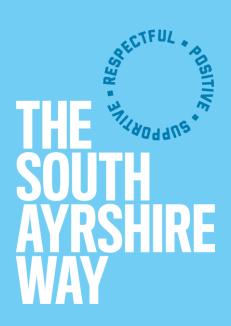


Children's Social Work Child Protection - Guidance

For use during the COVID 19 pandemic



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Version Control

Version Number	Effective Date	Details of Revision	Responsible Person	Review Date
1	30/03/2020	New Guidance	S Hunter	March 2021
2	31/03/2020	Amended Phone Number	S Hunter	March 2021
3	31/03/202	Check Compliance with National Covid 19 CP Guidance	S Hunter	March 2021
4	17/04/202	Update following new Supplementary National Covid 19 CP Guidance	S Hunter	March 2021

1. Introduction

- 1.1 Keeping children, families and carers safe from harm is a key function of children's social work services. Present circumstances require us to pay particular attention to the health and wellbeing of both individuals and practitioners.
- 1.2 Within the parameters of the Partnerships response to COVID 19 daily Social Work practice will be varied to allow the safe delivery of child protection services. This guidance covers initial investigations, joint interviews as well as conferencing and core group activities.
- 1.3 Upon conclusion of the COVID 19 response normal practice will resume and this guidance will be formally withdrawn.

2. Context

2.1 In late December 2019, the People's Republic of China reported an outbreak of pneumonia due to unknown cause in Wuhan City, Hubei Province - Coronavirus.

Coronavirus is a virus that causes an illness called COVID-19. It affects your lungs and airways. For most people, it causes mild symptoms while for others it can be more serious and require hospital treatment. It was first discovered in December 2019 and the first case in Scotland was discovered in March 2020.

This is a new illness and there is much still to be discovered but the NHS and Scottish Government have put in place a range of service and community measure to help manage the spread and impact of the virus.

Generally, coronavirus can cause more severe symptoms in people of all ages with weakened immune systems. Older people and those with pre-existing medical conditions, including asthma, diabetes, high blood pressure and heart or lung disease are more likely to become severely ill with the virus and should take extra care.

The majority of people who become positive with the virus, including those with underlying health conditions, will have mild symptoms and recover to full health.

Although doctors have yet to confirm exactly how coronavirus spreads from person to person, it is believed that like many viruses, it can be passed on through cough droplets.

2.2 The operational context of Social Work and Social Care often brings practitioners into contact with individuals with complex health needs or vulnerabilities that could compromise their ability to fight of the COVID 19 virus. It is therefore of critical importance to limit the contact between practitioners and those individuals who are in those high-risk groups noted above.

3. Guidance

The Partnership is committed to providing support to employees to carry out their statutory duties. This guidance should be read alongside:

- the South Ayrshire Child Protection Procedures (SACPP);
- the National Guidance on Child Protection and;
- SAHSCP Guidance on home visiting during COVID 19
- Social Work Service Guidance on Coronavirus Legislative Changes

Accordingly, the following arrangements will apply:

3.1 Receiving Concerns About a Child

The sharing of information is critical to safe decision making and within the context of the current situation the Information Commissioner has provided further assurances in relation to the sharing of information:

The link below contains more detailed guidance from the commissioner but it's worth noting the following, "The health and social care system is facing significant pressures due to the COVID-19 outbreak. In the current circumstances it could be more harmful not to share health and care information than to share it. The Information Commissioner has provided assurance that she cannot envisage a situation where she would take action against a health and care professional clearly trying to deliver care."

Information Commissioner Update

Research by Eileen Munro points out that people tend to make a judgment about other people, or a situation, very quickly. In our current circumstances this evidence holds extra significance. Where normal practices and methods of communication are interrupted then there is an increased risk that some aspects of the child's circumstances may be overlooked or assumed. It is the professional Social Work task to ensure we are thorough and proportionate in our responses.

The reception of referrals will remain unchanged with the only exception being that the public will not be able to refer in person at a Social Work office. All child protection referrals from the public will come into 01292 267 675.

Colleagues in education are a primary safeguard in children's lives. Our current circumstance has resulted in our schools being closed except for children of key workers and vulnerable children. Due consideration should be given to ensuring that regular pro-active communication is maintained with schools during the Pandemic.

Likewise, maintaining close working relationships with key agencies such as health visiting, addiction services and third sector colleagues will be essential to ensure the

ongoing collation of background information. Normal practice in relation to the secure exchange of information should be observed.

As in normal circumstances, where appropriate feedback should be provided to the referrer as to any outcomes.

3.2 INITIAL REFERRAL DISCUSSION (IRD)

There is no change to existing practice or process relating to IRD. There are however additional considerations when making decisions;

- Is the child / family known to be isolating due to symptoms of COVID-19?
- Does this prevent the IRD from taking all necessary action to protect the child and / or prevent the child from being seen?

Where it is not possible to convene an IRD due to staffing pressures related to the COVID-19 response, as always, *immediate action should be taken to safeguard the child*. In such cases, a service / senior manager can agree the need to proceed to a Child Protection Investigation. Where further support, advice or guidance is required the Chief Social Work Officer should be contacted.

Contact with IRD decision makers will then be made to gather relevant information as part of the process. The IRD should also give due regard to the timing of any JII where COVID 19 or self-isolation is a feature – in all cases this will be guided by the assessment of risk and significant harm to the child or young person.

3.3 CHILD PROTECTION INVESTIGATIONS

In line with normal practice the Social Worker should contact agencies who have information on the child and family. At this time contact should be via telephone or videoconferencing to comply with social distancing measures.

It will in some cases be required to see and speak with the child or young person. In such cases the social worker should call ahead and confirm that there is no one within the household with COVID 19 or displaying symptoms. Where the child or someone in the house hold is COVID19 positive the Social Worker should alert the Team Lead or Service Manager, in their absence. The Social Worker will arrange to meet with the child at an agreed place, which may be outside the child's home, where social distancing can be adhered to and PPE should be worn. Please refer to section 4.4 below in relation to PPE.

Where engagement with children and families who are self-isolating or shielding a child or carer is required, public health guidance on shielding states that other household members do not need to shield. In the event of a child living in a home where an adult is shielding, practitioners should be able to see the child. If a shielding child needs to be seen, medical advice should be sought.

It will be necessary for social workers and/or other practitioners to see children and other family members on a sufficiently regular basis, and it will continue to be

important to have direct contact when there are sufficient concerns about injuries or other immediate harm. In all cases, public health guidance should be followed.

Any case that requires the child to undergo a medical should be processed in the usual manner.

In line with normal practice it is essential that the views of the child are clearly captured and recorded and that the CP1 form is completed within 10 working days.

If considered appropriate and if there is good reason in order to act and access services promptly, assessments can be undertaken using the partial assessment format that is enabled by the emergency legislation and described in the Social Work Service Guidance Coronavirus Legislation Changes.

3.4 CHILD PROTECTION CASE CONFERENCES AND CORE GROUPS

At the time of concluding the investigation and moving to Child Protection Case Conference, the following interim measures should be in place and considered as follows:

- As agencies are unable to attend conferences, the Chair should make use of telephone / video conferencing to aid participation as described in 4.1 and 4.2 below. This should include a core group of professionals where possible; social work, health, police and education.
- For pre-birth case conferences special consideration should be given to seeking the views of the mother via phone or virtually. National guidance at present is for pregnant women to self-isolate for 12 weeks.
- Participation of children and families is subject to the same restrictions.
 Where safe attendance, in line with social distancing guidelines cannot be
 achieved the family should be invited to participate by phone or video
 conferencing.
- If essential agencies are not able to participate, they must provide reports to aid the Chair in their decision making. It is recognised that the pressures of time may require verbal reports to the assessing social worker by police and health. In such cases, the assessing social worker will take a record of the verbal report and copy this to the individual giving the report.
- The Chair of the Child Protection Case Conference will decide whether to place the child's name on a Child Protection Register based on the risk of significant harm. The decision should be communicated sensitively to children, young people, parents and / or carers.

Where there is a need for Compulsory Measures of Supervision in which case a referral to the Children's Reporter should be made as per usual practice. The chair will ensure that the referral is marked as 'urgent' in such cases that require consideration of a hearing in light of SCRA's decision to suspend all but essential children's hearings.

Core groups should continue to convene in line with current practice, wherever possible, using teleconferencing or videoconferencing facilities described in 4.1 - 4.3 below.

3.5 **LEGAL MEASURES**

In the current circumstance the full range of protective legal measures are available, with some changes, and consultation with legal colleagues should take place in the usual manner.

The Children's Reporter is subject to a reduced service due to COVID 19. The Coronavirus (Scotland) Act 2020 provides additional flexibility in processes for determining compulsory supervision orders such as remote attendance at hearings. In cases with legal orders Social Workers should be proactive in their communication with the Reporter to ensure orders do not lapse without appropriate safety measures in place.

4 Equipment

4.1 TELEPHONE

Any enquiry by individual phone call should ensure that all parties are consulted and where teleconferencing isn't being used, that time is allowed for return calls, within safe limits, to ensure all views are captured.

4.2 **TELECONFERENCE**

To set up a review by teleconference which will allow multiple people to attend you should:

- Set up a teleconference code unique to yourself. This is done by going to settings on skype for business; tools; dial in conf settings as shown below. You should then set up your PIN and your PIN number will generate your unique conference ID.
- You can then have a teleconference at any time by advising participants of the teleconferencing phone number: 01292 612 709 and your conference ID.

4.3 VIDEO CONFERENCE

Partnership employees can access Skype for business on their laptop or desktop. In order to set up a videoconference you should confirm that the attendees also have access to skype for business.

In order to set up the videoconference you should go to your outlook calendar and select new skype meeting (4th from the left at the top) and invite accordingly.

4.4 PROTECTIVE EQUIPMENT

Protective equipment is available from the children's residential homes or the Whitletts Area Office in Ayr.

5 Further Information

If you have any questions in relation to this guidance please speak to your line manager.

Public health updates can be found at:

https://www.hps.scot.nhs.uk/a-to-z-of-topics/wuhan-novel-coronavirus/