Social Work duty or Police depending on the nature of the allegation.
- **7.6** Police or Social Work will then assess the information and request an IRD if they assess that it is potentially a child protection issue.
- 7.7 A senior manager from the organisation that the staff member who is the subject of the allegation is employed by should attend the IRD it should not be a member of staff at the same grade as the person whom the allegation has been made against.
- 7.8 The senior manager will then follow their organisations disciplinary procedures in respect of the employee who the allegation has been made against. The staff member should be given information about the concern at the earliest point compatible with a thorough investigation.
- 7.9 If risks have been highlighted at the IRD or during the investigation, and the employee has children in their care or regular contact with children, a referral should be made to the local Social Work office in the local authority in which they reside.
- 7.10 The governing body which the staff member is registered with must also be notified. In certain settings the Care Inspectorate should also be notified, for example, Early Learning and Child Care or residential services.
- 7.11 When the child involved is aged 16 to 18 years, it should also be noted that The Sexual Offences (Scotland) Act 2009 makes it illegal for those in a position of trust to engage in sexual activity with a child or young person in their care, even if the child is above the age of consent. This is relevant to young people between the ages of 16 and 18 who are the potential victims of abuse. The positions of trust include staff working in hospitals, independent clinics, residential care houses, children's houses, residential family centres, schools and educational institutions.

8.0 Children Missing from Education

- 8.1 Children missing from education are children and young people of compulsory school age who are not on a school roll and not being educated otherwise (at home, privately or in an alternative provision).
- 8.2 An enrolled child or young person have usually not attended school for a period (up to four weeks, but substantially less for a child with welfare concerns).
- 8.3 The most important factor for any missing child is safety. Should there be any concern that the child may be at risk, it is essential that local child protection procedures are followed. Education staff should refer to the Scottish Governments Children Missing from Education Statutory Guidance 2016
- 8.4 Inverclyde Council does have a missing persons protocol that should be followed. This is currently being updated by a subcommittee of the ICPC.
- 8.5 As in 5.2.13, all education establishments should also follow attendance tracking procedures on a daily basis and follow the process as outlined in appendix 12 for pupils who cannot be traced on their first day of absence.

9.0 Children educated at home

9.1 Education Services has responsibility towards children educated at home. An Education Officer has a remit to oversee and agree all requests to educate at home, supported by legal services and ultimately decided on by the Head of Education. Due consideration is given to any child protection concerns relation to the pupil at the point of application.

Guidance on this from Inverclyde Council can be found here: <u>Home Education - Inverclyde Council</u>

Scottish government guidance can be found via the link: https://www.gov.scot/publications/home-education-guidance

10.0 Equal Protection Bill

- 10.1 On the 7 November 2020 the <u>Children (Equal Protection from Assault) (Scotland) Act 2019</u> came into force in Scotland. This law now removes the defence of 'reasonable chastisement', which a parent or carer could previously use to justify the use of physical force to discipline a child.
- **10.2** The change in law means that children will have the same—equal—protection from assault as adults. It does not introduce a new criminal offence as Scotland's current laws on assault will now apply to children as well.
- 10.3 The change in law aims to bring an end to the physical punishment of children by parents and carers. It also aims to drive behaviour change in Scotland, prompting parents and others caring for or in charge of children to use less harmful methods of parenting. The objective is not to see parents and carers progress disproportionately through the Justice system, but to encourage parents to seek alternative methods of discipline and to seek support when parenting becomes challenging and difficult.

- 10.4 Within Invercelyde we want to create a societal cultural change for children and their families and the evidence from other countries who have already implemented the change demonstrates that it is unlikely in Scotland we will see an increased number of criminal prosecutions of parents or carers.
- 10.5 We may, however, see a short term increase in Request For Assistance from services to Children & Families social work and referrals to Police Scotland, either from universal service practitioners or from members of the public who witness an incident or hear about an incident occurring.
- 10.6 In these instances the first point of contact may take place with the Health Visitor, Education Professional, via community links or to a Social Work Practitioner. It is vital that a proportionate and balanced approach is taken with such information and professional judgement, utilising our existing assessment frameworks for children, is applied. We have to continue to promote our position of early help and support whilst judging the impact of such an assault on the child. Request for Assistance discussions can take place with Children & Families Social Work where a multi-agency meeting may be convened as appropriate. Child Protection must always be considered and applied.

11.0 Prevent Strategy

11.1 Prevent Multi-Agency Panel (PMAP) is a programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism in Scotland. This is strategy is held within the Safeguarding responsibilities of education employees.

The programme uses a multi-agency approach to protect vulnerable people by:

- identifying individuals at risk
- assessing the nature and extent of that risk
- developing the most appropriate support plan for the individuals concerned

12.0 Multi-Agency Guidance for Children and Young People who Display Harmful and Problematic Sexual Behaviours (Appendix 13)

- 12.1 Harmful sexual behaviour (HSB) is developmentally inappropriate sexual behaviour displayed by children and young people under the age of 18 years old that are developmentally inappropriate, may be harmful towards self or others, or be abusive towards another child, young person or adult (Hackett, 2014).
- 12.2 Often, children who have engaged in harmful or problematic sexual behaviours are unique in that society views them differently than if they engaged in other types of hurtful behaviour. However, children and young people who display or engage in harmful or problematic sexual behaviours need to be seen as children first and foremost, recognising that children and young people are developmentally different to adults and responses should reflect this.

- 12.3 Children and young people display a range of sexualised behaviours as they grow up. However, some may display problematic or abusive sexualised behaviour. This is harmful to the children who display it as well as the people it's directed towards (NSPCC, 2021)
- 12.4 It is important that everyone in Inverclyde who works with children and young people should be able to distinguish between sexual behaviour that us developmentally typical and sexual behaviours that are problematic or harmful. This will help us to respond appropriately and provide children and young people with the right protection and support, at the right time.
- 12.5 If a child is displaying problematic or harmful sexual behaviour it can be difficult to know how to respond so that you are balancing the needs of everyone involved. We know that this can be particularly difficult within educational establishments.
- **12.6** We need to act appropriately to support and protect any children who have displayed problematic or harmful sexual behaviours and those who have been impacted by the behaviour.
- 12.7 The multi-agency guidance for Children and Young People who Display Harmful and Problematic Sexual Behaviours has been agreed by the IPCP and aims to set out an effective and consistent approach in the early identification, assessment and management of children and young people whose behaviour is considered to be sexually harmful or problematic. The guidance should be used to initially assess the risk and needs of the child/young person in order to clearly define what level of intervention may be necessary. In addition, it will inform the wider assessment of risk in relation to those children who have been harmed or are at risk of harm when consideration needs to be given to convening a child protection / CARM case discussion or conference to consider what action is necessary to protect them from future harm.
- 12.8 The Guidance should be used for children and young people who are displaying sexually harmful behaviours. The Guidance should not only be used with those young people who have sexually offended and are held within youth justice / criminal justice systems but also those children and young people within child protection systems whose risk and needs require a multi-agency approach. It requires the key agencies involved to meet regularly on a case by case basis to manage, evaluate and monitor risk or potential risk. The Guidance provides a clear framework for understanding sexually harmful behaviour in the context of child and adolescent development. It is a "systems approach" which considers how all the parts of the system including the family, impact on the young person making risk more or less manageable. The Guidance has been developed to complement existing Child Protection (CP) and Care and Risk Management (CARM) Procedures.

A full copy for the guidance can be found here: <u>Information for Professionals</u> - <u>Inverclyde Council</u>

13.0 Online and mobile phone child safety

- 13.1 Since the COVID pandemic, children and families have been spending an increased amount of time on-line, and it has become an important means of staying in touch and keeping connected. New technologies, digital media and the internet are now an integral part of everyday life. Children and young people have greater access than ever to the internet via mobile phones, tablets, games consoles and computers.
- 13.2 This has enabled entirely new forms of social interaction to emerge, for example, through social networking websites, live streaming and video apps, online gaming, text messages and messaging apps, online chats, email and private messaging. However, the development of these technologies also expose children and young people to increased risks such as:
 - Bullying /cyber bullying
 - Emotional abuse (this includes emotional blackmail, for example pressuring children and young people to comply with sexual requests via technology)
 - Sexting (pressure or coercion to create sexual images)
 - Sexual abuse
 - Sexual exploitation
- 13.3 Where police undertake investigations into online child abuse, or networks of people accessing, or responsible for, images of sexually abused children, consideration must be given to the needs of the children involved. This may include children or young people who have been victims of the abuse or children and/or young people who have close contact with the alleged perpetrator. In many cases, they will have been targeted because they were already vulnerable. Local services need to consider how they can best support and co-ordinate any investigation into such offences. They should understand the risks that these technologies can pose to children and the resources available to minimise those risks.
- 13.4 Children and young people need to understand the risks the internet and mobile technology can pose so that they can make sensible and informed choices. Practitioners and carers need to support young people to use the internet and mobile technology responsibly and know how to respond when something goes wrong.

14.0 Key Reference Documents

- **14.1** To supplement this guidance there are a number of documents which should be publicised and made easily available for all staff within establishments and services.
- 14.2 These documents provide further advice on child development, children's wellbeing and protection and related information. These are to support ongoing practice improvement within establishments and services.
 - Supporting documents National Guidance for Child Protection in Scotland 2021 updated 2023 - gov.scot (www.gov.scot)
 - United Nations Convention on the Rights of the Child (UNCRC)

- Getting it right for every child (GIRFEC)
- #KeepThePromise
- Getting it right for every child (GIRFEC): policy statement gov.scot (www.gov.scot)
- Inverclyde Council Equality and Diversity
- Inverclyde Child Protection Committee
- Thinkuknow Internet Safety
- Barnardo's

Appendix 1	Grounds for Concern – Action Guidance for All Staff	App 1 - Staff Action Guidance.docx
Appendix 2	Grounds for concern: action guidance for head of establishment or manager service employee - for public display in the work place	App 2 - Grounds for Concern.docx
Appendix 3	Record of concern alert to Head of establishment	App 3 - Record of Concern Alert.docx
Appendix 4	Request for Assistance form	Request for Assistance Form.docx
Appendix 5	Single agency chronology guidance	Appendix 5 chronology advice.doc
Appendix 6	Advice on making a referral to the Reporter	App 6 - Advice on making a referral to R
Appendix 7	Inverclyde Child Protection Committee guidance on effective communication and information sharing	App 7 - ICPC Guidance.docx
Appendix 8	Guidelines for content of LAC/Child Protection Files	App 8 LAAC and child protection files feb 24
Appendix 9	School Overview of Child Protection Referral	App 9 - School Overview of CP Refer
Appendix 10	Overview of Staff Training in Child Protection	App 10 - School Overview of Staff tra
Appendix 11	Child Protection Poster for Schools	Appendix 11 CHILD PROTECTION POSTER

Appendix 12	Decision Making Tree for Unexplained Absence	Appendix 12 Decision Making Tree for Unex
Appendix 13	Harmful Sexual Behaviour Protocol	Appendix 13 Harmful Sexual Behaviour Prot
Appendix 14	Assessment of Care	Assessment of Care.pdf
Appendix 15	Inverclyde Practitioners Guidance Children (Equal protection from assault)	Inverclyde Practitioners Guidance