

CAPS Independent Advocacy **Child Protection Policy**

Introduction

Everybody who works with children, young people and families has a duty to work in a way which:

- **protects** children and young people
- **promotes** their welfare
- **prevents** harm

Services that may previously have seen their role as being to 'pass on' concerns of harm or abuse towards children are now expected to be proactive in identifying and responding to these risks. This is the case for all who work with children and families, regardless of whether their work brings them into direct contact with children, or whether the child in question is their 'client', 'patient' or 'service user'. Equally, services that work with adults who may pose a risk to children and young people must take action if they identify potential harm to a child or young person.

CAPS is committed to the protection of children and regards safeguarding and promoting the interests and wellbeing of children as a paramount concern. CAPS workers should always be thinking about how their work can help to keep children and young people safe and promote their wellbeing. It is the duty of all those employed or involved with CAPS to prevent the harm or abuse of all children with whom they come into contact, including reporting any abuse discovered or suspected.

This policy provides information on different types of abuse, sets out the process for CAPS staff to follow if they become aware of a child protection concern and guides staff on things to consider when working with a child or young person involved in a safeguarding situation.

Background

This CAPS policy follows Scottish Government guidance, [National Guidance for Child Protection in Scotland 2014](#) (hereafter referred to as the National Guidance). This policy also refers to the guidance in place for CAPS operational area [Interagency Child Protection Procedures: Edinburgh and the Lothians](#) and the [Scottish Borders Child Protection Procedures](#).

The National Guidance is underpinned by [The Children and Young People \(Scotland\) Act 2014](#).

Child protection has to be seen in the context of the wider [Getting it right for every child](#) (GIRFEC) approach, the Early Years Framework and the UN Convention on the Rights of the Child. GIRFEC promotes action to improve the wellbeing of all children and young people in eight areas. These wellbeing indicators state that children and young people must be healthy, achieving, nurtured, active, respected, responsible, included **and, above all in this context, safe.**

Who is covered by this Child Protection Policy?

This policy applies to children up until the age of 18, in accordance with the definition of a child in the Children and Young People (Scotland) Act 2014 and the accompanying National Guidance.

Types of abuse or harm

The secretive, oppressive, power-imbalanced nature of abuse means that it is often hidden and hard to identify. Information about abuse will not always come in the form of a disclosure by a child or young person. There are many reasons why young people may not tell anyone that they are being abused, including that they might not realise that what is happening is abusive. Anyone who comes into contact with children and young people in the course of their work should therefore be aware of different forms of abuse and alert to the possibility of abuse or harm towards any child or young person they come into contact with.

The National Guidance states that “Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting, or by failing to act to prevent, significant harm to the child.”¹ The guidance lists four categories of abuse which children can suffer:

- Neglect
 - o the persistent failure to meet a child’s basic physical and/or psychological needs, likely to result in the serious impairment of the child’s health or development.
- Physical abuse
 - o the causing of physical harm to a child or young person.
- Emotional abuse
 - o persistent emotional neglect or ill treatment that has severe and persistent adverse effects on a child’s emotional development.
- Sexual abuse
 - o any act that involves the child in any activity for the sexual gratification of another person, whether or not it is claimed that the child either consented or assented.

For more detailed explanations of each type of abuse, including signs of possible abuse, see Appendix A.

Children with additional needs are more than three times more likely to be vulnerable to abuse. Children with behavioural disorders, learning disabilities and/or sensory impairments are particularly at risk. Neglect is the most frequently reported form of abuse, followed by emotional abuse.

It is important to be aware that young people can experience various types of abuse at the same time, and categories of abuse can overlap. For example, all abuse involves an element of emotional abuse, and neglect often occurs in contexts where young people are also being subjected to physical or sexual abuse.

¹ The Scottish Government, [National Guidance for Child Protection in Scotland 2014](#), p.11

What might constitute a Child Protection concern?

A child protection concern is when someone is **worried that a child or young person is at risk of significant harm**. It is important to note that harm or abuse can present itself in different, and sometimes subtle, ways. CAPS workers should have an awareness of the variety of situations in which children and young people's safety might be compromised. Significant harm will not always present itself in the more conventional way it is often talked about, such as a child being hit by their parents or sexually abused by a family member. Workers need to be aware that significant harm can also include less immediately obvious examples, such as grooming, insecure accommodation or substance misuse. In particular, these situations may arise more often in work with older children, and when combined with questions around consent, personal safety and choice, this can sometimes make it harder for a worker to identify an issue as a clear child protection concern. In these circumstances, reflective discussion with the line manager and/or the CEO, guided by a sound understanding of legislation and CAPS' duties, will be particularly important.

Where you have general welfare concerns about a child that fall short of a concern that a child is being abused you should still discuss these with your line manager. Members of the Children's Team can record these general concerns under 'Safeguarding' in 'CYP Profile' on the case management software. You should review general welfare concerns periodically, to see whether the build-up of concerns is significant enough to pass on to Social Work Services.

Finally, each person or organisation working with a child or young person may only be aware of some of the signs of possible abuse. For this reason, it is often a case of investigating agencies building up a full picture of a young person's life by piecing together information held by different individuals and organisations. Everyone involved therefore has an important part to play in that wider process.

For a more in-depth discussion on definitions of harm, significant harm and risk, see the sections in the National Guidance 'What is harm and significant harm in a child protection context?' and 'What is risk in a child protection context?'

Confidentiality

If a child or young person is at risk of harm, this will always override a professional or organisational requirement to keep information confidential. Those employed or involved with CAPS have a responsibility to act if they are worried that a child's safety or welfare may be at risk, and they cannot keep this information to themselves.

When a worker starts supporting a child or young person it is important that they explain very clearly that **if the child tells them something that makes the worker worried about their safety, or the safety of another child or young person, they cannot keep this to themselves and they may have to share it with another service**. The worker should also explain this to the child's parents/carers (where relevant) and remind the child or young person of this during their ongoing work together.

CAPS workers should always try to seek consent from the child or young person to share information if they are worried about the child's safety, but there may be situations where the child or young person does not consent. However, the worker still has a duty to refer if they believe the child to be at risk, and this decision should always be taken in conjunction with your line manager.

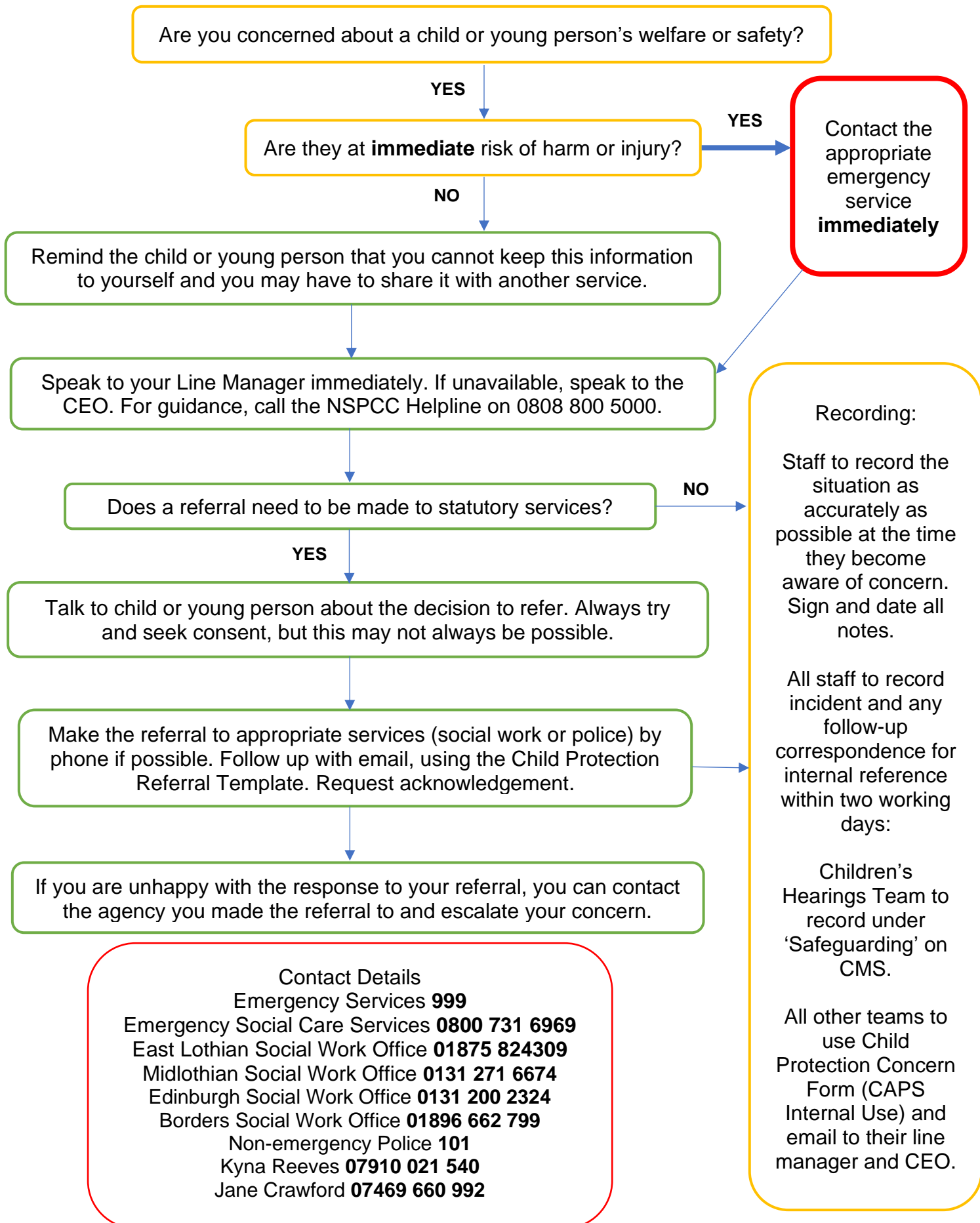
When considering whether to share information with a parent or carer, CAPS workers should consider the advice in the Interagency Child Protection Procedures:

“When dealing with cases of abuse/suspected abuse, any organisation must seek advice from one of the core agencies **before** informing parent(s)/carer(s) to ensure that the safety of the child is paramount and any investigations are not compromised. It is appreciated that as these organisations work closely with children and families, such actions may prove challenging, but the interests and safety of the child must take precedence.”²

² [Interagency Child Protection Procedures: Edinburgh and the Lothians](#), 2014, p.19

What to do if you think a child or young person is at risk of harm

If you are made aware of something which makes you think a child or young person is at risk of harm or abuse, you must take the following steps:



Information required for a referral

Prompt referral of concerns to the core agencies can reduce the likelihood of harm to a child. Where only some information is known, a referral should not be delayed and the professional should still make the referral with the information they have.

The following information should be passed to the core agencies when making a referral:

- Name, job title and organisation, along with contact details, of the person making the referral
- Why there are concerns
- Whether it is believed that the child is in imminent danger
- Whether there are any other children who may also be at risk
- The child's full name, age, date of birth and address
- Any adults who have care of the child
- Who it is thought may have harmed the child or may pose a risk to them, why this is so and when it may have happened

The person making the referral should ask for the name and job title of the person receiving the referral and, if it has been emailed, **should also ask for confirmation that the referral has been received**. These details should be recorded.

When making a referral by email, CAPS workers should use the Child Protection Referral Template in Appendix B.

Internal recording

Any child protection incident or concern which involves a discussion with a senior member of staff and a decision to refer or not refer needs to be recorded. This is very important in ensuring that information about a young person's safety does not rest with one or two members of staff but can be referred to if another worker starts to support that same young person. It will also help workers to build up a picture of a child's wellbeing over time, if more than one incident occurs involving the same child or young person. It is also important that CAPS can go back to a record of an incident and a decision made in the unlikely event that a statutory agency required this information in the future, for example in a serious case review.

It is important to note that an internal record should be made **regardless of whether or not a referral is made** to an external agency, for the reasons outlined above.

Workers in the Children's team should record any child protection incident or concern on the case management software (CMS) under 'Safeguarding'. Workers in all other teams, who do not have access to this part of the CMS, should complete the Child Protection Concern Form (CAPS Internal Use) in Appendix C. This should then be emailed to your line manager and the CEO.

What happens next with the referral?

It is the duty of Social Work Services to investigate matters of concern in relation to the protection of the child or young person. Where it is alleged a crime has been committed against a child, the matter is likely to be investigated jointly with the Police.

The investigating Social Worker / Police Officer may require speaking to the person with whom the concerns originated. You should co-operate fully with any future enquiries.

For more information on the process once a referral has been made, see Appendix D.

If you are unhappy with the response to your referral, you can contact the agency you made the referral to and escalate your concern. If you continue not to receive an adequate response to your referral you can contact the local Police Office (if appropriate) or the Reporter to the Children's Panel.

Things to consider when dealing with a child protection concern

Initial conversation

It is important when dealing with a disclosure of abuse to approach the conversation sensitively, without judgement and without leading or influencing the person making the disclosure in any way. The priority is to be supportive to the child or young person.

- Only ask sufficient questions to gain basic information needed and do not ask any unnecessary questions. Remember that your role is not to investigate, but to get enough information to pass on to agencies whose duty it is to investigate.
- Listen carefully and compassionately
- Take the disclosure seriously
- Use open-ended questions and avoid leading questions which risk 'putting words in someone's mouth'
- Do not offer personal experiences of abuse or the experiences of others
- **Never promise that you can keep information to yourself.** Always explain that if you think a child is at risk of harm, you will have to share that information with your manager and you may need to share it with another service
- If it is a child or young person who has disclosed, reassure them that you will keep them updated about what you are doing with the information they have told you, so they are involved in what will happen next.

To avoid leading questions, consider using these prompts:³

To establish..	You could ask	Don't ask
What	What happened?	Did he/she...?
Where	Where did it happen?	Did he/she come to your bedroom?

³ [Interagency Child Protection Procedures: Edinburgh and the Lothians](#), 2014, p.24

Who	Who did it?	Did daddy/baby-sitter/John do it?
When	When did it happen?	Did it happen last night?
How/Why	Avoid these questions, they require judgement from the child and may induce self-blame	

Ongoing support for the child or young person

The child or young person is likely to continue to be involved with the organisation following the reporting of the concerns, and CAPS workers should be providing support where appropriate. The CAPS worker may need to maintain the link with the Social Work Services office involved in any investigation, in order to offer the appropriate support to the child or young person.

Workers should:

- Continue to listen with care, compassion and sensitivity
- Reassure the child or young person and acknowledge how they are feeling about what has happened
- Not question or interrogate the child or young person
- Avoid being judgmental or showing disbelief
- Not introduce personal experiences of abuse or the experiences of others
- Avoid displaying strong emotions
- Keep the child or young person updated on what is happening with the information they have told you and what actions are being taken.

What if you are concerned about someone within CAPS?

If you have observed a member of CAPS acting in a way that has caused you to be concerned, you should contact the CAPS CEO outlining your concerns and the basis for them. They will take your concerns seriously and decide on an appropriate course of action. This may involve the use of the organisation's disciplinary procedures and/or a referral to Social Work Services or the Police. If the concerns involve the CEO, you should contact the Chair of the CAPS Management Committee.

Historical or non-recent abuse

Where a child discloses historical abuse, the procedure outlined in this document should be followed.

Where an adult discloses historical abuse that happened when they were a child, CAPS workers should consider CAPS's Protection of Adults at Risk Policy. Workers may also find it useful to offer them more information about the specialist support available to individuals disclosing historical abuse: <https://www.mygov.scot/childhood-abuse/>

Training and awareness

Those employed by or volunteering for CAPS must understand their responsibilities in relation to the child protection process. Managing staff should ensure this by:

- the provision of training
- issuing a copy of the policy to all new staff members
- displaying the child protection procedure flowchart on the wall in the office
- publicising the policy in the office

A printed copy of this policy will be available at CAPS Musselburgh and Argyle House offices at all times.

Important Contacts

EAST LOTHIAN	
Social Work Local Office	Children's Wellbeing Services Randall House, Macmerry Business Park, Macmerry, EH33 1RW 01875 824 309 cf-dutyteam@eastlothian.gov.uk
Emergency Social Care Services	0800 731 6969
MIDLOTHIAN	
Social Work Local Office	Children's Services Dalkeith Social Work Centre 11 St Andrew Street, Dalkeith, EH22 1AL 0131 271 6674 cf-referrals@midlothian.gov.uk
Emergency Social Care Service	0800 731 6969
EDINBURGH	
Social Work	Children and Families Social Care Direct West Wing, South Neighbourhood Office, 40 Captains Road, Edinburgh, EH17 8QF 0131 200 2324 socialcaredirect@edinburgh.gov.uk
Emergency Social Care Service	0800 731 6969
Local Neighbourhood Offices can be found in Inter Agency Guidelines	East, North, Leith, South, South West, West Neighbourhoods
WEST LOTHIAN	
3 Local offices, see Inter Agency Guidelines for contact details.	Bathgate, Broxburn, Livingston
Social Care Emergency Team	01506 281028

SCOTTISH BORDERS	
Social Work Local Office	Scottish Borders Children's Services Unit 8, Langlee Complex, Marigold Drive, Galashiels, TD1 2LP 01896 662787
Out of hours	01896 752111
POLICE	101
SCOTTISH CHILDREN'S REPORTER	
South East Scotland Locality - East Lothian, Midlothian, Edinburgh, Scottish Borders	0131 244 4111
Central and West Lothian Locality - West Lothian	0131 244 8700
NSPCC Helpline	0808 800 5000

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Appendix A

Definitions of abuse

These lists are by no means exhaustive but are designed to give employees and people involved with the organisation some guidance on how to recognise child abuse.

The following definitions are all taken from National Guidance for Child Protection in Scotland 2014.

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.

Signs of possible physical abuse:-

- Unexplained injuries or burns, particularly if they are recurrent;
- Improbable excuses given to explain injuries;
- Refusal to discuss injuries;
- Untreated injuries or delay in reporting them;
- Excessive physical punishment;
- Arms and legs kept covered even in hot weather;
- Fear of returning home;
- Aggression towards others;
- Running away;
- Administration of toxic substances.

Neglect

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. It may involve a parent or carer failing to provide adequate food, shelter and clothing, to protect a child from physical harm or danger, or to ensure access to appropriate medical care or treatment.

Signs of possible physical neglect:

- Constant hunger or inappropriate/ erratic eating patterns;
- Poor personal hygiene;
- Constant tiredness;
- Lack of adequate clothing;
- Failure to seek appropriate/necessary medical attention;
- Unhygienic home conditions.

Emotional Abuse

Emotional abuse is persistent emotional neglect or ill treatment that has severe and persistent adverse effects on a child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate or valued only insofar as they meet the needs of another person. It may involve the imposition of age- or developmentally-inappropriate expectations on a child. It may involve causing children to feel frightened or in danger, or exploiting or corrupting children.

Signs of possible emotional abuse;

- Low self esteem;
- Continual self deprecation;
- Sudden speech disorder/refusal to speak;
- Fear of carers;
- Severe hostility/aggression towards other children;
- Significant decline in concentration span;
- Self harm.

Sexual Abuse

Sexual abuse is any act that involves the child 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. 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, pornographic material or in watching sexual activities, using sexual language towards a child or encouraging children to behave in sexually inappropriate ways.

Signs of possible sexual abuse

- Sleep disturbances or nightmares;
- Complaints of genital itching or pain;
- Self harm;
- Eating disorders;
- Unexplained pregnancy;
- Acting in sexually explicit manner;
- Anxiety / depression / withdrawn;
- Fear of undressing e.g. for physical exercise;
- Low self esteem;
- Inappropriate sexual awareness;
- Running away;
- Developmental regression;
- Lack of trust in adults or over familiarity with adults.

Significant Harm

"Significant harm" is a complex matter and subject to professional judgement based on a multiagency assessment of the circumstances of the child and their family. Where

there are concerns about harm, abuse or neglect, these must be shared with the relevant agencies so that they can decide together whether the harm is, or is likely to be, significant. The Children and Young People (Scotland) Act 2014 introduces a legal duty for a wide range of public bodies and those commissioned or contracted to them to share such concerns with a child's Named Person.

Significant harm can result from a specific incident, a series of incidents or an accumulation of concerns over a period of time. It is essential that when considering the presence or likelihood of significant harm that the impact (or potential impact) on the child takes priority and not simply the alleged abusive behaviour

To understand and identify significant harm, it is necessary to consider:

- the nature of harm, either through an act of commission or omission;
- the impact on the child's health and development, taking into account their age and stage of development;
- the child's development within the context of their family and wider environment;
- the context in which a harmful incident or behaviour occurred;
- any particular needs, such as a medical condition, communication impairment or disability, that may affect the child's development, make them more vulnerable to harm or influence the level and type of care provided by the family;
- the capacity of parents or carers to meet adequately the child's needs; and
- the wider and environmental family context

Appendix B Child Protection Referral Template

Whenever recording information about a child protection concern, remember that the document may be seen by the child or young person.

Referrer's Information	
Name	
Job Title and Organisation	
Telephone Number	
Email Address	
Organisation Address	
Child or Young Person's Information	
Name	
Age	
DOB	
Address	
What are the concerns?	
Is the child or young person in imminent danger?	
Are there other children or young people who may also be at risk?	
What adult/s care for the child or young person?	
Who is thought may have harmed the child or pose a risk to them? Why is this so and when may it have happened (if incident has occurred)?	
Is the referral being made with the consent of the child or young person?	

The person making the referral should ask for the name and job title of the person receiving the referral and, if it has been emailed, should also ask for confirmation that the referral has been received. These details should be recorded.

Appendix C
Child Protection Concern Form (CAPS Internal Use)

Whenever recording information about a child protection concern, remember that the document may be seen by the child or young person.

Child or young person's name	
Child or young person's age	
Member of staff raising concern	
Date of concern	
Details of concern	
Does a referral need to be made?	Yes/No
If yes - date of referral and contact details of receiving agency <i>** When emailing this form to the CEO and (if applicable) the Individual Advocacy Manager, please also attach a copy of the referral**</i>	
Any agreed next steps	

Appendix D

Summary of the process of a child protection referral

Taken from Edinburgh and the Lothians Inter-agency Child Protection Procedures

- Concern(s) raised
 - If the situation requires an immediate response to protect the child police will use their powers to remove the child and Social Work will seek a Child Protection Order
- Information sharing / gathering (Police, Health, Social Work, other agencies/organisations)
- Child protection issue
- Inter-agency referral discussion (Police, Health, Social Work)
 - At this point it may be decided no further action is needed under child protection, but may require further support or intervention, or;
- Planning/Interim Safety Plan (Police, Health, Social Work, other relevant agencies)
 - Action agreed by key agencies could include the need for a medical examination; Joint Investigative Review
- Child Protection Case Conference
- Child Protection Plan
- Implementation by Core Group

This Child Protection Policy adopted by CAPS Management Committee on 16th July 2020.