1. As part of its inquiry into decision making on whether to take children into care, on Monday 14 January 2013 the Committee met staff from different agencies working with vulnerable children in Perth and Kinross. The meeting was hosted by Bill Atkinson, Depute Director of Education and Children’s Services and Chief Social Work Officer at the Council.

2. The reason for visiting Perth and Kinross was that the Council and partner agencies had received a positive child protection inspection report from the Care Inspectorate. The 2011 inspection report stated “The leadership and direction provided to staff is exceptional. Chief Officers and senior managers share an extremely strong and ambitious vision for child protection”. The authority area received exceptional or very good ratings for all assessment criteria. The Committee was also interested in the urban/rural split of the local authority area.

3. The first half of the meeting was with strategic managers, whilst the second half was with operational decision makers. Representatives of the local authority (education, social work and legal services), the community health partnership, the police, the children’s hearing system and the SCRA, attended the meeting.

4. The following points were made during the meeting—

   **Background**
   - There is no silver bullet solution to address issues of neglect or emotional abuse;
   - It was acknowledged that problems faced by Perth and Kinross are not the same as in urban areas of high deprivation;
   - There are, however, challenges of rurality and providing equity of service in that context;
   - Perth and Kinross has adopted a holistic approach, based on GIRFEC which sees children’s services as a continuum from universal to specialist care. As such, the Child Protection Register itself does not act as a ‘gateway to services’.
Currently 800-900 children receive services from social work in the area, and 34 are on the child protection register;

**Early identification**
- Approaches are in place to identify problems early on. Often this identification is carried out by health professionals (midwives, health visitors or paediatricians). There are protocols in place for midwives to identify vulnerable parents and alert;
- With 12/13 year olds, agencies can end up focussing on problematic behaviour rather than their needs;
- If greater focus is placed on early years, prevention and if all agencies can be smarter about what works and where to invest funding, then a difference can be made;
- Perth and Kinross has adopted its own early years’ strategy, including health services, to avoid instances of duplication or overlap;

**Mapping exercises**
- Perth and Kinross carried out a mapping exercise of all children in the authority where there was a parental alcohol/substance misuse problem. To date the exercise has identified 900 children;
- This exercise raised awareness and identified which children were affected by parental substance misuse and confirmed their network of professional support, including those who had a social worker.

**Multi-agency working**
- Perth and Kinross has recently enhanced its multi-agency child concern reports screening process. A multi-agency group meets twice weekly to consider all ‘child concern’ reports raised by the police. Information is then passed to relevant staff in schools, health services, social work etc. The group has a focus on ensuring a proportionate response;
- This response can vary from discreetly alerting class teachers to concerns, to direct intervention where children are at risk;
- Separately, a monitoring exercise is being done of children taken into A+E, whereby the paediatric liaison nurse passes any concerns on to the health visitor;
- The focus is on ensuring the relevant information is collated from all relevant sources in order that patterns of abuse or neglect are identified. It was noted that in most cases this requires parental consent for sharing information (as generally the child is not at immediate risk of significant harm which would dispense with the need for consent). However, it was considered that in practice, gaining consent had not been a problem;
- Part of good multi-agency working is strong engagement with families, enabling professionals to gain consent for sharing information;
- In respect of cases of domestic abuse, the police will flag concerns raised (via a domestic abuse liaison officer) with other agencies, in particular health. An assessment is then made of whether the domestic abuse is part of a pattern or not;
- It was noted that, in the context of domestic abuse cases, there are sensitivities around sharing information, and a delicate balance has to be
struck between decision makers knowing background and the right of the abused parent to confidentiality;

- Ultimately it is the responsibility of chief officers to ensure that children in their area are protected;
- In general the majority of child concern reports come from the police;
- A practical example of multi-agency working was where community health partners identified speech and language therapy as part of a wider family support exercise and, due to the partnership approach adopted in the area, was able to negotiate additional funding for this from the allocated Looked-After 2 Year Olds budgets;
- In general, strong working relationships have been established across agencies through working on individual cases and through multi-agency screening groups. This has led to more joined-up thinking and practice;
- It was also noted that the position in Perth and Kinross, and across Scotland, has improved in respect of the constant turnover of social workers and the workforce was much now more stable;

**Role of Child Protection Committees (CPCs)**

- CPCs have existed since the late 1980s. CPCs are underpinned by Scottish Government Guidance and their key business functions include continuous improvement (self-evaluation), strategic planning and public information and communication;
- They focus on frontline practice, trying to identify what the key issues are and what lessons can be learnt;
- They support staff training and development, particularly on key practice and policy issues;
- As part of the continuous improvement through self-evaluation function, they carry out case file audits, reviews of practice and process, benchmarking against national inquiry and inspection reports and look at systemic strengths/areas for improvement, continually monitoring what is happening locally and nationally;

**Support in schools**

- Twice a week the multi-agency screening group meets to assess and feedback on child concern reports, including domestic abuse cases. A key member of education staff has a specific role of gathering and sharing that information (and schools have the responsibility of coming back if they still have specific concerns);
- As the Corporate Parent, Perth and Kinross are trying to adopt a more integrated approach to improving attainment levels of looked after children. This involves tracking all children individually and collectively and offering increased support where appropriate;
- A range of services are available offering non-stigmatised support;
- Perth and Kinross are trying to break the link between looked after children and poor attainment;
- Where a child is on the cusp of care, key staff in schools in Perth and Kinross will communicate with social work on a daily basis;

**Support at home**
The range of services provided in the home may dictate whether children end up in care or not, although a lack of resources is not generally the reason a child is accommodated;

In previous years, health services in Perth and Kinross focussed their attention on children looked after in care rather than those looked after at home. This approach has now been changed and they are currently exploring what support they can offer for those children to ensure that their outcomes are the same as those looked after in care;

Although Perth and Kinross would not make general assumptions about fitness to parent, they are carrying out a considerable amount of work to support families who are difficult to engage;

Where there are low-level referrals from police and the children’s reporter, the agencies make an evidence based assessment, using GIRFEC and the “my world” triangle. They will try, where possible, to keep families together and engage positively with parents, but will build up a detailed evidence base (from the perspectives of all agencies) on parents capacity to improve. Part of this is being clear with parents;

It was noted that there is a shift in emphasis from working to keep families together to analysing their capacity to parent. It was also noted that there are robust checks, balances and review procedures in place to ensure that professionals or panel members do not become too close to, or easily swayed by, parents;

Perth and Kinross has only one family centre. The council has now extended its provision in some mainstream nurseries to provide enhanced placements for 3 to 5 year olds via HUB nurseries. This has enabled the family centre to focus on pre-birth to 3 and to provide outreach support to the mainstream nurseries;

**Timescales**

Perth and Kinross are working towards bringing down timescales. Decisions about permanence are being made more quickly but there can be delays caused by legal processes;

In general children in Perth and Kinross are coming into care earlier;

**Thresholds for intervention**

A number of issues affect the threshold at which a child is taken into care or is placed on the child protection register;

There is not a quota for the number of children on the register. Perth and Kinross has a relatively low number of children on the register. This is because of the following work being undertaken by Perth and Kinross—

- it takes an early intervention approach;
- it has carried out an exercise looking at the most challenged 14-year-olds and assessing whether different decisions should have been made earlier. This has resulted in fewer children being placed on the register and earlier decisions for alternative care arrangements being made;
- the majority of children on the register are under 5;
- children who come off the register continue to be given support after de-registration;
- it routinely audits decisions on cases that didn’t go to case conference;
- It was noted that 25% of children looked after away from home are there on a voluntary basis. Therefore, if the parents were to withdraw consent but the child still needed to be accommodated, then the case would need to be referred to the children’s reporter;

**Hidden neglect**
- Perth and Kinross’s systems are sufficiently robust to pick up hidden neglect;
- Professionals are being trained to “suspend disbelief” in situations where their general assumptions would lead them to disbelieve evidence of neglect but where the evidence clearly points to neglect being prevalent;

**Children’s Hearings System**
- In Perth and Kinross, it was noted that panel members are trained to take good quality, evidence based, decisions;
- It was noted that there are no conditions on supervision orders that relate to parents – the onus is on the child, which generates the feeling that the child is there because of his or her actions;

**“Change is a Must”**
- Change is a Must is a programme run in Perth and Kinross that provides intensive support and assessment of families affected by parental substance misuse where the children are aged from pre-birth to 8 years of age and deemed to be at significant risk of harm;
- Change is a Must began as a 2-year pilot project (July 2010- July 2012) bringing together 5 staff from Children’s Services, Health Services and Drug and Alcohol services in a multi-agency team;
- In 2012 funding was secured to make posts permanent and increase staffing by 2 workers;
- The programme focusses on families who have come through the system where the child has been identified as being at risk;
- The model is underpinned by adult attachment theory and includes assessments of parenting capacity within time scaled, contract based interventions involving the whole family;
- Learning from this model is cascaded and embedded into mainstream services across adult and child care agencies;
- Through the model, parents and practitioners have found that the process of reflecting on parents’ life experiences to be empowering for parents, and helps them reconsider their relationships with their child and others;
- Engagement with the programme has been high and there have been significant improvements in all the children’s health and wellbeing;
- Where decisions have been made for children to remain at home there has been an improvement in parental availability and mindfulness of their children as well as improved parental health and substance reduction;
- In practical terms, the programme gives parents 12 weeks to work with their children before an assessment is made of the level of support that should be offered and whether the child should remain in the family home;
- It was stressed that this approach is not adversarial, and that there is a commitment from agencies to take the parents with them.