

**REPORT TO: HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD –  
25 FEBRUARY 2020**

**REPORT ON: DUNDEE CHILD PROTECTION COMMITTEE ANNUAL REPORT 2018/19**

**REPORT BY: CHIEF SOCIAL WORK OFFICER**

**REPORT NO: DIJB2-2020**

## **1.0 PURPOSE OF REPORT**

1.1 This report brings forward for Integration Joint Board Members' information the Dundee Child Protection Committee Annual Report 2018/19, attached as Appendix 1.

## **2.0 RECOMMENDATIONS**

It is recommended that the Integration Joint Board (IJB):

2.1 Note the content of this report and of the Child Protection Committee Annual Report 2018/19, including key achievements and challenges over the reporting year (attached as Appendix 1).

2.2 Note the progress that has been made in developing an effective partnership response to child protection issues in the city (section 4.4).

2.3 Note the development of the Child Protection Delivery Plan for the current year (2019/20) (contained within appendix 1), including how priorities the alignment of priorities to long-term outcomes for the Child Protection Committee (section 4.5).

## **3.0 FINANCIAL IMPLICATIONS**

3.1 None.

## **4.0 MAIN TEXT**

4.1 All agencies, professional bodies and services that deliver child and/or adult services and work with children and their families have a responsibility to recognise and actively consider potential risk to a child, irrespective of whether the child is the focus of their involvement. As statistical information contained within the annual report demonstrates (see page 14 of appendix 1) the causes of concern leading children to be registered on the Child Protection Register evidence the significant contribution that adult services, including the Health and Social Care Partnership, have to make to the protection of children and young people.

4.2 Child Protection Committees have overall strategic responsibility for the continuous improvement of child protection policy and practice in their local areas. There are 31 Child Protection Committees across Scotland and they consist of representatives from a range of backgrounds including the police, health services, local authorities, health & social care partnerships, community planning structures and relevant voluntary sector fora.

4.3 Although not a statutory requirement, most Child Protection Committees publish some form of annual report. A copy of the report for 2018/19 is attached as Appendix 1. The annual report outlines Child Protection in the wider Protecting People context before examining the role and membership of the Child Protection Committee. It details the key achievements over the year, as well as challenges associated with delivering improvements. The Delivery Plan sets out the priorities of the Child Protection Committee for 2019/20, including how these align to the long-term outcomes for the Committee, and details the actions required to achieve these goals.

#### 4.4 Key Achievements and Future Plans

##### 4.4.1 Key Achievements detailed in the report include.

- Significant improvement in the collation and use of data by Dundee Child Protection Committee and Chief Officers Group, some of which is summarised in the annual report.
- In partnership with the Improvement Service, Transformation, Performance and Improvement Team Dundee Child Protection Committee undertook a variety of self-evaluation activity of core business. This has led to the development of thematic agendas and personal statements from all CPC members. Work is ongoing in the development of a corporate risk register in respect of Protecting People which reflects Child Protection needs.
- In partnership with the Care Inspectorate the Chief Officers Group (Public Protection) has embarked upon an ambitious two year transformation programme. The Child Protection Committee is an integral partner in this.
- Earlier this year a multi-agency case file audit of Child Protection and Looked After Children (LAC) services was undertaken by a sub-group of the Protecting People Self-Evaluation Group as part of its commitment to learning and continuous improvement.
- Over the last year review and development of Initial and Significant Case Reviews (SCRs) featured as part of work undertaken by both the Chief Officers Group and Tayside Regional Collaborative. Dundee Child Protection Committee undertook two Initial Case Reviews (ICRs) last year with practice improvement actions arising from both. The Committee has also considered learning identified from a national review of SCR's undertaken by the Care Inspectorate. Revisions to the Dundee Significant Case Review protocol have been piloted throughout the year.
- The report details continuous improvement activity undertaken by NHS Tayside.

#### 4.5 Areas for Further Improvement and Recommendations

##### 4.5.1 Dundee Child Protection Committee is committed to reviewing and improving its activity in relation to keeping people safe. To this end, a delivery plan has been developed for the current year (2019/20). An analysis has been undertaken identifying key issues, strengths and areas for improvement from the following sources:

- Former Balanced Scorecard and associated Child Protection datasets including the proposed national minimum dataset for Child Protection;
- Preventative work with the GIRFEC Delivery Group action plan;
- Case file audit outcomes and action plans;
- Learning and workforce development activity;
- Work carried out by the Improvement Service;
- Actions being progressed by Priority Group 5 of the TRIC;
- The findings of SCRs and ICRs; and,
- Protecting People Transformation Programme.

The plan has also been informed by interim findings of the national care review; the new national child protection minimum dataset; and Care Inspectorate quality framework.

The Care Inspectorate guide for the joint inspection of services to children in need of care and protection (<http://www.careinspectorate.com/index.php/joint-inspections/services-for-children/the-guide>) has also been referenced in developing the plan. The plan compliments improvement work being undertaken elsewhere across the partnership.

#### 5.0 POLICY IMPLICATIONS

##### 5.1 This report has been screened for any policy implications in respect of Equality Impact Assessment. There are no major issues.

## 6.0 RISK ASSESSMENT

6.1 This report has not been subject to a risk assessment as it does not require any policy or financial decisions at this time.

## 7.0 CONSULTATIONS

7.1 The Chief Officer, Chief Finance Officer, Council Management Team, members of the Dundee Child Protection Committee and the Clerk were consulted in the preparation of this report.

## 8.0 DIRECTIONS

8.1 The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in sections 26 to 28 of the Public Bodies (Joint Working)(Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Dundee City Council and NHS Tayside.

Direction Required to Dundee City Council, NHS Tayside or Both	Direction to:	
	1. No Direction Required	✓
	2. Dundee City Council	
	3. NHS Tayside	
	4. Dundee City Council and NHS Tayside	

## 9.0 BACKGROUND PAPERS

9.1 None.

Diane McCulloch  
Chief Social Work Officer

DATE: 25 February 2020



If not  
**you**  
...**who?**

Dundee Child Protection Committee



# Annual Report

# 2019

[www.dundeeprotectschildren.co.uk](http://www.dundeeprotectschildren.co.uk)



Dundee  
Child Protection  
Committee

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# Introduction

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## Independent Chair of Dundee Child Protection Committee

Welcome to our Dundee Child Protection Committee Annual Report 2019; this report covers the period April 2018 – March 2019.

For the third consecutive year I am very pleased to present this overview report of our multi-agency activity for the past year. This report presents our key achievements; both key strengths and identification of areas for improvement. In our last report (April 2017 to March 2018) we stated that we aimed to have in place a refreshed and updated website – **that has been achieved**. We also stated that we aimed to publish updated multi-agency child protection instructions – **that has been achieved**. Each of these considerable achievements would not have been possible without the hard work and commitment of those staff to whom the tasks were assigned.

This year's report details our progress on the recommendations made last year and I am very pleased to say that we can report positively on each. Of particular significance is the progress made in providing the committee with relevant data and information to inform future planning, in particular, the forthcoming delivery plan for 2019 - 2020. Prospective planning and scrutiny will be further enhanced following the committee's agreement to adopt the National Minimum Dataset proposed by the Scottish Government; the dataset is also to be adopted by Angus and Perth & Kinross Child Protection Committees thereby increasing the potential for collaborative work and joint initiatives across Tayside which will be based on comparable data.

There is certainly more work to be done, as highlighted in the report, in order to fulfil the city's ambition of providing its children, young people and families "... **with the protection they need, when they need it, to keep them safe from harm**" but the commitment by all multi-agency partners and staff, to achieve that goal is, without doubt, in place.

Finally, in this my last report before demitting my role as independent chair of the committee, I wish to acknowledge the hard work, commitment and dedication of staff, who, working in partnership continue to realise the city's ambition of "... **creating a community which is healthy, safe, confident, educated and empowered**". (City Plan for Dundee 2017 - 2026).



**Norma Ritchie**  
Independent Chair  
Dundee Child Protection Committee





# Protecting People

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“Dundee’s future lies with its people. They deserve the best this city can give them. We will provide the protection they need, when they need it, to keep them safe from harm.”

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## Key Principles of Protecting People

The protection of people in Dundee is part of the overall provision of services that will deliver positive outcomes for people in Dundee.

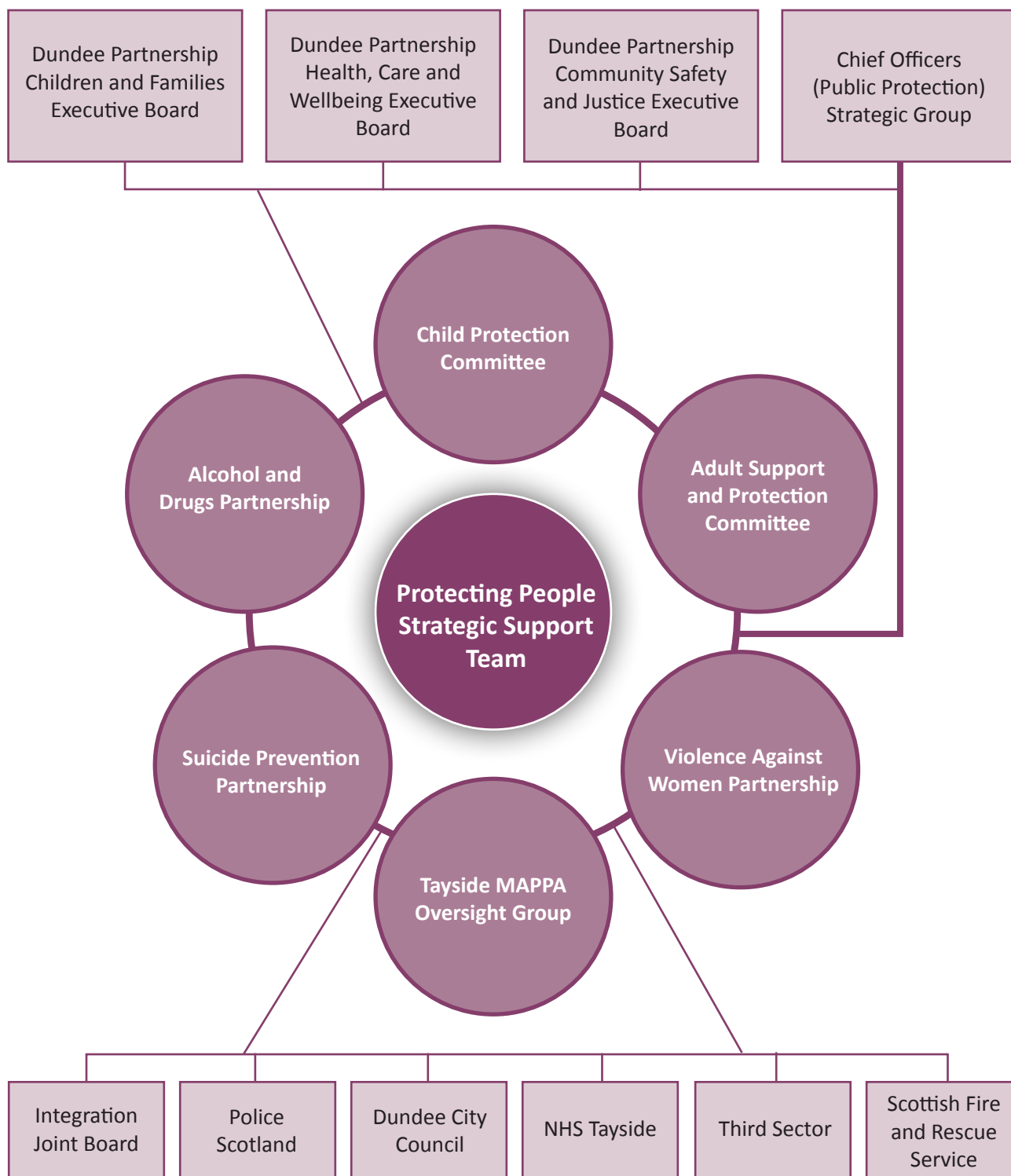
The people delivering those services will have the knowledge, skills and experience to deliver quality services.

We will deliver our vision by working in partnership across the statutory (Dundee City Council, NHS Tayside, Police Scotland and Scottish Fire and Rescue Service) and voluntary sector.

We will work with our partners in other local authority areas, both in Tayside and throughout Scotland, to improve services to protect people and work towards a consistent approach.

The wider Protecting People strategic agenda in Dundee City is led by a number of key public protection partnerships - these include the Adult Support and Protection Committee, the Child Protection Committee, the Violence Against Women Partnership and the MAPPa Strategic Oversight Group, all reporting to the Chief Officers Group (COG). Over the last year, the Protecting People Strategic Support Team has broadened its responsibility to include suicide prevention and displaced persons.

The Chief Officers Group is the strategic forum for public protection in Dundee with responsibility for shaping the operational development of the public protection arrangement. As such it will work through public safety and partnership committees statutory and otherwise to assess risk and to work to reduce it. The image below illustrates the relationship between the various bodies and groups to protect the people of Dundee.



# Child Protection

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All agencies, professional bodies and services that deliver child and/ or adult services and work with children and their families have a responsibility to recognise and actively consider potential risk to a child, irrespective of whether the child is the focus of their involvement. Child Protection Committees have overall strategic responsibility for the continuous improvement of child protection policy and practice in their local areas. There are 31 child protection committees across Scotland and they consist of representatives from a range of backgrounds including the police, health services, local authorities, children services and community planning structures and relevant voluntary sector fora amongst others.

## Child Protection in Dundee

Dundee is home to 23,949 children and young people under the age of 16 (General Records of Scotland 2018), most of whom live in safe and nurturing home environments where they are supported to develop and reach their full potential.

It is widely recognised that children and young people living in poverty often have poorer outcomes than their more affluent peers. Deprivation is a significant issue for Dundee with almost half of its children and young people, **10,393 (43.4%)**, living in communities identified as the most deprived in Scotland.

Deprivation also contributes to the prevalence of other health and social inequalities such as alcohol and substance misuse, physical and mental health and domestic violence and these in turn are recognised as contributory factors to the abuse and neglect of children.

However, any child, from any background, living in any community can be at risk of abuse or neglect and we all share a responsibility to protect children from harm.

All local authority areas have a responsibility to provide supports and services to minimise risk and protect children and young people. This includes raising awareness amongst the public, supporting the development of our community as well as the provision of a structure by which risks can be identified, responded to and, where necessary, appropriate proportionate action taken.

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## Child Protection Committees

Child Protection Committees were first established in each local authority area across Scotland in 1991. Since then, they have been subject to many reforms and reviews, in particular in 2005 when they were strengthened as part of the then Scottish Executive's Child Protection Reform Programme.

Child Protection Committees are locally based, inter-agency strategic partnerships responsible for the design, development, publication, distribution, dissemination, implementation and evaluation of child protection policy and practice across the public, private and wider third sectors in their locality and in partnership across Scotland. Their role, through their respective local structures and memberships, is to provide individual and collective leadership and direction for the management of child protection services across Scotland. They work in partnership with their respective Chief Officers' Groups and the Scottish Government to take forward child protection policy and practice across Scotland.

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## Dundee Child Protection Committee

The Dundee Child Protection Committee core membership consists of representatives of key stakeholder agencies, namely...



The committee is chaired by an independent chairperson contracted to fulfil this role by Dundee City Council on behalf of Dundee Child Protection Committee. The Vice Chair role is undertaken by the Service Manager, Strategy and Performance Team, Children and Families Service, Dundee City Council.

There may be more than one representative of a partnership agency, for example, The Chief Social Work Officer for Dundee City attends together with a Learning and Organisation Development Officer. The committee also has a number of minuted members who are not required to attend every meeting. In addition, the Lead officer is neither a core nor minuted member but provides the necessary support for the committee. Full details of the membership of Dundee Child Protection Committee can be found in [Appendix 1](#).

The work of the Dundee Child Protection Committee takes place within a framework on both a local and national level. The committee is represented in a Tayside collaborative as well as the Central and North Scotland Child Protection Committee Consortium and Scottish National Chairs and Lead Officers group. Over the past 12 months this has provided an opportunity to share learning and experiences and develop areas for joint working in an effort to further develop continuous improvement of child protection policy and practice.



# The Child Protection Process (Management Information)

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The following summarises key management information relating to the formal Child Protection process.

The Child Protection process is one end of a spectrum of staged interventions applied across the partnership in Dundee to address concerns in respect of children and young people. Social Work come into contact with a very small number of families, with the majority not requiring any additional support at all. All children will, however, at various stages have ongoing input from health or education professionals and it is these services that are often the first point of contact to recognise and respond to issues of concern. When a child or young person is identified as having significant additional support or wellbeing needs, a written plan describing these needs and how they might be met is prepared. This involves a “Team Around the Child” (TAtC) meeting which includes parents, the child or young person and any other professional agencies who may provide support.

Most Team Around the Child meetings will not result in statutory child protection procedures, the presenting issues being adequately addressed by the appropriate agencies at the appropriate stage.

Similarly, Police Scotland operate a “Risk and Concern Hub” ensuring that all concerns raised are assessed appropriately and where wellbeing concerns are identified, relevant and proportionate information is shared with partners in a timely manner to enable the necessary additional support from all partner services.

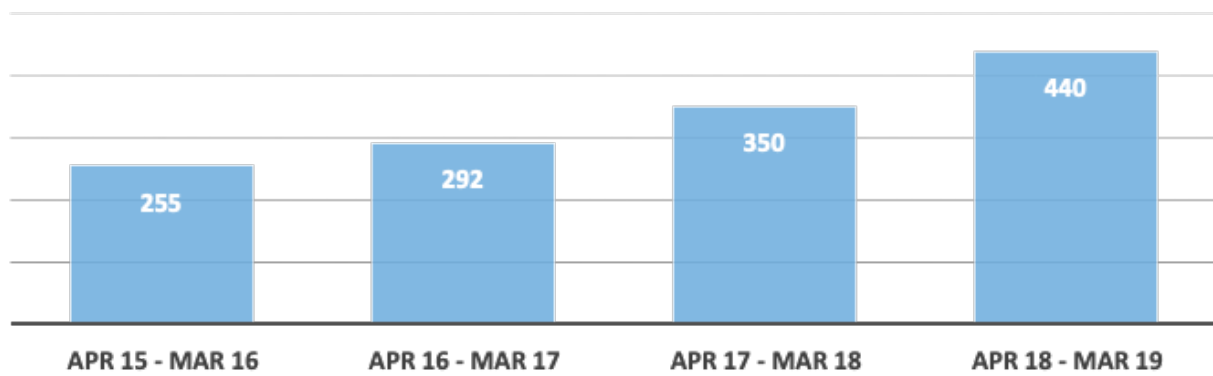
For a small number of children and young people it may be necessary to address the identified risk by way of statutory child protection procedures. This involves a referral to Local Authority for assessment / investigation.

**1115** referrals were made made to the Child Protection intake service in 2018/19 representing a 10% increase on the previous year.

The first stage of the Child Protection process is the Initial Referral Discussion. This is a multi-agency meeting that considers how best to proceed when investigating a concern and making immediate plans to keep children and young people safe.

The table below illustrates a steady increase in Initial Referral Discussions in recent years with a 26% increase from 350 last year to 440 in 2018-19.

### IRDs and DeBriefs - 3 year comparison



Some of these referrals may not relate to risk that requires a statutory response, however where it is suspected that a child or young person has suffered, is suffering or maybe at risk of harm or abuse then a joint assessment of this risk is undertaken.

### Number of investigations per quarter and number progressing to case conference



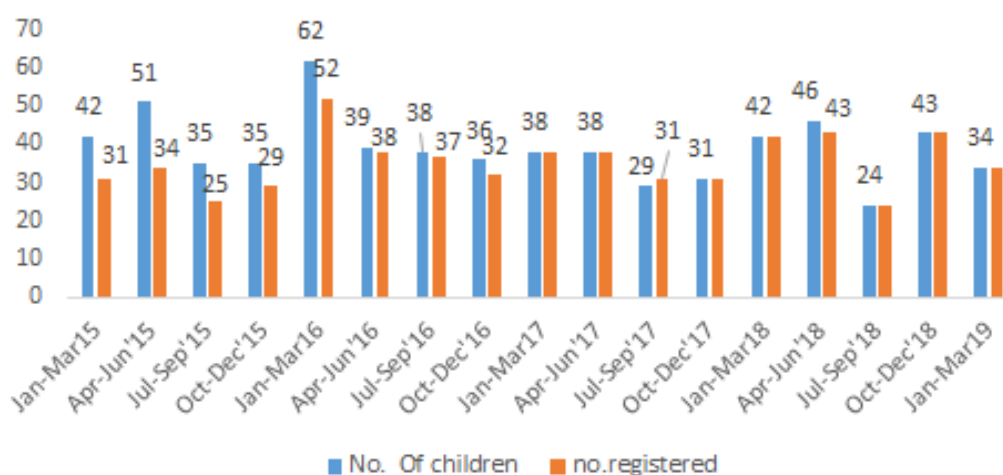


**410** Child Protection Investigations were recorded in 2018/19. An increase of 135 (33%) on the same period last year.

An initial Child Protection Case Conference (ICPCC) is held if the child is assessed as being at risk of significant harm, so that all of the relevant professionals can share information, identify risks and outline what needs to be done to protect the child.

Any agency may request a Case Conference and Social Work Services are responsible for responding to the request. A significant part of the function of the Case Conference is to determine if a child's name should be entered onto the Child Protection Register.

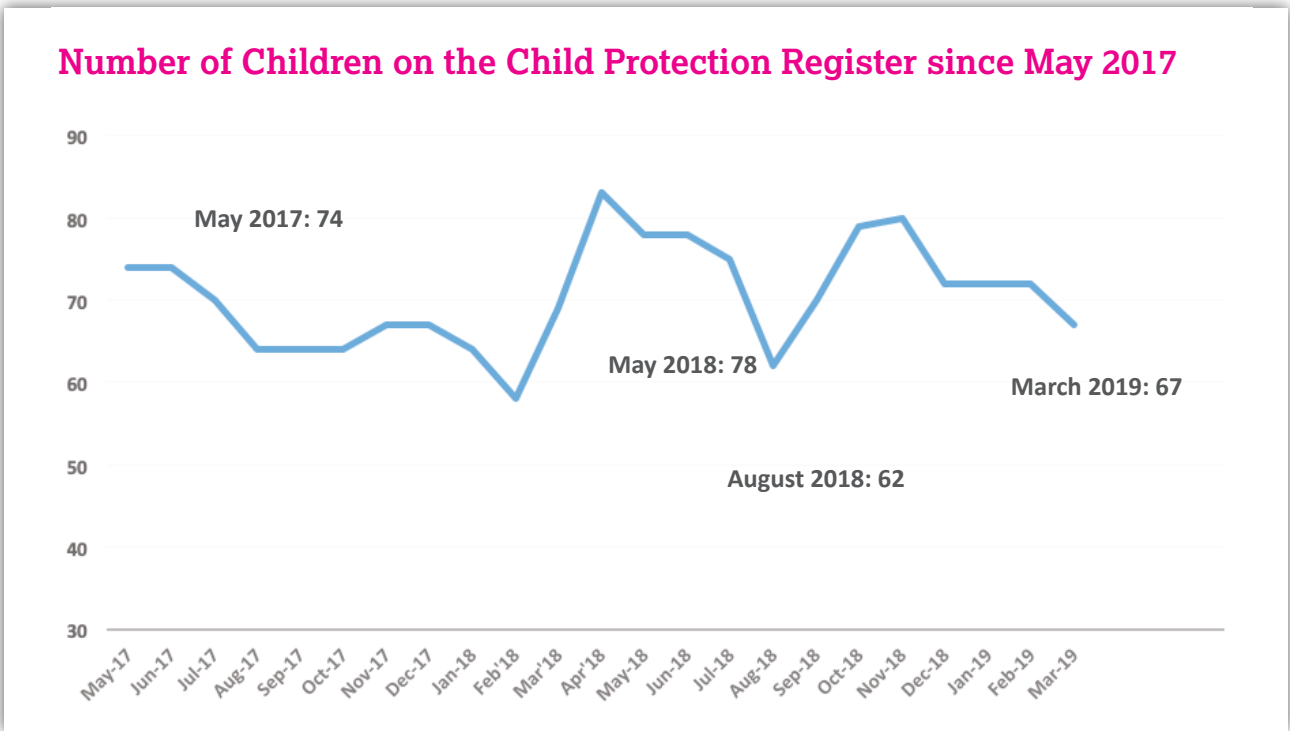
### Number of children at case conferences number registered per quarter



**147** children were at initial case conferences in 2018-19, all but three of whom were registered.

Every local authority area in Scotland has a Child Protection Register, which is a list of children who may be at risk of current or future harm. A child's name (including unborn babies) will be entered onto the register when they are believed to be at actual or potential risk of significant harm. The number of children whose names are on the register at any given time will vary.

**67** children and young people were on the Child Protection register for Dundee on 31st March 2019.



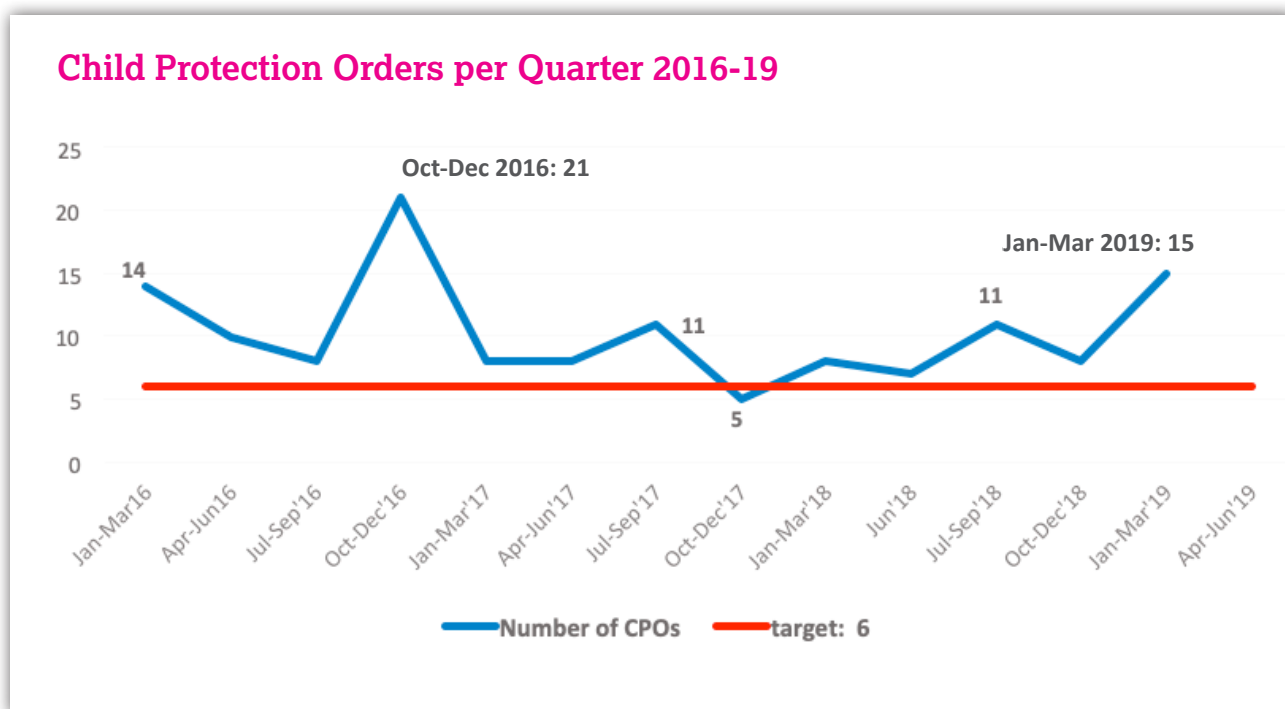
Children’s names can be entered onto the register for a variety of reasons relating to identified risk.

A child’s name will remain on the register until it has been agreed by a Child Protection Review Case Conference that they are no longer at risk of significant harm. This may be because the issues identified as placing them at risk have been addressed and no longer warrant registration, the child has been made subject to a supervision order by way of a Children’s Hearing or the child is being cared for by someone else in a living environment other than the one in which they were considered to be at risk. This may be with relatives or family friends (kinship care) or in a foster placement or residential establishment.

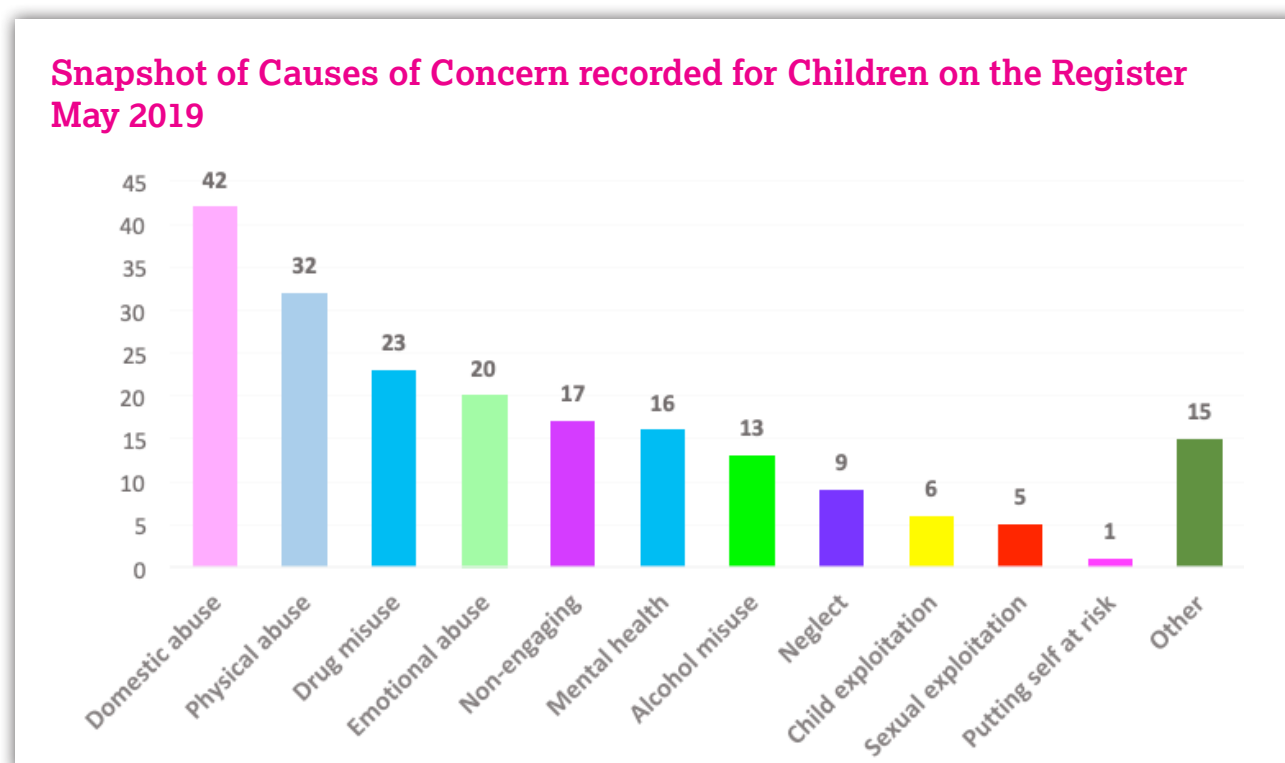
If, at any point during the child protection process, a child is considered to be in immediate danger, an order can be made through the sheriff court. A Child Protection Order (CPO) can be issued to immediately remove a child from circumstances that put them at risk, or to keep a child in a place of safety (e.g. a hospital). Anyone can apply to the sheriff for a CPO although in practice this is normally undertaken by the local authority. These emergency measures allow time to decide the best way to protect a child. This may involve a Case Conference and possibly care proceedings.

**41** CPO’s were granted in Dundee during 2018-19.

The graph below illustrates the impact of work undertaken to reduce the number of Child Protection Orders applied for in Dundee. Working in partnership with the Scottish Children’s reporters administration the committee is assured that the nature and level of CPO’s being sought is appropriate and proportionate to the risks identified.



Children’s names are entered onto the register for a variety of reasons. The table below illustrates the identified causes for concern recorded in relation to registrations.



Domestic abuse remains the most prevalent cause of concern. However, there has been a significant increase in the recording of incidents of physical abuse.

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## In Summary

Referrals have continued to increase although not to the extent noted in the previous year's annual report. This is largely attributed to increased awareness across both the public and partnership and a growing confidence in the workforce in recognising and responding to abuse and neglect. Similarly the Children and Families service report an increase in young people reporting concerns relating to themselves and their peers. This may be a result of the distribution of awareness raising materials and the publication of operational instructions and the launch of the public facing website.

The number of Child Protection Case Conferences and Joint Investigative Interviews have stabilised with only a marginal increase on the previous year.

There has been an increase in the reporting of physical abuse as a cause for concern.

# Progress with Recommendations from Last Year's Report

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Six recommendations were made in the 2018 Annual Report. Progress relating to these is detailed in the following section.

## **Recommendation One:**

**We will improve the integrity, collation and presentation of data to Dundee Child Protection Committee and Chief Officers Group to better inform decision making and the monitoring progress.**

There has been a significant improvement in the collation and use of data by Dundee Child Protection Committee and Chief Officers Group, some of which is summarised in this report.

The appointment of a senior officer – Information, to the Protecting People Team has complimented the work already progressed across the partnership. NHS colleagues have developed a reporting framework and partners across Dundee have contributed to the development of national data set for Child Protection.

The delivery plan for the coming year outlines the areas for quality and performance improvement that will form the basis of quarterly reporting to the committee.

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## Recommendation Two:

**We will undertake a review of roles, core functions and membership of Dundee Child Protection Committee.**

In partnership with the Improvement Service, Transformation, Performance and Improvement Team Dundee Child Protection Committee undertook a variety self-evaluation activity of core business. This has led to the development of thematic agendas and personal statements from all CPC members. Work is ongoing in the development of a corporate risk register in respect of Protecting People which reflects Child Protection needs.

Other actions from this activity are incorporated in the CPC delivery plan.

## Recommendation Three:

**We will consider the Recommendations from The Thematic Joint Inspection of Adult Support and Protection through the Public Protection Improvement Programme, monitor and evaluate progress with regular reports to the Committee and identify specific areas for development in respect of Child Protection.**

In partnership with the Care Inspectorate the Chief Officers Group (Public Protection) has embarked upon an ambitious two year transformation programme. The Child Protection Committee is an integral partner in this. A summary of this work is detailed later in this report.

## Recommendation Four:

**We will develop a working culture across the partnership whereby multi-agency self-evaluation activity is planned, supported and quality assured. The Child Protection Committee will seek to bring together single and multi-agency self-evaluation activity into an integrated picture, including supporting preparation for inspections as and when appropriate.**

Earlier this year a multi-agency case file audit of Child Protection and Looked After Children (LAC) services was undertaken by a sub-group of the Protecting People Self-Evaluation Group as part of its commitment to learning and continuous improvement.

The findings from this audit are detailed later in this report. This, in turn, informs the Child protection delivery Plan detailed in the appendices of this report.

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## Recommendation Five:

**We will work with our partners across Tayside to deliver on the priorities identified by the Tayside Plan for Children, Young People and Families.**

Please refer to the section relating to Tayside Regional Improvement Collaborative Priority Group 5 for details of progress against this recommendation.

## Recommendation Six:

**We will ensure that learning from Initial and Significant Case Reviews are applied in the context of Child Protection across Dundee.**

Over the last year this has been an area of significant development in Dundee. Review and development of Initial and Significant Case Reviews features as part of work undertaken by both the Chief Officers Group and Tayside Regional Collaborative. Dundee Child Protection Committee undertook two initial case reviews last year with practice improvement actions arising from both. The committee has also considered learning identified from a national review of SCR's undertaken by the Care Inspectorate. Revisions to the Dundee Significant Case Review protocol have been piloted throughout the year.





# NHS Tayside: Continuous Improvement

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NHS Tayside is one of 14 health boards across NHS Scotland providing healthcare for the residents of Tayside. We are committed to transforming the lives of the children and young people, protecting them from harm and helping them to build a healthy future.

**Our Services** including doctors, nurses and other health professionals are often the first to recognise and respond to issues of concern about a child or young person and all of our staff are responsible for acting on concerns they may have about children and young people.

**Child Protection Services** A dedicated team of medical, nursing and other key professional support our staff and provide specialist child protection expertise to ensure children and young people are protected from harm. The child protection service ensures appropriate work is undertaken and support is available to services and health practitioners to ensure child protection standards are met across NHS Tayside.

**NHS Tayside Child Protection Standards** ensure we deliver the very best service to children and young people. This year we have successfully achieved 95% of our targets and we continue to make great progress in the work we do with others to protect children and young people. In the forthcoming year we will continue to build on the success made and address any challenges ahead.

## How well are we doing?

In 2018/2019 a range of activities to strengthen and develop services to protect children and young people were undertaken.

## Working in partnership to protect all children & young people

When a concern is raised about an unborn baby or a child or young person who may be at risk of significant harm, NHS Tayside contributes to the child protection process and supports partnership working in a number of ways.

## Protecting children before they are born

NHS Tayside's Unborn Baby (UBB) Protocol, developed by the Child Protection Service, encourages a range of health practitioners to consider the unborn baby's needs and to seek the support needed to keep vulnerable unborn babies and pregnant women safe. In 2018/2019 353 Unborn baby referrals were made by health professionals.

## Protecting Pre- School & School Aged Children

Health Visitors and Family Nurses services are often the first point of contact for children aged 0-5 years, while School Nurses support school aged children and young people. The information they share in reports to Child Protection Case Conference meetings and Scottish Children's Reporter Administration ensure decisions about risk and what needs to happen next to protect children and young people are made using all the available information.

In 2018/2019, 1168 reports were submitted to the Child Protection Case Conferences and 603 reports were submitted to the Scottish Children's Reporter Administration by Health Visitors, Family Nurses and School Nurses across Tayside.

## Looked After Children and Our Corporate Parenting Role

Looked After Children (LAC) have the poorest health and wellbeing outcomes. Our corporate parenting role and responsibilities are to improve outcomes and ensure the rights and needs of care experienced and looked after children and young people are met.

In 2018/2019 Health Visitors, Family Nurses and School Nurses submitted 1,167 Looked After Children review reports.

## Child Protection Advice Line

NHS Tayside's centralised telephone child protection staff advice line provides advice on child protection matters and signposts staff to other agencies when needed, Mon - Fri 9.00am - 4.30pm (excluding Public Holidays).

In 2018/19 there were 499 calls to the CP Advice Line from a wide range of health services.

## Child Protection Training

A programme of training including mandatory Child Protection e-learning for all staff, core child protection training and training on specific topic areas was delivered by the Child Protection Service in 2018/2019. This year we piloted a new Child Protection Core Skills programme which included input from the Children's Reporter, Police Scotland and Social Work services. We also delivered a range of training to partner agencies in a variety of areas including neglect, Child Sexual Exploitation and Hostile Non engaging families.

### In 2018/2019:

**282** new staff attended child protection induction and briefings.

**5,394** staff completed Level 1 training.

**414** staff attended Level 2 workshops.

**164** staff attended Level 3 training.

## Multi- Agency Training Programmes

We recognise that children are best protected when we work together and the Child Protection team continues to deliver and support multiagency training programmes across the local authority partnerships and this year supported the delivery of Child Sexual Exploitation, Working with Hostile and Non-Engaging Families and children and young people experiencing neglect.

## Case Supervision Programmes

For staff involved in the day-to-day work with children, young people and families, effective supervision is important to promote good standards of practice.

In 2018/2019, the Child Protection Service offered 596 one to one child protection supervision sessions to Health Visitors and Family Nurses.



# Multi Agency Case File Audit

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Earlier this year a multi-agency case file audit of Child Protection and Looked After Children (LAC) services was undertaken by a sub-group of the Protecting People Self-Evaluation Group as part of its commitment to learning and continuous improvement.

**The following section summarises the key findings from the audit process.**

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## Areas of Strength

**Early Intervention:** Early intervention activity was seen as an area of particular strength in the majority of cases. This included:

- Recognising when additional support was needed at an early stage.
- The timeliness and effectiveness of early support provided.
- Effective sharing and use of information to provide early support.

**Initial Response to Child Protection Concerns:** Services initial responses to child protection concerns were also highlighted as an area of strength. This included:

- The speed and effectiveness of responses.
- Involving the appropriate agencies.
- Involving Family Members.
- Multi-agency working and communication.
- Securing appropriate accommodation to keep the child / young person safe.

**Improving Family Resilience and Parental Confidence:** Overall, services were assessed as very effective in relation to improving family resilience and parental confidence. In particular this appeared to be due to services supporting parents / carers to develop skills to recognise and respond appropriately to their child's needs and to make safety plans.

**Improving the Wellbeing of the Child / Young Person:** When rating the extent to which the child / young person's wellbeing had improved as a result of the services they had received, the majority of cases contained evidence that wellbeing had improved to some degree. This suggests that services are having a positive impact on the children and young people receiving them although there was scope for further improvement in some of the cases.

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## Areas for Improvement

**Chronologies:** The audit process highlighted inconsistencies in practice regarding where chronologies are stored within social work records and what they contain. When assessing the quality of chronologies, the following issues were highlighted:

- Chronologies appeared incomplete (either missing significant events or key information about events).
- Chronologies included information that was not judged as relevant or contained unnecessary detail.
- Chronologies appeared to be not up-to-date.

**Recording of Core Processes:** A number of inconsistencies were identified in how certain core processes were recorded within MOSAIC including chronologies, assessments, and plans.

**Quality of Plans:** The majority of plans were not assessed as being SMART. In particular:

- Actions were not always clearly linked to specific individuals or timescales.
- It was unclear how risks and needs connected to actions within the plan.

**Initial Response to Wellbeing Concerns:** Just under half of cases (4) were rated as 'weak' in relation to their initial response to wellbeing concerns. In these cases, it appeared that the initial focus of workers tended to be on child protection concerns which led to a delay in addressing other wellbeing concerns. This at times led to wellbeing concerns escalating when unaddressed.

**Involving the Child / Young Person and Offering Advocacy:** Overall, the evidence within case file records suggested that involving the child / young person in key processes and supporting them to understand and exercise their rights, comment on the service they received, and express dissatisfaction were areas for improvement. However, it was noted that these findings may be partly explained by inconsistencies in how this information is recorded or by this information being included in education files which were not included in this audit.

In the majority of cases for children and young people, and in all cases for parents and carers, independent advocacy was not offered.

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**Reviewing the Child / Young Person's Progress:** There were cases which showed evidence of good practice in relation to reviewing the child / young person's progress. However, approximately half of all cases (7) were rated as 'adequate', 'weak', or 'unsatisfactory' in regards to reviewing progress. The main issues identified in these cases were that:

- The evidence suggested that reviewing did not occur regularly enough as appropriate to the child / young person's needs.
- There did not appear to be evidence within case files of analysis or change resulting from reviews.

In response to the findings from this audit an action plan has been applied and this informs the Child Protection Delivery Plan detailed in the appendices of this report.





# SAFE & TOGETHER

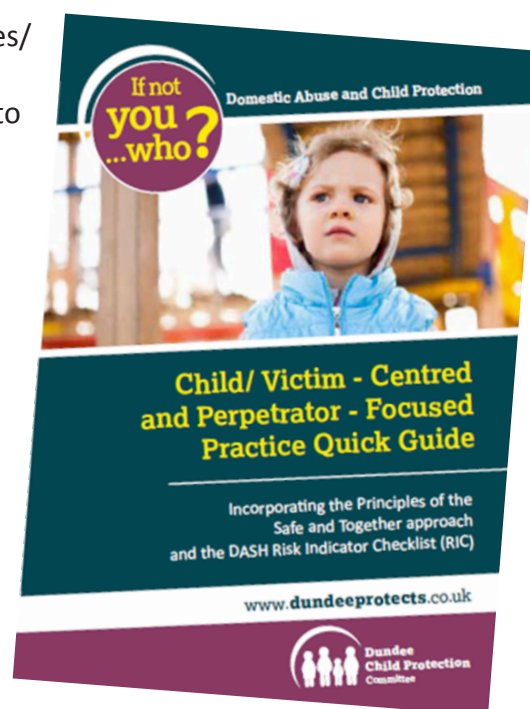


There has been renewed focus on implementing S&T in Dundee over 2018/19 and the following we have made good progress in a number of areas.

A short life working group has been set up to develop resources/guidance for Dundee with Social work staff from children and families and community justice involved in this. A short guide to Safe & Together/Risk Assessment tool for domestic abuse has been developed and wider guidance on Domestic Abuse and Child Protection is in progress.

Our Practitioner Forum has been re-established and we have focused on developing skills and confidence in the delivery of Safe and Together briefing sessions to prepare for delivering these across a range of services and teams. 20 practitioners who undertook the original 4 day Core training have now had training to deliver the briefings and a standardised briefing presentation and materials have been developed. At the most recent forum the focus was on strengthening our understanding of perpetrator behaviour and a Forensic Psychologist led this discussion.

Briefing sessions are underway and we have had support from the Communications Team (DCC) to develop a communication strategy for S&T and we have received requests from C&F teams, high schools and the Caledonian team. The Children's Panel have also requested sessions. In future we hope to extend briefing sessions to health staff and initial meetings have taken place Community Nursing Teams. We are also keen to extend sessions to Police Scotland, ISMS and housing.



## Sample feedback from briefing sessions delivered so far:

“Very informative, gave lots of food for thought and will impact positively on my responses when working with children and families experiencing domestic abuse”

## Staff are asked to give examples of how they will implement S&T in their practice:

“More aware of what language I’ll use and focus on the perpetrator”

“To try and stop placing responsibility for child’s safety on the non-abusive parent”

“What language you use when speaking to parents/how to change your mind set when dealing with these situations”

A full day training delivered by the Safe and Together Institute UK lead took place for C&F SW team managers we can now offer Case Consultation for practitioners to discuss and reflect on their case to help them work more effectively with a family. It will be facilitated by our domestic abuse resource worker with assistance from other S&T trained champions. The case consultation supports professionals to consider the case from a domestic abuse lens; it can assist an assessment process and the development of the child’s plan.

As we have progressed with S&T implementation there has been consistent feedback around the need for further CORE training. A proposal is currently being developed around implementing the S&T Certification training in Dundee. This would allow us to have a certified trainer to deliver Core 4 day training and 1 day overview training at a vastly reduced cost in comparison to using Safe and Together Institute trainers from the US.

# Tayside Plan for Children, Young People and Families



The [Tayside Plan for Children, Young People and Families 2017 - 2020](#) [11Mb] (also available in [poster](#) [2Mb] format) is the first joint plan to be produced by the three Community Planning areas of Angus, Dundee and Perth and Kinross. It reflects shared leadership towards multi-agency cross-border collaboration in the planning, management, commissioning, delivery, evaluation and improvement of services to children, young people and families.

Priority Five of the plan states

**“Our children and young people will be safe and protected from abuse at home, school and in the community”.**

Over the last year, Priority Group 5 has continued to build on the longstanding commitment of the Child Protection Committees in Angus, Dundee and Perth and Kinross to working in collaboration, sharing practice and to pooling resources whenever it is appropriate and to add value to our continuous improvement in services to protect children and young people. A successful joint leadership event was held in April 2019 which brought together Chief Officers and Child Protection Committee members across the collaborative. This considered the potential for further collaboration in relation to the leadership of child and public protection and a commitment to developing best practice in relation to multi-agency case review.

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The initial focus of PG5 was to ensure incremental improvements to result in consistent high quality child protection practices across the collaborative and to provide a more solid foundation for larger scale change and integrated models of delivery over the life time of the plan. A delivery plan is supported by Action Groups with representation sufficient to implement improvement across agencies forming the collaborative and a clear remit to achieve step change in key areas which are notoriously complex and problematic both locally and nationally. Taking time to connect through regular meetings and developing shared understandings of similarities or variations is building stronger partnership working. Very good progress has been made in relation to the original identified actions particularly in relation to the development of shared key processes and guidance for staff.

The Priority Group has ambitious plans going forward into 2019/20 and beyond particularly in relation to workforce development, learning from case review and further strengthening leadership of child protection. Monitoring progress systematically has been a key feature of our work and the delivery of a single comprehensive performance management and information framework for child protection by January 2020 will mark a major step forward.

In the Tayside Plan, we said we would do the following to ensure our children and young people will be safe and protected from abuse at home, school and in the community:

**1 Develop, implement and quality assure a standardised approach to key child protection processes across Tayside, in particular Inter-Agency Referral Discussions (IRDs) and Medical Examinations to improve practice consistency and to provide better outcomes for children and young people.**

IRDs are fundamental to prompt and robust responses to children and young people who are at risk of abuse, exploitation and neglect. These discussions form the cornerstone of robust initial sharing of information; risk assessment; identification of actions to ensure the child is kept safe; planning and decision-making. Lessons from case review and independent inspection underline the importance of high quality IRDs to immediate and proportionate responses to children and young people at risk and that this is an area for improvement national across Scotland. New standardised multi-agency guidance for conducting Inter-agency Referral Discussions along with associated templates and tools have been completed for application across Tayside. These have taken account of local areas for improvement, inspection findings and national operating procedures for Police Scotland and are now future-proofed for the review of National Guidance for Child Protection. The views of a wide range of staff who are involved in IRDs across the collaborative have been gathered between Jan-March 2019 and their views have informed the final versions.

A protocol for Paediatric Medical Examinations has been drafted to fit with IRD guidance and will be finalised by September 2019 to take account of local case review and after further consultation.

**Next Steps:**

Support the implementation of the new guidance through a programme of workforce development, and, establish multi-agency quality assurance and review of IRDs.

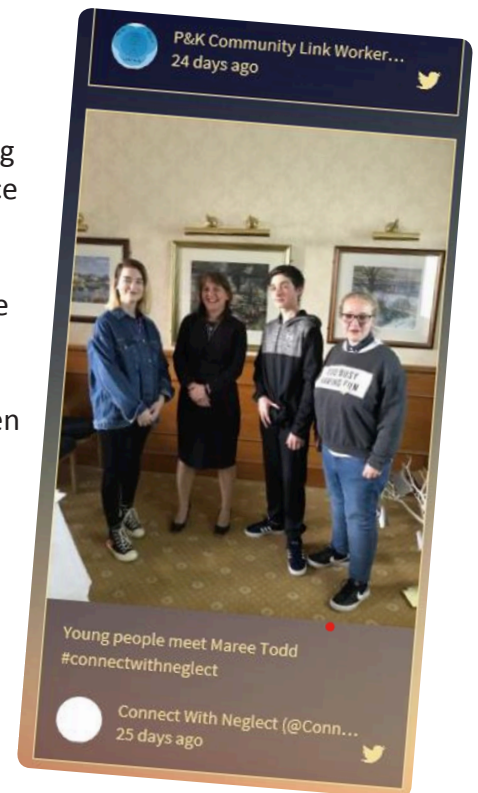
## 2 Continue to build a confident, competent and supported workforce in order to protect children and young people from abuse, exploitation and neglect.

In partnership with the CELCIS, strengthen our approaches to tackling and mitigating the effects of childhood neglect.

With the aim of raising practitioner awareness and understanding on tackling neglect and enhancing wellbeing a Tayside Conference Connect with Neglect was held in Dundee in November 2018. The conference started with keynote addresses by Maree Todd, Minister for Children and Young People and James Docherty. The views of people with experience of childhood neglect featured prominently throughout the programme and the importance of developing trusting relationships and talking directly with children and young people about what they are experiencing was a key learning point.

The programme also included the opportunity to share learning from the work in partnership with CELCIS in Dundee and Perth and Kinross in Addressing Neglect and Enhancing Wellbeing using a Getting it Right for Every Child approach and the use of the Graded Care Profile in Angus.

The conference was attended by 160 practitioners across health, education and early years, social work, youth services, police and the third sector. Evaluations were very positive with 4 out of 5 attendees agreeing that as a result of the conference they were more confident and assessing the impact of neglect and responding to families in which childhood neglect is a factor.



### Next Steps:

To build on the conference content and develop learning materials which can be used in a variety of contexts to continue to build confidence across the workforce.

Continue to support the improvement work via Addressing Neglect and Enhancing Wellbeing supported by CELCIS to develop early intervention and preventative approaches to neglect across the collaborative where this links to services to protect children.

### **3 Develop creative approaches to helping children and young people to stay safe online.**

An initial mapping of current programmes aimed at keeping children safe online carried out by 3rd sector reps across all three local authority areas and Further Education colleges was completed. In partnership with the University of Abertay, a research project was completed which sets out learning from research into the interface between children, young people, online risks and their views about the best ways to support them to stay safe.

A highly-evaluated training programme has now been selected for a multi-agency audience and commissioned from the Marie Collins Foundation and this alongside training of local champions will be delivered later in the year.

Following a successful and highly evaluated Getting it Right: Staying Safe On Line event in March 2019 in Perth which has been recognised nationally as good practice, the model will be adapted and rolled out across the three local authority areas before end June 2020.

#### **Next steps:**

Establish a multi-agency working group to plan, coordinate and implement the roll out of good practice.

### **4 Develop and implement best practice for the involvement and participation of children, young people and families in key child protection processes and in the work of the CPCs.**

An analysis of practice across the collaborative has been completed to identify key areas for development and as a result a detailed work-plan has been developed which will lead to:

- Tayside guidance for Child Protection Case Conferences based on best practice principles
- Revised and updated information for parents, carers, children and young people
- Resource bank of tools for engaging with children, young people and families
- Shared approach to quality assurance and evaluation of practice across the collaborative (data and management information will be collated and shared across the collaborative from January 2020)

#### **Next steps:**

Over the next year complete the work-plan actions and implement best practice in participation and involvement across the collaborative.

Carry out a review of advocacy services for children, young people and families involved in key child protection processes and consider the potential for strategic, joint commissioning.

## 5 **Develop and pilot qualitative measures in relation to the impact of child protection interventions on the safety and wellbeing of children and young people.**

This is an area of significant challenge across Scotland. As a result of close working with the Performance Group, Tayside partners and support from CELCIS in relation to their work as part of the National Child Protection Improvement Programme, Priority Group 5 will have in place by January 2020 a comprehensive performance and management information and reporting framework. This will allow consistent data to be collected, analysed and scrutinised in a quarterly basis within each Child Protection Committee and across the collaborative. The data will include quantitative and qualitative information in relation to key child protection processes. Helpful questions have also been devised to aid scrutiny and evaluation.

### Next steps:

To ensure reporting commences by October 2019 and to provide development opportunities for Child Protection Committees and Chief Officers on the framework and effective scrutiny.

To quickly identify areas for good practice worthy of sharing and scaling up across the collaborative and identify areas for targeted improvement to be included in the Priority Group 5 work plans.

## 6 **Review and implement a consistent approach to chronologies (single agency and multi-agency) to improve practice consistency and to provide better outcomes for children and young people.**

The review and refresh of the Tayside Practitioner's Guidance on Chronologies was completed in February 2019. This has been developed to provide all practitioners working with or involved with children, young people and their families across Tayside, with clear practice guidance on the effective use of Chronologies.

This guidance is for all practitioners and managers working across the public, private and third sectors across Tayside and provides minimum standards aimed at ensuring a consistent practice approach to Chronologies.

A key underpinning document is the Code of Practice for Information Sharing, Confidentiality and Consent published by the Perth and Kinross Community Planning Partnership in January 2019 and which has been adopted across the collaborative to take account of the Data Protection Act 2018 and GDPR.

These two publications together support staff and volunteers across the public, independent and third sectors to share information lawfully and to compile chronologies of significant events which are designed to safeguard the welfare and safety of children and young people.

### Next steps

To ensure that training and workforce development plans support the ongoing implementation of good practice in information-sharing and chronologies.

## 7 Other developments

Leadership of child protection

Learning from Case Reviews

ICRs and SCRs – Sharing learning across Tayside

Priority Group 5 had considered a local analysis of Child Protection Initial and Significant Case Reviews undertaken across Tayside from January 2016 and considered the findings in January 2019.

Following the publication of the Care Inspectorate’s Triennial Review in May 2019 the group has agreed to commission a researcher with UK expertise to identify recurrent themes and trends; a profile of the children and families subject to case review in Tayside; identify policy and practice implications of the findings and to examine the effectiveness of resulting improvement activity across the collaborative. It is anticipated that this work will be completed by December 2019.

### Next Steps

To report to the Chief Officers Groups on the research findings and to propose new arrangements for case review across Tayside which build on good practice and focus on identifying learning quickly and ensuring effective arrangements for realising practice improvement as early as possible.



# Dundee Child Protection Delivery Plan 2019-2020



Dundee Child Protection Committee is committed to reviewing and improving its activity in relation to keeping children and young people safe.

To this end, a delivery plan has been developed for the coming year.

An analysis has been undertaken identifying key issues, strengths and areas for improvement from the following sources;

- Former Balanced Scorecard and associated Child Protection datasets including the proposed National Minimum Dataset for Child Protection.
- Preventative work in with the GIRFEC Delivery Group action plan
- Case File Audit outcomes and Action Plans
- Learning and Workforce Development activity
- Work carried out by the Improvement Service
- Actions being progressed by Priority Group 5 of the TRIC
- The findings of SCRs and ICRs
- Protecting People Transformation Programme.

The plan has also been informed by interim findings of the national care review; the new national CP minimum dataset; and Care Inspectorate quality framework.

The **Care Inspectorate guide** for the joint inspection of services to children in need of care and protection has also been referenced in developing the plan.

The plan compliments improvement work being undertaken elsewhere across the partnership. Five priority areas have been identified, namely;

1. What key outcomes has Dundee Child Protection Committee achieved?
2. How well does Dundee Child Protection Committee meet the needs of our stakeholders?
3. How good is Dundee Child Protection Committee’s delivery of services for children, young people and families?
4. How good is Dundee Child Protection Committee’s operational management?
5. How good is Dundee Child Protection Committee’s leadership?

These priorities are closely linked to the **quality framework for children and young people in need of care and protection 2019** (revised).

Each section considers a priority area, considering the extent which Dundee CPC can demonstrate key outcomes, what evidence may be used and proposed actions to support the plan before detailing objectives, actions, leads, timescales success criteria and measures / indicators.

As summary of the priority areas is included in the following section.

## 1 What key outcomes has Dundee Child Protection Committee achieved?

This section is about the real difference and benefits that services are making to the lives of vulnerable children, young people and families. It focuses on the tangible results partners are achieving in relation to making and keeping children safe.

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### **To what extent can we demonstrate:**

- Positive and sustained trends (three years or more) in improving outcomes for children and young people in need of care and protection.
- Good use of reliable data measures is providing results that demonstrate improving outcomes over time for children in need of care and protection.
- Improved outcomes as a result of carefully gathered and analysed trend data which has been well used to understand cause and effect.
- Key measures demonstrate that children in need of protection are increasingly safer.

### **Evidence to support plan.**

- Evidence from local performance management systems.
- Reports on performance using the shared dataset (Commencing 1st October 2019)

- Systems and processes in place which produce reliable and robust data gathering and analysis.
- Trend data and benchmarking against comparators.
- Perceptual data gathered from children, young people, families and other stakeholders.

**Data to committee on Quarterly Basis commencing 1st October 2019 includes...**

- Number of children subject to initial/pre-birth Case Conferences
- Newly registered
- Numbers referred on non-offence grounds
- Conversion rate of Children to Registration
- Number of Children (including Pre-Birth) on the Child Protection Register
- New Registrations, De-Registrations, Re-Registrations within 3, 6, 12 and 24 months of de-registration
- Characteristics of our vulnerable children and young people
- Concerns recorded for Children and Young People at Registration
- Children and young people in the children's Hearing System – Referrals and Child Protection Orders Granted
- Parental or carer attendance at initial Child Protection Case Conferences and initial Core Group Meetings
- Annual national to local benchmarks

Please refer to scrutiny questions & annual national to local benchmarks (Appendices).

.....

**Proposed Action(s): 2019-2020**

Committee to agree on priority indicators. Committee will be provided with data on a quarterly basis and analysis of scrutiny questions.

**2**

**How well does Dundee Child Protection Committee meet the needs of our stakeholders?**

This section is about the experience and feelings of children and young people in need of care and protection and their parents and carers. It relates to the differences services are making to their lives and their life chances in the future. It includes the impact of services in optimising the wellbeing of individual children and young people across the wellbeing indicators. It takes into account how well care leavers feel they have been supported towards adulthood by their corporate parents. It considers how vulnerable children, young people and

families are helped through compassionate, supportive and empathic engagement with staff. It focuses on the extent to which families are helped to build resilience and meet their own needs.

.....

**To what extent can we demonstrate:**

- Children and young people feel listened to and that their views are taken seriously when decisions are being made.
- Children and young people feel that staff have taken the time to get to know them, the impact of their previous experiences and understand their strengths and needs.
- Children and young people enjoy good relationships, built up over time, with consistent adults who they trust enough to talk to when they need help.
- Children and young people feel that they are in the right place to experience the care and support that they need.
- Children and young people’s wellbeing is improving across all the wellbeing indicators.

**Evidence to support plan:**

- Feedback from children and young people in all forms, including digital communication.
  - Focus groups.
  - Use of the GIRFEC practice model and wellbeing web.
  - Recording of children’s and young people’s views in case records.
  - Contributions from children and young people to child protection case conferences, core groups and looked after child reviews.
  - Use of independent advocacy services.
- .....

**Proposed Action(s): 2019-2020**

The Tayside Review Officers Network will finalise a practice evaluation framework focusing on assessment, planning and outcomes for children and young people. Consultation on our ‘My Views’ in Dundee will be extended to consult on local application ahead of a full launch across two Tayside areas.

Children, families and young people’s views to be recorded by reviewing officers and collated to inform individual care plans, trend analysis and strategic planning.

Practitioner’s forum to focus on gauging stakeholders views.

## 3

## How good is Dundee Child Protection Committee's delivery of services for children, young people and families?

This section is about processes for service delivery. It considers the effectiveness recognition and initial response to children and young people when there are concerns about their safety. It focuses on the timelines and quality of decision making when a child or young person needs to become looked after. It looks at how assessments of risk and need are kept up to date and relevant to changing circumstances and children and young people's development. It considers the quality of plans to reduce risk, meet needs and improve wellbeing. It takes account of the effectiveness of arrangements for reviewing progress, looks at timely and effective intervention and considers the extent to which children, young people and families are informed, included and enabled to take part meaningfully in assessment, planning and intervention according to individual needs / life experience.

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### To what extent can we demonstrate:

- Systems are in place for receiving and recording information from anybody who is concerned about the safety or wellbeing of a child (including outside office hours).
- Staff, including those who work with adults, are alert to and recognise the signs that children and young people may need help or protection from harm. This includes patterns of concern over time and cumulative harm.
- If a concern is raised about a child or young person which requires further exploration, staff have the skills to gather relevant information, know what the other sources of information are and how to get them.
- Staff confidently analyse the information gathered to reach an initial assessment.
- Appropriate consideration is always given to arranging initial referral discussions involving the minimum of police, health and social work.
- Initial Referral Discussions (IRDs) always take place in response to child protection concerns including when new concerns arise for children or young people already receiving a service.
- A clear system for recording IRDs is used by partners and clearly outlines the rationale for decision making.
- Consideration is always given to conducting a forensic medical examination.
- Staff take appropriate action to ensure that no child or young person is exposed to continued risk of harm.
- Consideration is always given to refer the child or young person to the Children's Reporter.

### Evidence to support plan:

- Feedback from children, young people and families.
- Results of previous scrutiny.

- Relevant plans and policies.
- Information sharing guidance and protocols.
- Child protection procedures.
- Looked after children and young people procedures.
- Public information.
- Relevant performance management data.
- Review of records for individual children and young people.
- Audit of initial referral discussion minutes.
- Audit and review of medical examinations.

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### Proposed Action(s): 2019-2020

Continue to progress Case File Audit Action Plan for Children and Families Social Work and ensure this informs review of training / guidance. (appendices)

Establish a working group to facilitate a deeper dive of CP cases and those where neglect is an issue in particular.

## 4

### How good is Dundee Child Protection Committee's operational management?

This section is about operational and strategic management of services for children, young people and families. It considers the extent to which child protection and corporate parenting policies, procedures and the use of legal measures link to the vision, values and aims and support effective joint working. It looks at the effectiveness of children's services planning, the corporate parenting arrangements and the child protection committee, in improving outcomes for children and young people. It focuses on how well children, young people, families and other stakeholders are involved in service planning and development. It gives attention to how well children's rights are promoted. It relates to the effectiveness of performance management and quality assurance to ensure high standards of service delivery. It takes account of how well self-evaluation is informing improvement and service development.

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#### To what extent can we demonstrate:

- Policies and procedures are consistent with the strategic vision.
- Policies and procedures carefully consider and reflect local partnership arrangements to ensure cohesion across structural boundaries.
- Policies and procedures are equality impact assessed, effectively implemented and regularly evaluated and reviewed.

- A cohesive suite of policies are in place to ensure we have no significant gaps.
- Policies and procedures reflect a focus on outcomes.
- Effective communication and management systems are in place to ensure that employees understand and implement policies and procedures.
- Single and multi-agency policies and procedures fit well together and enhance partnership working.
- Best practice is promoted through the development of new policies and procedures.
- Legal measures are always appropriately considered when making decisions about the care of children and young people.

**Evidence to support plan:**

- Strategic and operational plans.
- Committee reports and board papers.
- Procedure manuals.
- Guidance for employees.
- Guidance or handbooks for carers.
- Employee newsletters, bulletins and other communications.
- Individual records of children and young people subject to legal measures.
- Minutes of case conferences, reviews and other decision-making meetings for children and young people.
- Equality impact assessments.
- Disability equality duty policy.
- Other equality policies.

**Proposed Action(s): 2019-2020**

Ensure that single and multi-agency self-evaluation activity informs the review and development of policies, procedures, instructions and guidance. Develop regular seven minute briefings relating to development activity

5

**How good is Dundee Child Protection Committee's leadership?**

This section is about the commitment and effectiveness of leaders in striving for excellence in the quality of services to keep children safe and achieve sustained improvements in the lives of children, young people and families in need of care and protection. It focuses on collaborative leadership to plan and direct the delivery of services for children and young people linked to the shared vision, values and aims. It also examines how well leaders are driving forward improvement and change. It takes account of how well leaders are adapting to new environments and negotiating complex partnerships.

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**To what extent can we demonstrate:**

- Partners place improving outcomes for people using services at the heart of their vision.
- There is a shared vision for protecting children which is ambitious and challenging.
- There is collective ownership of the ambitions and aspirations of the partnership.
- Partners understand and demonstrate their commitment to equality and diversity.
- Partnerships include all the right people to meet the identified objectives of protecting children and meeting corporate parenting responsibilities.
- Working in partnership with others is actively considered where this could add value to existing or planned services.
- Leaders have a clear understanding of the local and national priorities that drive child protection and corporate parenting services.
- Leaders take a long-term view in setting the strategic direction.
- There has been wide enough consultation about future options and risks and the best way forward for child protection and corporate parenting services.
- Plans contain a proper analysis of needs and gaps and what needs to change.
- There is purposeful leadership of strategy and commissioning with sound implementation and monitoring arrangements.
- There is clarity about the resource contribution that each partner makes to the partnership and about governance.

**Evidence to support plan:**

- Plans including the local outcome improvement plan, children's services plan, corporate parenting plan, Tayside Plan / Tayside Regional Improvement Collaborative (TRIC).
  - Senior managers' communication with the workforce about professional standards.
  - Examples of how senior managers have communicated their vision for children and young people in need of care and protection.
  - Employee surveys that demonstrate employees understand the vision.
  - Communication from children, young people and families demonstrating that they have been involved in developing the vision, values and aims.
  - Feedback from engagement with children, young people, families, staff and community members.
- .....

**Proposed Action(s): 2019-2020**

Dundee CPC adopts a shared vision.

Further develop actions identified from Improvement Service Activity.

Further develop Corporate Risk Register for Protecting People.

Further progress Transforming Public Protection



# Appendices





# Appendix 1

## Appendix 1: Dundee Child protection Committee Membership as of March 2019

Position	Organisation
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The following are core members. Dundee CPC also has a number of minuted members who are not required to attend every meeting. In addition, the Lead officer is neither a core nor minuted member but provides the necessary support for the committee.

Independent Chairperson	Dundee Child Protection Committee
Panel member(s)	Dundee Children's Panel
Lead Officer (Alcohol and Drug Partnership Representative)	Alcohol and Drug Partnership
Chair of the Vulnerable Adolescent Partnership	Dundee City Council
Chief Social Work Officer	Dundee City Council
Learning and Organisational Adviser	Dundee City Council, Learning and Organisational Development Service
Strategy and Performance Manager (IJB)	Dundee Health and Social Care Partnership
Principal Officer	Dundee City Council, Children and Families Service, Strategy and Performance
Service Manager (Vice Chair)	Strategy and Performance Team, Children and families Service, Dundee City Council
Locality Manager	Scottish Children's Reporters Administration
Assistant Director (Third Sector Rep)	Barnardo's Scotland
Independent Chair	Violence Against Women Partnership
Protecting People Team Leader	Dundee City Council, Neighbourhood Services
Lead Paediatrician Child Protection	NHS Tayside
Lead Nurse Child Protection	NHS Tayside
Lead Nurse Children and Young People	NHS Tayside
Detective Chief Inspector PPU & CID Partnerships and Support	Police Scotland



# Appendix 2 Glossary

This is an explanation of some Child Protection terms.

## A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

### A

**Assessment of need** - Evaluation of the child and family identifying areas of need, which may require additional support.

**Assessment of Risk** - Evaluation of possibility of child abuse has taken place or that it is likely to occur in the future.

### B

**Buddy Scheme** - is aimed at supporting children to express their views in any child protection meeting. Each child will be asked to choose someone they trust who can act as their Buddy, their voice in meetings. The scheme is supported by Children 1st

### C

**Child** - For the purpose of child protection instructions a child is defined as a young person under the age of 16 years or between 16-18 if he/she is the subject of a supervision requirement imposed by a Children's Panel or who is believed to be at risk of significant harm and there is no adult protection plan in place.

**Child Abuse** - Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent, significant harm to the child. Children may be abused in a family or in an institutional setting, by those known to them or, more rarely, by a stranger. Assessments will need to consider whether abuse has occurred or is likely to occur. To define an act of omission as abusive and/or presenting future risk a number of elements can be taken into account. These include demonstrable or predictable harm to the child that would have been avoidable except for the action or inaction by the parent(s) or other carers.

**Chief Officers Group** – the COG comprises of the chief officers for each of the key partner agencies in Child Protection and Protecting People. This includes members from Health and Social Care, Children and Families, Health, Neighbourhood Services Police and Third (voluntary) Sector.

**Child Assessment Order** - A Child Assessment Order allows for a child to undergo a medical examination or assessment where this has been deemed necessary. This does not supersede the child's rights under the Age of Legal Capacity (Scotland) Act 1991. At all times the child's welfare is paramount.

**Child Protection Committee** – Every Local Authority must have a Child Protection Committee. Child Protection Committees are locally based, inter-agency strategic partnerships responsible for the design, development, publication, distribution, dissemination, implementation and evaluation of child protection policy and practice across the public, private and wider third sectors in their locality

**Child Protection Order** - A Child Protection Order may be granted on application to a Sheriff if conditions for making such an order exist. A Child Protection Order can allow for the removal of a child to a place of safety or prevent removal of a child from their home or any other safe place. A Child Protection Order can last up to six days and is granted to secure the safety and wellbeing of a child.

**Child Protection Plan** - Agreed inter-agency plan outlining in detail the arrangements to ensure the protection of the child and supports to the family.

**Child Protection Register** - A formal list of named children where there are concerns about the possibility of future abuse and where a child protection plan has been agreed.

**Child Trafficking** - This is the term given to the movement of children into and within the country with the intent to exploit them.

**Core Group Meeting** - Meeting of small group of inter-agency staff with key involvement with the child and family who meet (with child and family) to review progress and make arrangements for implementing the child protection plan.

## E

**Emergency Police Powers** - The Police have the power to remove a child to a place of safety for up to 24 hours where the conditions for making an application for a Child Protection Order exist.

**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 in so far 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. Some level of emotional abuse is present in all types of ill treatment of a child; it can also occur independently of other forms of abuse.

**Exclusion Order** - An Exclusion Order allows for a named person to be ejected or prevented from entering the child's home. Conditions can also be attached to secure the child's safety and wellbeing.

**I**

**Initial Child Protection Conference** - An inter-agency meeting to consider the safety and welfare of children who have been the subject of a child protection investigation. The meeting will consider whether the child is a risk of significant harm, and place their name on the child protection register. It will also create a child's protection plan. The parents and sometimes the child will also attend this meeting.

**Inter-Agency Child Protection Discussion** - An IRD is an inter-agency meeting to share information where there are child protection concerns which need further clarification. Strengths within the family and the family's capacity to co-operate with agencies should be discussed. Any support required should also be identified and a plan of intervention should be agreed which could include organising a Initial Child Protection Conference.

**J**

**Joint Investigative Interview** - A Joint Investigative Interview is a formal planned interview with a child. It is carried out by staff, usually a social worker and a police officer trained specifically to conduct this type of interview. The purpose is to obtain the child's account of any events, which require investigation.

**N**

**Non-organic Failure to Thrive** - Children who significantly fail to reach normal growth and development milestones (i.e. physical growth, weight, motor, social and intellectual development) where physical and genetic reasons have been medically eliminated and a diagnosis of non-organic failure to thrive has been established.

**P**

**Physical Abuse** - Physical abuse is causing physical harm to a child or a 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.

**Physical 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. It may also include neglect of, or failure to respond to, a child's basic emotional needs. Neglect may also result in the child being diagnosed as suffering from 'no organic failure to thrive', where they have significantly failed to reach normal weight and growth or development milestones and where physical and genetic reasons have been medically eliminated. In its extreme form children can be at risk from the effects of malnutrition, lack of nurturing and stimulation. This can lead to serious long-term effects such as greater susceptibility to serious childhood illnesses and reduction in potential stature. With young people in particular, the consequences may be life-threatening within a relatively short period of time.

**Planning Meeting** - A Planning meeting (usually between social work and police) is usually held to plan a joint investigation - who does what and when is agreed.

**Pre-Birth Child Protection Conference** - An inter-agency meeting which considers the risk of harm to an unborn child and future risk upon the child's birth.

## R

**Review Child Protection Conference** - An inter-agency meeting which reviews the circumstances of a child whose name is on the Child Protection Register.

## S

**Safe and Together** - Is a programme for working with families where there are concerns about domestic abuse. It is a strengths based approach working in partnership with the victim of abuse to reduce risk to themselves and any children. It is an approach that strives to help the perpetrator of the violence responsible for their behaviour.

**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 a sexually inappropriate way.

**Significant Harm** - Physical or mental injury or neglect, which seriously affects the welfare or development of the child.

## T

**Team Around the Child** – Is a meeting involving parents and children with key professionals where some concerns or the need for additional supports are identified. There are usually three levels meeting. A level one meeting will be a meeting between the names person and the parent, level 2 will involve other professionals – sometimes a specialist such as speech and language, a specialist nurse or similar. If there are increased concerns a level 3 team around the child will involve a social worker. A TATC meeting at levels 2 and 3 will agree a Childs Plan to support the child and their family to ensure needs are met and risks reduced.

**Transfer Child Protection Conference** - An inter-agency meeting which considers arrangements to transfer cases of a child whose name is on the Child Protection Register where the family moves to another area.





What I  
**need!**  
from you!

Dundee Child Protection Committee  
c/o Andrew Beckett, Lead Officer  
Protecting People Team  
Friarfield House  
Barrack Street  
Dundee DD1 1PQ  
t: 01382 436264

[www.dundeeprotectschildren.co.uk](http://www.dundeeprotectschildren.co.uk)



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Committee