**Perth and Kinross Council**

**COVID-19 Interim Child Protection and Looked After Children Operational Guidance**

*\*Please click on the hyperlinks for the most up to date information*

1. **High Risk Situations & Vulnerable Children**

This Interim Child Protection and Looked After Children Operational Guidance provides advice to front line managers and practitioners about how we ensure we effectively manage high risk situations including: Interagency Referral Discussions (IRDs), Joint investigative Interviews (JII), Undertaking Home Visits and Child Protection Case Conferences, during the unique circumstances presented by the national response to the COVID-19 pandemic. It also sets out interim measures relating to Looked After Children’s Meetings and Contact arrangements. The safety and wellbeing of children and young people must remain a priority.

**All staff visiting any household should refer to,** [**NHS COVID-19**](https://www.nhs.uk/conditions/coronavirus-covid-19/) **and** [**UK Government COVID-19**](https://www.gov.uk/government/topical-events/coronavirus-covid-19-uk-government-response) **webpages for the most up to date information on keeping themselves safe.**

**Guidance on transporting children will be attached separately**

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1. **Inter-Agency Referral Discussions**

**The current arrangements for IRDs remains the same. Staff may find this Updated / Interim IRD Guidance and Template helpful:**

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These remain the key document relating to all roles and responsibilities where there are child protection concerns. There is no change to processes relating to IRDs, with the exception of the need to conduct IRDs through virtual means, by telephone or conference call, or video technology. The participants and format and decisions required for an IRD are not altered in anyway.

There are however additional considerations that should be considered when making safety plans:

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

Where it is not possible to convene an IRD in a reasonable timescale and in line with presenting risks as a result of staffing pressures related to the COVID-19 response, as always, immediate action should be taken to keep the child safe.

In such cases, a service / senior manager can agree the need to proceed to a Child Protection Investigation. Contact with IRD decision makers will then be made to gather relevant information as part of the process. A ‘screening’ call to the family should be made (where safe to do so) to establish risk and use of Personal Protective Equipment (PPE) (gloves, hand sanitiser and optional mask) must be considered.

1. **Child Protection Investigations**

During the process of investigation, normal child protection procedures should be followed ensuring that the views of children/young people and their family are taken into account along with robust risk assessments. Where possible, children should be seen, if necessary using available technologies.

Where there has been confirmed symptoms of COVID-19 with a child/young person or anyone in their household is preventing a home visit being made, this must be discussed with a Service Manager and reference made to current Public Health Guidance before any action is taken. If it has been agreed that there should be no ‘in-person’ visit made, it is essential that other forms of contact are increased (digital or telephone). If it is deemed necessary to consider the removal of a child an early discussion with Legal Services is required.

1. **Joint Investigative Interviews (JII)**

The above safeguards should be taken into consideration when looking to arrange JII’s for example facilitating transport to the JII and conducting interviews. There should be a clear discussion with the adults within the family regarding any presenting COVID-19 symptoms and appropriate safeguards should be applied.

Safety planning should be paramount when there is consideration being given to the timing of the JII. Where there are immediate risks these should be escalated to an Improvement Officer or Service Manager.

1. **Child Protection Case Conference and the Child Protection Register (CPR)**

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

1. As agencies are unable to attend conferences, the Chair should give consideration to the use of telephone / video conferencing to aid participation. This should include a core group of professionals where possible; social work, health, police and education.
2. If core agencies are not able to participate, they must provide reports to aid the Chair in their decision making. It is recognised that the pressures of time may require verbal reports to the assessing social worker by police and health. In such cases, the assessing social worker will take a record of the verbal report.
3. The Chair of the Child Protection Case Conference will decide whether to place the child's name on a Child Protection Register based on the risk of significant harm. The decision should be communicated sensitively to children, young people, parents and / or carers via appropriate means.
4. Until it is possible to resume normal practice and have face-to-face meetings, all Review CPCCs and Core Groups will be undertaken virtually, or as a paper exercise. The Chair will continue to ensure progress against the current CP Plan and will seek reassurance that actions are being appropriately implemented to keep children safe. Children will not be de-registered without the participation of all key partners. The only exception will be when the child has been accommodated or is now subject to a CSO .

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

1. **Looked After Children**

It is recognised that our Looked After Children are likely to be particularly vulnerable at this time, particularly those at home. It is also the case that children living away from home may have complex care plans which include contact arrangements with varying levels of supervision.

The COVID-19 response has left social work staff with the extremely difficult task of risk assessing the safety of child and family contact, particularly if these are supervised arrangements. We have made a decision that this must be suspended until we receive formal advice on how this can be delivered safely. In such cases we should follow public health advice and be prioritising safety for staff and families. It is recommended that alternative methods of contact such as telephone or video calling are utilised during this period. Where kinship arrangements are in place, with unsupervised contact, the family should be encouraged to manage their own arrangements, allowing the child or young person normal visits, unless either household is symptomatic of COVID-19, requiring a self-isolation period of 14 days. In such cases, telephone and video contact is the safest way to continue contact.

Review Meetings for Looked After Children should only take place as a ‘paper review’ but must include the views of the child or young person via telephone or video conference, where possible. Decisions should be communicated sensitively to children, young people, parents and/or carers via their allocated social worker.

1. **Home Visits**

It is important that throughout this period, contact with vulnerable children and their families continues. Where necessary, this should be via home visits. Where not possible due to the family being symptomatic of COVID-19, this should be discussed with a Manager and contact via alternative methods agreed, i.e. via telephone or video call. It is recognised that families are likely to be under increased pressure, have additional caring responsibilities, less support and their financial resources may also be under significant strain. These additional factors should be considered when contacting the family on a weekly basis and support provided. The level of contact should have an increased frequency particularly due to the heightened anxieties for children and their families concerning the impact of COVID-19 on self-isolation and as always dependent on the risks identified and impact of past and or future harm.

1. **Recording**

Recording of key information is essential throughout this period. General recording should be extended to include details of any family who are self-isolating in order to ensure that staff have awareness and can take necessary precautions / provide additional support such as food and fuel.

It is also the case that our own staff members are likely to require periods of isolation and as such the recording of information will be essential for workers taking over, not familiar to the family.

It is anticipated that as staffing resources may become under significant strain, at such times, the recording of essential and risk related detail should be prioritised on CCM and that hand written notes taken should be uploaded to the system as soon as possible.

**Additional Resources:**

Staff may find the following helpful:

[Perth and Kinross Code of Practice: Information Sharing, Confidentiality and Consent](https://www.pkc.gov.uk/media/39666/Perth-and-Kinross-Code-of-Practice-Information-Sharing-Confidentiality-and-Consent-Refreshed-and-Published-27-January-2020-/pdf/PK_COP_Information_Sharing_etc_Refreshed_Jan_2020.pdf?m=637158885805470000)

[Perth and Kinross CPC Practitioners Guide: Resolution and Escalation](https://www.pkc.gov.uk/media/44799/CPC-Resolution-Escalation-Guidance-FINAL-19-08-27/pdf/CPC_Resolution__Escalation_Guidance_FINAL_19.08.27.pdf?m=637025854360570000)

[Perth and Kinross CPC Practitioner’s Guide: Professional Curiosity](https://www.pkc.gov.uk/media/44800/CPC-Professional-Curiosity-Guidance-FINAL-19-08-27/pdf/CPC_Professional_Curiosity_Guidance_FINAL_19.08.27.pdf?m=637025854364030000)