

Coronavirus (COVID-19):

Supplementary National Child Protection Guidance for Chief Officers, Chief Social Work Officers and Child Protection Committees

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Coronavirus (COVID-19): Supplementary guidance for Chief Officers, Chief Social Work Officers and Child Protection Committees regarding Child Protection

Version	Para	Change
30/3/20		
16/4/2020	26 28 30 31 37 49-50	Social care assessments Arrangements for Joint Paediatric/Forensic Medical Examinations Child Assessment and Child Protection orders Compulsory supervision orders, secure care and place of safety placements Aspects of the organisation of Children's Hearings Engagement with children and families who are self-isolating or shielding a child or carer Updated references
1/6/2020	13-15 40 25 & 47 48 54	Domestic abuse Operation of Children's Hearings Guidance for social workers on home visits and direct contact interviews with service users Guidance for staff in residential child care, and on coronavirus testing for children being moved between or to new care placements Guidance regarding adult support and protection Updated references
31/8/2020	4 - 6 38-40 49	Updated to acknowledge the relaxation of restrictions, and the need for planning for local lockdowns. Updated arrangements regarding the organisation of Children's Hearings. Paragraph removed, as the guidance on shielding has been paused
22/12/20	2-12 42 13, 15, 18, 25, 26, 51, 54, 55, 56 References	Updated to reflect National Strategic Framework (November 2020) Updated to reflect effective practices during COVID-19 in relation to Registration through virtual Child Protection Planning/Case Conferences Phrasing/edits Updated and supplemented

Purpose

1. This document provides supplementary guidance on child protection during the Covid-19 outbreak. It is provided for Chief Officers, professional leaders in children's services and Child Protection Committees, who should ensure it is taken account of within local partnerships.

Policy context

2. This update follows the implementation (2/11/20) of an overarching strategic approach to outbreak management as outlined in 'Scotland's Strategic Framework'. The Framework provides for flexibility in local and national response and sets out

expectations within five levels of public health protection. These 'tiers' define what can and cannot be done in the areas in which you live, work and travel. Each local authority area of Scotland will be assigned to a COVID protection level. This information is available at <https://www.gov.scot/publications/coronavirus-covid-19-protection-levels/>

3. The supplementary guidance on child protection should be read alongside associated information that has been published in response to the outbreakⁱ. This includes guidance on 'Social Work & Social Care - safe and ethical practice during the pandemic'.

Child Protection during the Covid-19 outbreak

4. Child protection is part of a continuum of collaborative responsibilities upon agencies working with children, which commences pre-birth. It requires good professional judgement, based on assessment and evidence, informed by the perspectives of the team around the child, including the child and family.
5. There are additional pressures across maternity and children's services as a consequence of the Covid-19 outbreak. The impact of the pandemic and the consequent restrictions are likely to impact on children, families and services for some time. Temporary local and national restrictions will be put in place as and when necessary in line with Scotland's Strategic Framework.
6. It is therefore necessary to continue to consider how we streamline service delivery and management processes, without compromising our actions to protect children.
7. The vulnerability of some children will have increased because of the additional pressures placed on families and communities by the Covid-19 outbreak. Some children could be at risk of harm and neglect, where that would not otherwise have been the case. Children may have been exposed to more risks online. We should also be alert to signs that individuals or groups are using the current crisis as an opportunity for the criminal or sexual exploitation of children. The restrictions set out in the Strategic Framework, while necessary for local and national outbreak control, can contribute to the incidence and impact of coercive control and domestic abuse as described below (s14).
8. Local Child Protection Committees are taking action to ensure that children are protected. This should involve all of the key agencies, and include consideration of any necessary enhancements to local processes, and the communication of these changes to the workforce and wider community. ADES and Social Work Scotland provide examples of these communicationsⁱⁱ.
9. It may be that CPCs should consider and adopt streamlined governance mechanisms to support continuing effective decision making during the pandemic.
10. Chief Officers should continue to ensure that contingency plans are in place, should any key personnel be absent from work or otherwise unable to fulfil their responsibilities.
11. Chief Officers' collective leadership and collaborative decision-making remain fundamental to prompt, safe and functional adaptation. Any changes to assessment and planning processes and the way services work together must be agreed and understood by all parties, taking into account the consequences for partner services.

It will not be helpful for example, if one service routinely responds to risk by increasing referrals to a partner service, without consideration of the impact.

12. All Chief Officers should continue to ensure that child protection services are adequately resourced. Within the increasing demands anticipated in coming months, the protection of children remains an overriding priority.

Domestic Abuse

13. The pandemic has accentuated risks for many women and children experiencing or recovering from domestic abuse and other forms of gender based violence. Interacting causes include: movement restrictions; reduced access to professional and social support; financial dependencies deepened by the economic impact of Covid-19; and the intensification of coercive control by perpetrators. In this context contact arrangements for children whose parents are separated can be exploited as part of a pattern of abusive control.
14. Agencies and practitioners working with children and families should maintain and develop their awareness of the dynamics of coercive control, ensure that they prioritise the needs of the non-offending parent and her children, continue to apply the approach outlined in 'Equally Safe: Scotland's strategy to eradicate violence against women'^{iv}, and continue to take appropriate measures to ensure the protection of women and their children. Agencies and practitioners should seek to work closely with their local specialist services (e.g. Women's Aid) and engage with their local violence against women partnership.
15. The [Coronavirus \(COVID-19\) Supplementary National Violence Against Women \(VAWG\) Guidance](#) details the breadth of additional risks and lists potential mitigating actions in the short, medium and long term.

Self-care, support and supervision of staff

16. The support and supervision of practitioners is always important, but it is particularly so in these challenging times.
17. All practitioners involved in child protection should ensure that whatever the urgency of each situation, they follow guidance on protecting their own health and that of service users.
18. Management support and direction may encourage innovative adaptations. At the same time we should continue to ensure systems of accountability for practice are in place; alongside appropriate supervision and support for the wellbeing of staff.

Enhancements to processes

19. Local Child Protection Committees should consider and communicate necessary enhancements to local practice and procedures. This guidance provides advice regarding the enhancements that may be necessary.

a. Named person or point of contact

20. The most effective protection of children continues to involve early support within the family, before urgent action is needed. The ongoing support of a named person or

first point of contact will be more important than ever. Parents and carers should be clear about how they can get advice or raise concerns in relation to their children, especially if the customary named person or point of contact is not available.

b. Information Sharing

21. The local protocols for sharing information and raising child protection concerns should not change. Where any person becomes aware of the risk of significant harm to a child from abuse or neglect, then Police (if the danger is imminent) or Social Work should be alerted without delay.

c. Inter-agency referral discussion

22. An Inter-agency Referral Discussion (IRD) should continue to be the formal starting point for the process of information sharing, assessment, analysis and decision making following a reported concern about abuse or neglect of a child. The decision to convene an IRD can be made by Police, Health or Social Work.
23. The IRD does not need to involve face-to-face meetings, and e-IRD, secure email, telephone discussion and tele-conferencing are all appropriate. Key practitioners in Police, Social Work and Health must be involved, and information should be sought from other agencies, including appropriate staff from schools or the Education service.
24. As ever, where there is the likelihood of immediate risk or significant harm to a child, intervention should not be delayed pending receipt of information. Agencies should take necessary immediate action.

d. Investigation and assessment

25. When, following Inter-agency Referral Discussion, a child protection investigation is required, the child's immediate experience and needs must be ascertained. Direct contact with the child and an understanding of their living environment remains essential. Guidance on safe and ethical contact for social workers outlines how this can be managed safelyⁱⁱ.
26. If considered appropriate and if there is a need to take action and provide services as promptly as possible, assessments can be undertaken using the partial assessment format. This is enabled by the Coronavirus Act 2020 and described in the guidance: Coronavirus (COVID 19): Changes to Social Care Assessmentsⁱⁱ.
27. Where the IRD leads to a decision to undertake a medical examination, health colleagues should continue to ensure that this is carried out in a clinically appropriate time scale.
28. There is no change to the arrangements for Joint Paediatric/Forensic Medical Examinations of children and young people.
29. Where they are required, Joint Investigative Interviews should continue to be visually recorded and undertaken by Police and Social Work together. Consideration must be given to physical distancing and the emotional impact this may have.

e. Child assessment and Child protection orders

30. The Coronavirus (Scotland) Act 2020 makes changes to the provisions for Child Assessment and Child Protection Orders. These are detailed in the guidance on the Actⁱⁱ .

f. Compulsory supervision orders, secure care and place of safety placements

31. The Coronavirus (Scotland) Act 2020 provides additional flexibility in processes for determining compulsory supervision orders and place of safety placements. This is detailed in the guidance on the Actⁱ .

g. Child Protection Planning Meetings

32. In the current circumstances, it will not often be possible for child protection planning meetings (or case conferences) to take place with all of the relevant parties meeting in the same venue at the same time. Instead, Child Protection Committees should consider other ways for such meetings to be held, using tele-conferences or new technology.
33. Where planning meetings have to be limited to core participants, other members of the team around the child should continue to be included in decision making processes, for example through telephone contact or secure email, and a record of this should be maintained. Children, parents and carers should have a choice about how or whether they participate, which could include by teleconference, email or a recorded message.
34. It remains critical, that:
- Decision-making about child protection planning is informed by relevant stakeholders, including the child and family.
 - The lead professional continues to co-ordinate the assessment and plan, and ensures actions are followed through, and communicated effectively with all members of the team around the child.
35. Child Protection Committees should ensure that means are in place for any member of the team around the child to escalate concerns, if they believe that actions are not being progressed in accordance with the child's best interests, and they feel that this has not been properly considered in the child planning process.

h. Timescales

36. While the national guidance includes timescales for child protection processes, account should be taken of the unprecedented challenges at this time, and there can be flexibility based on risk and circumstances, taking account of the need for prompt action to protect children.
37. Aspects of the organisation of Children's Hearings, including facilitating remote attendance, are addressed in the Coronavirus (Scotland) Act 2020 and detailed in the guidance on the Actⁱ .
38. Many timescales are determined by the period between meetings. Ongoing, high quality liaison between practitioners, that is documented and where the key aspects are included in an updated child's plan, will lessen the need to keep to strict timescales for meetings.

39. Timescales for many formal processes, including reporting to a Children's Hearing, can be more easily achieved by the streamlining of requirements on agencies to provide multiple reports and focus on the submission of concise, relevant and up to date information, which can be achieved with the child's plan.
40. SCRA are arranging Hearings when delay would be likely to cause significant detriment to the welfare of the child or young person or when the Hearing is necessary to meet a legal timescale or prevent an order from lapsing. Generally, other hearings are being arranged when it is practicable to do so. Hearings may be arranged with attendance in person, remote attendance by video link or a mix of the two. Children's Hearings Scotland has issued detailed guidance¹ for Panel Members which contains helpful information about remote hearings and how they will be conducted, which will be of use to practitioners who attend hearings and support families to take part. There is also information on the SCRA website about virtual hearings, and the return to physical hearings.

i. Child Protection Register

41. Local authorities are responsible for maintaining a Child Protection Register for those children who are the subject of an inter-agency child protection plan. This must be kept accurate and up to date.
42. The decision to place a child's name on the register should be taken following careful consideration of the facts and circumstances. In the current situation, with due preparation and support for family participants, it has often proven feasible and effective to hold virtual child protection planning meetings. There are situations in which this decision has had to be made through multi-agency consensus rather than a meeting. This might happen at IRD or subsequently by agreement of locally identified managers in Health, Police and Social Work. In such cases, these managers should take account of the views of the team around the child, medical and other specialist advice, and the particular perspectives of the child and family. The reasons for the decision should be documented in child's plans and agency records.
43. This more flexible process should not allow any widening of the criteria for child protection registration, which continues to be that there are reasonable grounds to believe that a child has suffered or will suffer significant harm from abuse or neglect, and that a child protection plan is needed to protect and support the child.
44. There should always be a good reason for a child to continue on the register. The review process and timescale can be considered at the point of registration. De-registration should occur when a child no longer requires a child protection plan. Means should be identified to ensure that the de-registration process continues to take place timeously.

j. Keeping children safe

45. A child protection plan must set out the actions required to reduce risk for any child who is considered to be at risk of significant harm. It is these actions that protect the child.
46. It is recognised that practitioners will already be responding to the particular challenges of the Covid-19 outbreak, taking account of the child and family circumstances. For example, this might include: how parents with a drug dependency and/or mental health difficulties are accessing medication and support

to maintain stability; ensuring updated safety plans are in place for women experiencing domestic abuse; being clear about how parents with a learning disability are receiving advice and consistent support to protect their children in these circumstances; and help for families experiencing poverty to access fresh food for their children.

47. As part of any child protection plan, the lead professional and/or others must always have sufficiently regular direct contact with the child and family. The guidance for social workers on home visits and direct contact interviews with service usersⁱⁱ recognises the need for home visits and direct contact, to provide support, prevent significant harm and/or to fulfil a statutory duty. This guidance sets out the requirements for risk assessment; hand hygiene before and after arrival at a visit; physical distancing; use of fluid-resistant masks; appropriate use of additional PPE if circumstances require; and training of staff in relation to all infection control measures.
48. **Access to PPE.** Services may access PPE at the local Health & Social Care Partnership Hub. In addition, services registered with the Care Inspectorate can contact the triage centre at 0300 303 3020.
49. Practice guidance has been issued for staff in residential child care settings; and on coronavirus testing for children being moved between or to new care placements ⁱⁱ .

k. Engagement with children and families who are self-isolating

50. If a child or family member is in self-isolation, practitioners should ascertain if the individual has symptoms prior to direct contact. It may become necessary to defer some home visits and alternative arrangements can be put in place, such as telephone and email contact or the use of appropriate applications on mobile devices.
51. However, it will be necessary for social workers and/or other practitioners to see children and other family members on a sufficiently regular basis. 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'

l. Child's Plan and other records

52. The pandemic has led to diversification and adaptation in communication and decision making. Further innovation is likely. In this context it is imperative that the lead professional maintains an accurate, updated child protection plan within the child's plan. This should include a chronology.
53. The current child's plan should always be available to the team around the child.
54. All other practitioners should also ensure effective record keeping, including their own engagement in these processes, and with children and families.

Adult Support and Protection

55. Supplementary guidance has been published regarding adult support and protectionⁱⁱ . Effective liaison and effective decision making remains essential, where there is involvement of practitioners from both children's and adult services; and in planning for transitions.

Conclusion

56. These are unprecedented times. Child-centred teamwork; collaboration with families; support for professional judgement; and ethical practice are all more critical than ever in helping to keep Scotland's children safe.
57. This supplementary guidance will remain under review. Updates will be provided in consultation with stakeholders, as necessary during the pandemic.

References

(i).

- **NHS Inform** : Coronavirus (COVID-19) in Scotland | NHS inform. Latest coronavirus (COVID-19) guidance from NHS Scotland and the Scottish Government, including physical distancing measures and advice for infected households
- Health Protection Scotland (12/10/20) Information for social, community and residential care settings. V1.5. <https://www.hps.scot.nhs.uk/web-resources-container/covid-19-information-and-guidance-for-social-community-and-residential-care-settings/>
- Health Protection Scotland (20/8/20) COVID-19: Guidance for Domiciliary Care v 1.41 https://hpspubsrepo.blob.core.windows.net/hps-website/nss/3046/documents/1_COVID-19-guidance-domiciliary-care.pdf (This guidance is for registered providers, social care staff, local authorities and care staff who support and deliver care to people in their own homes (including supported living settings))

(ii). **Scottish Government:** *updated guidance for all agencies and services at:* <https://www.gov.scot/collections/coronavirus-covid-19-guidance/>

- Scottish Government (30/10/2020) Scotland's Strategic Framework <https://www.gov.scot/publications/covid-19-scotlands-strategic-framework/>
- Scottish Government (15/12/20) Local Protection Levels: Coronavirus (COVID-19): local protection levels - gov.scot (www.gov.scot)
- Scottish Government (16/12/20) Residential Care Coronavirus (COVID-19): residential childcare - gov.scot (www.gov.scot)
- Scottish Government (14/12/20) Coronavirus (COVID-19): Test and Protect - gov.scot (www.gov.scot)
- Scottish Government Chief Social Work Adviser (19/3/20) Business Continuity and Service Prioritisation <https://socialworkscotland.org/wp-content/uploads/2020/03/OCSWA-letter-to-Chief-Social-Work-Officers-18-March-2020.pdf>
- Scottish Government (30/4/20) Coronavirus (COVID-19): adult support and protection guidance - gov.scot (www.gov.scot)
- Scottish Government (10/7/20; 17/8/20; revision due December 2020) Coronavirus (COVID-19): safe and ethical social work practice. Guidance for social workers on home visits and direct contact interviews with service users. <https://www.gov.scot/publications/coronavirus-covid-19-social-worker-guidance-on-safe-contact/>
- Scottish Government (8/4/20 revision due December 2020) Coronavirus (COVID 19): changes to social care assessments <https://www.gov.scot/publications/coronavirus-covid-19-changes-social-care-assessments/>
- Scottish Government (30/11/20) Guidance on use of face coverings: Coronavirus (COVID-19): public use of face coverings - gov.scot (www.gov.scot)
- Scottish Government (9/11/20) Coronavirus (COVID-19): guidance on individual risk assessment for the workplace. <https://www.gov.scot/publications/coronavirus-covid-19-guidance-on-individual-risk-assessment-for-the-workplace/>
- Scottish Government (7/4/20) National Clinical Guidance for Nurses, Midwives and AHPs, Community Health Staff <https://www.gov.scot/publications/coronavirus-covid-19-nursing-and-community-health-staff-guidance/>
Chief Social Work Adviser (14/5/20) – Covid-19 testing and care placements – Letter to CSWOs and directors of public health

(iii). **Children's Hearings**

- Children's Hearings Improvement Partnership: Coronavirus (Scotland) Act 2020 – Guidance on looked-after children and children's hearings provisions <https://www.chip-partnership.co.uk/wp-content/uploads/2020/04/Coronavirus-Scotland-Act-2020.pdf> (*To be updated following expiry of secure care provision on 29/9/20). Coronavirus (Scotland) Acts

(Early Expiry of Provisions) Regulations 2020
<https://www.legislation.gov.uk/ssi/2020/249/made>

- Children's Hearings Scotland 28/4/20 updated 24/7/20). Guidance on the operation of effective children's hearings. Further update due early 2021 to reflect new technology and changes to arrangements for communication between Panel Members and Reporters) <https://www.chscotland.gov.uk/resources/hearings-and-area-support-team-operation/coronavirus-practice-guide/>
- Children's Hearings Scotland /SCRA (13/12/20) Coronavirus – attending Children's Hearings - SCRA: <https://www.scra.gov.uk/contact-us/coronavirus-attending-childrens-hearings/>
- SCRA (13.10.20) Attending Children's Hearings – wearing face coverings – SCRA: <https://www.scra.gov.uk/2020/10/attending-childrens-hearings-wearing-face-coverings/>
- SCRA December 2020 Updates: <https://www.scra.gov.uk/2020/08/face-to-face-hearings-further-update/>

(iv). Sector links

- ADES <https://www.adescot/Documents/COVID19Recovery/>: examples on secure area accessible to Directors of Education
- Social Work Scotland : examples from CSWOs: <https://socialworkscotland.org/latest-updates-on-covid-19/>
- Police Scotland: <https://www.scotland.police.uk/about-us/covid-19-police-scotland-response/>
- RCPH: Guidance for paediatric services updated 2/12/20 <https://www.rcpch.ac.uk/resources/covid-19-guidance-paediatric-services#child-protection-looked-after-children-and-vulnerable-children-processes-in-scotland>
- CPC Scotland: <https://www.childprotection.scot/covid-19/>

(iv). Domestic abuse response during Covid-19

- COSLA/Scottish Government/ Public Health Scotland/Improvement Service Coronavirus (COVID-19) Supplementary National Violence against Women Guidance. (revised 18/9/20) https://www.cosla.gov.uk/_data/assets/pdf_file/0030/19668/COVID-19-Supplementary-VAW-Guidance-Sept-2020.pdf
- Close the Gap (2020) Domestic Abuse and Covid-19: <https://www.thinkbusinessthinkequality.org.uk/files/tbteccovid19.pdf> SASW (2020)
- Domestic Abuse and Child Welfare.A practice guide for social workers <https://www.basw.co.uk/media/news/2020/apr/domestic-abuse-and-child-welfare-practice-guide-social-workers>
- Equally Safe: Scotland's strategy to eradicate violence against women [Equally Safe: Scotland's strategy to eradicate violence against women - gov.scot \(www.gov.scot\)](https://www.gov.scot)
- The Safe & Together and Scottish Domestic Abuse & Forced Marriage websites provide updated advice and information: <https://safeandtogetherinstitute.com/evidence-resources/covid-19-case-planning/> <https://sdafmh.org.uk/>