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## Who to contact if worried about a child or young person?

To make a **Child Protection Referral** contact the **Duty Social Worker**. If you are **worried or concerned about a child or young person** you can contact one of the following agencies:

Orkney Health and Care   Social Work Services	Telephone
Duty Social Work Service is available <b>09:00 to 17:00 Monday to Friday</b> , based at the Council Offices in Kirkwall.	01856 873535
Duty <b>Out of Hours Service</b> (out-with above times)	01856 888000

Police Scotland	Telephone
<b>24hour cover</b>	101
Kirkwall Police Station	In an emergency call 999

Specialist Paediatrics Aberdeen	Telephone
For access to the Specialist Paediatrics Team in Aberdeen contact the Child Protection Team in Aberdeen.	01224 551 706 After 17:00 - 01224 034 456 6000

Other numbers	Telephone
SCRA Children’s Reporter	
<b>Local office open Monday to Thursday - 11:00 - 15:00, Friday - closed</b>	Orkney team 0131 244 8379

If you are concerned about a child or young person but are unsure if you have enough information to make, or justify a Child Protection Referral, call on a “no names” basis and speak with a trusted colleague or call the Duty Social Worker. It is the job of the Duty Social Worker to decide the status of the information and they will help you understand what is required to make a Child Protection Referral or if there are other ways to provide early support and assistance for the child and family. If in doubt – **pick up the phone!**



## 1 Background

“**It’s everyone’s job to make sure I’m alright**” - Report of the Child Protection Audit and Review 2002, has a central message that **everyone** has a responsibility for ensuring all our children and young people are safe and should not be left in abusive or neglectful circumstances. The report’s vision is for:

“A Scotland in which every child matters, where every child, regardless of his or her family background, has the best possible start in life”.

Amongst other things the report says:

“Where there have been concerns about possible abuse or neglect, schools, police, health service and social work service files should contain a succinct, readily accessible chronology of events or concerns which can be easily referred to should a further incident or concern arise. This chronology should contain information relating to the child and, where known, information relating to other people in the child’s life, for example, any previous deaths of children of a mother’s new partner”.

This [link](#) will allow you to refer to the report for further background information and learning purposes.

### Orkney Inter-agency Child Protection Guidelines:

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Orkney Public Protection Committee, working with partners, has developed these local Inter-agency Child Protection Guidelines for use by staff in Education Services, Health Services, Social Work Services, Police Scotland and for reference by Third Sector partners and anyone who has a concern about the welfare of a child or young person in Orkney.

As part of our Children’s Services Improvement Plan, as a partnership, we have been developing procedures and guidelines based on national guidance with cross agency and practitioner contributions. These guidelines have been developed with the involvement of staff through workshops, aligned to the above requirement, beginning with Inter-agency Guidelines, progressing to Child Protection Procedures for individual agencies.

The guidelines are to ensure everyone is aware of how to refer and respond to, child protection concerns as they arise, what they should expect by way of feedback from the service to which they have referred, and the steps which are to be followed in dealing with the Child Protection Referral or concerns which have been identified.

These guidelines provide a step-by-step guide on how to refer and respond to child protection concerns. They apply to all agencies including Third Sector organisations.

**Acknowledgement:** the content of these guidelines has been adapted from Shetland Inter-agency Child Protection Procedures, May 2019.



The guidelines are based on the principles of working together and supporting inter-agency colleagues to:

- **Recognise**  
Be aware that a child or young person may be at risk of significant harm and may need support and protection
- **Respond**  
Take immediate action to ensure the safety of children and young people
- **Report or Refer**  
Follow Child Protection Guidelines and Child Protection Procedures as required
- **Record**  
Record information on presenting circumstances, actions, decisions and feedback



## 2 Steps to Follow when Reporting Concerns

Not all referrals about children will require a *Child Protection Investigation*. This will depend on the nature of the concerns, the information provided and the risk assessment. In some instances, families can be provided with support at an early stage to ensure “early support and assistance” at the time of need, which may prevent escalation further on.

There are important steps to follow when reporting concerns about children and young people. These guidelines provide **6 Steps** for practitioners to follow; ranging from the actions to be taken by concerned adults, to the specific actions involved in Child Protection Investigations.

### STEP 1 | Concern or Initial Referral about a Child at Risk

- What to do if concerned about a child

### STEP 2 | Consultation with a Manager

- Discussing suspected harm with a manager. Including specific guidance for NHS Orkney Health Professionals and schools and nursery staff.

### STEP 3 | Immediate medical assistance or Police involvement if a crime may have been committed or immediate risk of harm

- If urgent medical or Police assistance is required.



### STEP 4 | Referral to the Duty Social Worker

- The information required by Duty Social Work

### STEP 5 | Receiving a Child Protection Referral by Duty Social Worker and Inter-agency Referral Discussion

- Duty Social Work Response to a referral (daytime and out of hours) and the Inter-agency Referral Discussion

### STEP 6 | Planning and Implementing Joint Investigative Interviews and Debriefs

- Process to be followed for the planning and implementation of Joint Investigative Interviews and Debriefs

**Steps 1 to 4** outline the actions to be taken by all staff from any agency or Third Sector organisation who have concerns a child or young person may be at risk.

**Steps 5 to 6** relate to the specific actions that will be taken by the investigating agencies.

“Staff member” means anyone employed or working as a volunteer. Members of the public and family members also make Child Protection Referrals or raise concerns about children.

All presenting information that a child may be at significant harm within a familial context will be treated seriously and investigated in accordance with these guidelines and individual agency Child Protection Procedures.





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## STEP 1| Concern or Initial Referral about a Child at Risk

### Person Responsible:

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Any person who witnesses, suspects or receives information that a child or young person may be at risk, has a *duty* to report that information immediately.

### Action to Take:

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If the child or young person requires urgent medical attention or urgent Police protection, go to **Step 3**.

If the child or young person has an obvious injury, you should seek an explanation from them or their parents. Record the explanation provided. If a child or young person speaks about experiences of physical harm, neglect, sexual abuse or emotional abuse, listen carefully, seek clarification of what they are saying and record their account.

Further information about how to support a child or young person who speaks about the above experiences will be contained in the new National Guidance for Child Protection in Scotland due to be published in 2021. This revised national guidance will seek a more consistent approach to protecting children, and better engagement with children and families to reduce risk. It will contain information on neglect; domestic abuse in rural and isolated communities; the impact of poverty; and the context of community, culture, and faith amongst other things.

Access to the current guidance can be found at: [2014 National Guidance for Child Protection in Scotland](#).

This [link to NSPCC](#), 'What to say to a child and how to respond' may also be helpful.

If the information about the risk to the child or young person comes directly from the child or young person, or from someone else, you should explain you cannot keep this confidential and will have to speak to your Line Manager.

Concerns about a child or young person's safety can arise from a series of events or various pieces of information. When added together this may indicate the child may be at risk. For example, neglect or emotional abuse are often the result of a series of events that impact on the child's or young person's physical and emotional care.

You should seek advice and make a Child Protection Referral if the information indicates the child or young person may be at risk. Acting quickly to seek advice and share information is important and gives the earliest opportunity to protect the child.

The timing and nature of further contact with parents must be decided by the investigating agencies, Police Officers and Social Workers, following the Child Protection Referral.



**“It’s everyone’s job to make sure I’m alright”** highlighted that where children were not protected, this was often the result of poor assessments and enquiries which were not sufficiently extensive. Longer-term assessments of risks were often particularly poor. Poor assessments were characterised by failure to consider the pattern of previous events; insufficient use of inter-agency information, especially health and education information.





## STEP 2 | Consultation with a Manager

### People Responsible:

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Staff members, line managers, supervisors or other designated people in the organisation.

### Action to be Taken:

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Discuss the suspected harm, mistreatment or neglect with the Line Manager as soon as possible. If the Line Manager is not available speak to a suitable alternative manager.

NHS staff can seek the advice of the Lead Nurse Public Protection or the Lead Midwife in their absence.

The discussion about suspected harm should conclude with how to address the risks identified and must take the following into account:

- The need for immediate action and any continued risk to the child or young person. For example, if a child has told a teacher they have been physically abused, they may be at risk of further harm after school closes and they return home. Delaying a referral will reduce the response time for the Police and Social Work which increases the risk to the child.
- The need to share information held by the organisation, including personal details of the child, family composition, address, and contact numbers.
- Risks to other children, young people or adults. For example, a child may have witnessed domestic abuse involving an assault to an adult. This poses future risk to the adult as well as the child and any brothers and sisters.
- Information that a vulnerable adult may be at risk in which case this should be shared with the Duty Social Worker.

Remember action should be taken immediately to protect the child or adult where there is evidence to support that a child or vulnerable adult is at risk of immediate harm.

### Specific Guidance for NHS Orkney Health Professionals

NHS Orkney and the Child Protection Guidance for Health Professionals issued by Scottish Government allows for some staff to make a direct referral to the Duty Social Worker without consulting with a Line Manager. These staff have completed Step 2 Child and Adult Protection Programme Training provided by Orkney Health and Care:

- GPs
- Consultants
- A & E staff
- Health Visitors
- Midwives
- School Nurses

If you are one of the above health professionals, you can seek advice and guidance from your Line Manager but you are not obliged to do so before making a referral.



The quickest way of making a referral is by phone. You must follow the telephone call by sending a copy of the written referral and share it with your Line Manager, the patient's Consultant, if made during a hospital stay, and with the Lead Nurse Public Protection.

### **Specific Guidance for Schools and Nursery Staff**

As a member of School or Nursery staff, when you have a concern a child may be at risk, you should seek the advice of a designated person in the school (usually a Head Teacher or Deputy) as soon as possible.

As a Head Teacher or Deputy, you must ensure, where required, teachers have assistance with covering a class in order to do this. As School and Nursery staff, you must ensure that no situation, where a child is potentially at risk, is left until the end of the school day.

Given that Orkney Schools vary in size and management structures, Service Improvement Officers based in the Council Offices will assist any member of staff who has a concern about a child's safety and who is unable to contact a designated person in the school quickly.

A copy of the Child Protection Referral made by school staff will be retained for school files and a copy sent to the Head of Education at the Council Offices.

### **Notification to Care Inspectorate:**

Early Learning and Childcare Managers or Head Teachers (depending on the setting) are responsible for ensuring that nurseries, as regulated services, notify the Care Inspectorate if they make a referral. A copy of the Child Protection Referral made by the nursery should be retained for nursery files and a copy sent to the Head of Education at the Council Offices.



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## STEP 3 | Immediate medical assistance or Police involvement if a crime may have been committed or immediate risk of harm

### The Person Responsible:

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The staff member or manager.

### Action to be Taken:

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If urgent medical assistance is required, you should take the child or young person to Accident and Emergency at Balfour Hospital or phone for an ambulance.

Where there is a report or suspicion of a crime, or if immediate Police assistance is required, you can make a Child Protection Referral directly to the Police in an emergency by phoning 999. If the safety of the child, young person or staff member is at immediate risk and Police assistance is required, you should contact the Police.

You must record all action taken and discuss it with a Line Manager as soon as possible – but do not delay summoning emergency help.

**“It’s everyone’s job to make sure I’m alright”** cited good practice which included the provision of help to parents and children as and when it was needed, timely responses, early thought and preparation, and properly addressing the source of the risk.



## STEP 4 | Referral to the Duty Social Worker

### The Person Responsible:

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It is better for clarity of information that the Duty Social Worker receives first-hand information, so if you are the person who received the information or recognised the risk, you should make the referral. If that is not possible, your Line Manager should make the referral.

### Action to be Taken:

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As a referring adult, once you have made a referral by telephone you should follow it up immediately by a detailed account in writing of the information you shared verbally. You should keep a copy for the records of your agency.

As Duty Social Worker, you will need enough information to make an informed decision on how to proceed.

As a referrer, you should say who you are, what your role is with the child, and the nature of your concerns. You should share verbally and confirm in writing, your concerns including the following information:

- What your concerns are;
- Name, address, date of birth, family composition, siblings, parents, carers;
- What has been observed or heard and what sense has been made of the information;
- Referrers should try to be clear about what is “fact” and what is “opinion” and the source of the information. For example, has the child said something or has the referrer observed something of concern;
- Details of the alleged perpetrator if known;
- Details of any specific incidents – dates, times, witnesses, any visible injuries;
- Where the child is now, including who last saw the child and when;
- Relevant background information about the child or history of previous concerns;
- If there is a Named Person or a Child’s Plan co-ordinated by a Lead Professional;
- Information indicating an adult may be at risk;
- Any additional support needs requiring specialist assistance to communicate with the child; and
- Safety factors e.g. family, friends or support staff and immediate care arrangements.

As Duty Social Worker, you will ensure:

- The above information is recorded on PARIS;
- All Social Work “records checks” are completed;
- Initial assessment of the presenting information;
- Identification of other information required e.g. health, education, criminal records;
- Consultation with your Line Manager; and
- Identification of further action to ensure the safety of the child, including the need for an Inter-agency Referral Discussion.



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## STEP 5 | Receiving a Child Protection Referral by Duty Social Worker and Inter-agency Referral Discussion

### Out of Hours Duty Service

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Duty Out of Hours Service out-with Monday to Friday 09:00 – 17:00. Tel: Balfour Hospital Switchboard 01856 888000.

As a referring adult, if you believe help for an emergency is required or the risk to a child cannot wait until the next morning, you can obtain help at any time of the day or night by contacting the Duty Social Work service.

The after-hours number will be answered by an Operator who will contact the Duty Social Worker who will call you back so leave your number. It is more helpful if the Duty Social Worker can speak directly to the person making the referral in order to respond in the best way possible to safeguard the child or young person.

As Duty Social Worker, you will check Social Work records on PARIS and the Child Protection Register to see if the child or young person is known.

As Duty Social Worker, you will contact the Out of Hours Manager to discuss what actions may be necessary to protect the child. You will agree, with the Police if necessary, what action you will take to provide immediate protection for a child or young person where required.

As a referring or concerned adult, you can contact the Police by dialling 999 if an emergency response is required and 101 for more routine matters.

### Daytime Duty Response

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As Duty Social Worker, in the Children and Families Social Work Team, you will deal with Child Protection Referrals as a *priority over all other work* and these referrals will be the subject of an immediate assessment.

As Operational Manger, in the Children and Families Social Work Team, you will consult with the Duty Social Worker and provide operational management overview of all Child Protection Referrals and concerns, to ensure the Child Protection Referral process and required follow up actions are a priority.

For referring adults, the Duty Social Work service is available on Tel: 01856 873535, from 09:00 to 17:00. Monday to Friday, based at the Council Offices in Kirkwall.

**“It’s everyone’s job to make sure I’m alright”** found that “where children were not protected or their needs were not met this was often the result of poor assessments and enquiries which were not sufficiently extensive”.



## People Responsible:

The Duty Social Worker, Police Officer, Health Professional and or their Operational Managers.



**Child Protection Referrals must be responded to within 24 hours**

As Duty Social Worker, you will gather information to *inform* an initial risk assessment and Inter-agency Referral Discussion (IRD) with the IRD Sergeant, Police Scotland, see Appendix 4.1.

As Operational Manager and IRD Sergeant, you will agree the timescales for subsequent actions which will be informed by the initial risk assessment which should address the safety of the child or young person and any risk to others.

An IRD is the start of the formal inter-agency process which allows information to be gathered and shared to inform decision making on whether or not a child or unborn child is in need of protection or may be exposed to current or future risk. IRDs are tripartite discussions with the Police, Health and Social Work about concerns which have been presented, and what immediate actions and processes are required to address these concerns.

The [2014 National Guidance for Child Protection in Scotland](#) states all staff who work with or have contact with children and their families have a role in child protection. That role will range from identifying and sharing concerns about a child or young person, to contributing to decision making, or in planning an investigation to support the child or young person. You may well have an important part to play in this process.

An IRD is required to ensure coordination of inter-agency child protection processes till the point a Child Protection Case Conference (CPCC) is held; or a decision is made that a CPCC is not required. As such, an IRD is dynamic and may comprise of a series of discussions as information is gathered.

The IRD is initiated when Social Work, the Police or Health has received information or a referral which indicates that sharing information is required to assess the safety and wellbeing of a child, unborn child or young person, and appropriate action needs to be taken in response.

While the agencies who participate in IRDs, are the Police, Social Work and Health, any agency which has involvement with, or knowledge of, the child has a valuable role in supporting the IRD process and as a member of that agency, you must share what information you have.

As Duty Social Worker in conjunction with the Operational Manager, you will decide if the information received indicates a high level of vulnerability and falls into the category of a



child protection concern or a Child Protection Referral. You will identify if it is a new concern about a child already known, a new referral, or an accumulation of concerns. You will decide on its status and act accordingly.

The IRD is the first stage in the formal process of joint assessment in child protection and the purpose is to facilitate information sharing, critical analysis of risk and joint decision making. As Operational Manager in conjunction with the Duty Social Worker, you will decide if an IRD should be initiated, with reference to and knowledge of, the IRD Procedure as necessary.

IRD meetings in Orkney often require video or teleconference facilities to enable inter-agency participation including professionals based in Orkney's outer islands and Police based in Inverness.

As the Police Public Protection Unit, Designated Officer, you will record the initial IRD and circulate a copy to attendees. This record must be copied into relevant systems within each agency by those who attended. Any subsequent IRD meetings will be recorded by Social Work. As with any meetings, as a participant, you may wish to take your own notes of any actions specifically for you while awaiting copy of the official record being circulated.

### Action to be Taken:

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As Duty Social Worker, you will consult the Operational Manager for Children and Families, who will decide, on the basis of the information received, if there is a need to urgently protect the child or young person by calling the Police or seeking advice from the Council's Legal Services about the requirement to apply for a Child Protection Order.

As Duty Social Worker, you are responsible for ensuring all relevant information relating to the child and family is gathered. Your checks must include background information on any parent, carers, or adults involved, and all children in the family. You will check:

- Social Work records – PARIS, Child Protection Register;
- Health records – GP, Health Visitor, Midwife, School Nurse, CAMHS, A&E, Dental, Paediatric by contacting Health colleagues (the Lead Nurse Public Protection will be able to gather relevant information by checking NHS Orkney records and sharing this with you as Duty Social Worker);
- School and nursery information via Education Services;
- Criminal Justice records; and
- The Named Person and Lead Professional if the child has a "Child's Plan".

As Operational Manager, having determined that a response under Child Protection Procedures is required, you will contact the IRD Sergeant based at Police Scotland Divisional Child Abuse Investigation Unit (DCAIU) in Inverness. This may already have happened if an IRD has been held as described above, so you should check the history and ensure decisions are being actioned accordingly.





As IRD Sergeant, you have a duty to respond immediately to the referral by gathering information, participating in an IRD, and you will:

- Check Police Scotland Database for relevant information in respect of the child or young person and family (Scottish Criminal History System, STORM, IMPACT, Police National Computer, Police National Database, Vulnerable Persons Database, Scottish Intelligence Database, Incident Text searches and where relevant, foreign conviction checks); and
- Share relevant information with the Duty Social Worker or Operational Manager.

As Duty Social Worker, where allegations are made against a member of staff in any agency the relevant Child Protection Procedures should be followed. As Operational Manager, you will consult with a Service Manager or Head of Service to ensure Human Resources for the agency are informed as, in some instances, decisions may need to be made in respect of suspending the staff member until an investigation can be carried out.

As Operational Manager, you must inform HR Services of the outcome of any Child Protection Investigation so they can consider what support arrangements are required for the employee and the implications of the allegation for their service.

As a member of an organisation receiving or dealing with allegations against staff, you should consult with your organisation's HR Service.

As Duty Social Worker, where allegations are made against Kinship or Foster Carers you must inform the Operational Manager for the Family Finding Team (Fostering & Adoption).

As Operational Manager, in conjunction with the Duty Social Worker, where a Child Protection Referral has been received due to concerns about radicalisation under the Prevent Counter Terrorism Responsibilities:

- You must ensure the Single Point of Contact for Prevent is informed,
- Prevent Procedures are followed, and
- You must consider the need for an Inter-agency Professionals Meeting.

### **The Purpose of an IRD is to:**

- Collate information and establish the facts about the circumstances giving rise to concern;
- Decide if any investigation into the circumstances of the child should be conducted as single agency investigation (either Police Scotland or Children's Social Work) or a joint Police and Social Work investigation;
- Consider the requirement for a Joint Investigative Interview (JII) with the child;
- Consider the need for a paediatric or forensic medical examination as part of the Child Protection Investigation in consultation with the Nurse Advisor Child and Adult Protection or Designated Officer for Health;
- Consider the need for a medical examination to ensure the wider holistic health needs of the child are being met and identify any unmet need. This will be important



in every situation but particularly when there are concerns about neglect or emotional abuse;

- Where a medical examination is required this should be done in consultation with the Nurse Advisor Child and Adult Protection and Child Protection Specialist Paediatricians based at Aberdeen Royal Children's Hospital.
- Agree the nature of the child protection enquiries and the criminal investigation; (see Step 6 below for detailed planning of a JII);
- Identify the sources and levels of risk; and
- Plan necessary protective action, including an Interim Safety Plan for the child or others at risk.

### Medical Examinations:

As Duty Social Worker and Operational Manager, when a decision is taken for a child to be medically examined by the Child Protection Paediatrician in NHS Grampian and the Forensic Physician, you are responsible for arranging travel and accommodation (if necessary) for the child, family member and support staff member (normally a Social Worker). This should be booked through the Council's travel team, [travel@orkney.gov.uk](mailto:travel@orkney.gov.uk) or in an emergency call extension 2164. If out of hours, you should contact 'Corporate Travel Management' directly on 01274 760 650 (24 hours, 7 days a week) and quote the reference 873535.

As Operational Manager, in consultation with the IRD Sergeant, you decide the referral does not require a joint response under Child Protection Procedures, then you must make one of the following decisions:

- No further action;
- Single agency investigation by either Children's Social Work or the Police. Single agency investigations can continue under Child Protection Procedures - e.g. Social Work completing a single agency investigation or assessment in respect of allegations of emotional abuse. In this case, the outcome of the investigation should be shared at a Debrief Meeting - see Step 6 below;
- Further assessment of the child's needs by Children's Social Work, Health or Education Services; and
- Review of an existing Child's Plan by the Lead Professional and Core Group.

As Operational Manager, in conjunction with the IRD participants and process, decisions will be agreed on how the child's parents or carers will be informed, consulted and included. Where you have decided in consultation with the Police and Health Professional, the involvement of parents or carers is not to be undertaken at this stage, your justification (specifying the increased potential risk of harm to the child) must be clearly recorded.

As Operational Manager you will ensure:

- Decisions are recorded on the PARIS Database;
- The Named Person and or Lead Professional is informed; and
- Any further work needed to assess the child's needs is allocated and progressed.



### **Feedback to Referrers:**

As Duty Social Worker or Investigating Social Worker, you will inform the staff member or concerned adult, who made the Child Protection Referral of the outcome within 7 working days and you will record it on the referral stored in PARIS.

Where the referral was initiated by a member of the public, wherever possible, you must ensure they are informed in writing or verbally of the outcome of the enquiries, without breaching confidentiality, to reassure them that appropriate action has been taken. As Operational Manager, you shall ensure a copy of the letter is placed on record or the verbal feedback provided is recorded.

Feedback must be provided to referrers by all agencies who receive a Child Protection Referral or concern about a child or young person. For example, as a Teacher, Nurse, Support Worker or member of a Third Sector organisation, you must tell the person what you are going to do with the information they have given you. This may be that you will pass the information directly to the Police or Social Work or you will discuss it with your Line Manager. The nature of the feedback you have provided must be recorded on your organisation's recording system.

Referring organisations are entitled to receive feedback on Child Protection referrals, or concerns about children and young people, they have made to investigating agencies. Where for any reason, as a referring organisation you have not received feedback from a partner agency, you must seek feedback. Where feedback is not forthcoming, you must escalate this to your Line Manager.

### **Decisions to initiate Child Protection Procedures:**

As IRD Sergeant and Operational Manager, if you both decide the referral should be progressed by both your agencies under Child Protection Procedures, then you must take the following actions:

- Where a JII is required, as Operational Manager and IRD Sergeant, you will identify an investigating Social Worker and Police Officer respectively, who are JII trained, who will be included in the JII Briefing Meeting; and
- As Operational Manager and IRD Sergeant, you should call an Inter-agency Child Protection Planning meeting to support the investigation, in the circumstances outlined below or if you jointly assess it would benefit a particular child or young person.



## STEP 6 | Planning and Implementing Joint Investigative Interviews and Debriefs

### People Responsible:

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The Operational Manager and IRD Sergeant, having decided that a JII is necessary, will call a JII Briefing Meeting to plan this work.

In all cases, the decision to proceed with a JII will be taken by the Police and Social Work, taking account of relevant information from partner agencies.

There will be situations when an Inter-agency Child Protection Planning Meeting involving the NHS Lead Nurse Public Protection, Education staff and other relevant people (e.g. HR staff, CAMHS, Third Sector organisations) should be called. The Operational Manager and IRD Sergeant can call an Inter-agency Professionals Meeting when it would assist the plan and help protect the child. In the following circumstances, an Inter-agency Professionals Meeting should always be called within a timescale reflecting the risk to the child:

- When a forensic medical examination requiring the expertise of 'off island' paediatric services is required, this is likely to be for physical injury or sexual abuse;
- When allegations are made against a Foster Carer, Kinship Carer or a member of staff, the Inter-agency Child Protection Planning Meeting should include the Operational Manager Family Finding (Fostering and Adoption) Team or HR Service for whom the member of staff works; and
- When there is an indication the Child Protection Referral may include organised or complex child abuse (for example, Child Sexual Exploitation involving a number of children and adults, on-line grooming and indecent images of children).

### Investigative Interviews Persons Responsible

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As allocated Social Worker and Police Officer who attended the JII Briefing Meeting you have responsibility for the investigative interview. Social Workers and Police Officers should have completed specific JII training. The decision on when to hold a JII is informed by the risk assessment, in some cases it will need to take place immediately following the IRD.

### Joint Investigative Interviews Action to be taken

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The JII is a formal planned interview with a child carried out by trained and competent staff to hear the child's account of events which require investigation. Interviewers must be objective.

At the time of interview, it will not be known what proceedings, if any, the record of the interview may be used in, whether criminal, civil or both. Before carrying out any interviews there must be agreement at the JII Briefing Meeting on the venue for interview, travel arrangements, the interview structure, and the lead interviewer.



### The Purposes of the Investigative Interview are to:

- Hear the child's account of the circumstances that prompted the enquiry;
- Gather information to inform decision making on whether the child or young person or any other child, may need protection;
- Gather evidence if a crime has been committed against the child, young person or anyone else; and
- Gather evidence which may lead to Grounds of Referral to the Children's Reporter.

Video Recorded Interview (VRI) equipment is installed at a child friendly environment based at Aurrida House in Kirkwall and access is arranged by the Police. Venues used for visual recording must comply with national guidance to ensure the recording can be used in later proceedings. Venues need to be comfortable and safe for children in which to speak and suitable for recording equipment.

Mobile recording equipment is also available for use where a decision is taken at the IRD that the joint interview be held nearer to the child's location. This may include more remote and outer isles of Orkney. However, due to issues of confidentiality and Police and Social Work visibility in small communities the preferred location is Aurrida House. As members of the Interviewing Team, you will aim to minimise emotional impact or stress to the child and provide a comfortable and safe environment for an engaging interview.

All those undertaking JIIs should be familiar with, and follow, National Guidance. The **Scottish Government Guidance on JII** can be accessed by clicking the following link <https://www2.gov.scot/Resource/Doc/365398/0124263.pdf>.

### After a Child Protection Investigation

Following every Child Protection Investigation - whether single agency or joint - there should be an Inter-agency Debrief Meeting which records outcomes and further action.

As Operational Manager and IRD Sergeant, it is your responsibility to hold a Debrief Meeting which should involve the Social Worker and Police Officer who conducted the JII and the Designated Officer for Health.

Debrief Meetings decide if there should be an Initial Child Protection Case Conference, ensure Named Persons are informed of the outcome, and arrange further assessment of the child's or family's circumstances.

Further IRDs may be necessary on receipt of additional information from any JII or medical examination, to assist the decision making process or if risks to other children are identified.

The Police have a duty to investigate any crimes that may have been committed against a child. As DCIAU you have a responsibility to keep the Social Work Operational Manager informed of the progress of any criminal investigation and if any adult who is a risk to the child has been arrested, detained, charged or bailed, so safety plans for the child can be made.



As Operational Manager and IRD Sergeant, you will ensure decisions and actions are recorded on the appropriate shared format. Defensible decision making requires good quality record keeping.

### **Disagreement Resolution:**

It is fully expected that services will work cooperatively together to keep children safe and IRDs will reach agreement from all parties on the best course of action to take.

Disagreements at any stage, which cannot be resolved at the IRD, will be referred to the Chief Social Work Officer, Orkney and Detective Chief Inspector, Public Protection Policy Unit, Divisional Headquarters, Inverness. A decision will be reached within one working day and fed back to the Operational Manager and IRD Sergeant.

Further information and documents pertinent to professionals in Orkney working in child protection can be found at the 'Related Links', 'Related Sites' and 'Related Downloads' sections of this webpage: <https://www.orkney.gov.uk/Service-Directory/S/information-for-professionals.htm>

### **The Child at the Centre**

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The United Nations Convention on the Rights of the Child (UNCRC) is an international human rights treaty. Unlike other human rights treaties, the UNCRC is all about children. It treats a child as a person in their own right, rather than just being a small adult or someone looked after by parents.

Neither are children and young people 'objects of concern' and great care must be taken in any Child Protection Investigation to respect, inform and support children and young people throughout the process.

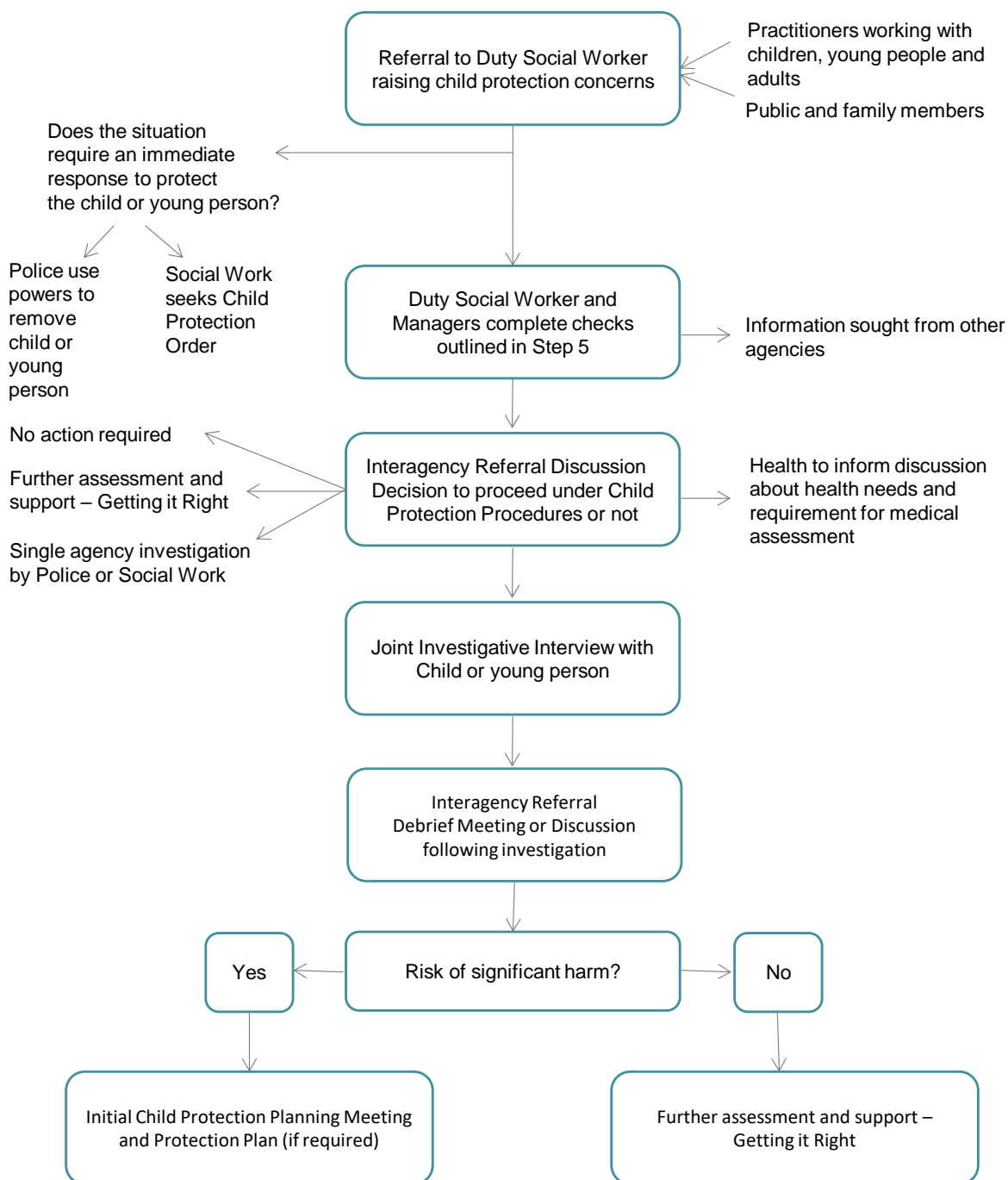
Investigations should be conducted sensitively, at the child's pace, and investigating officers should continually check the child is comfortable, at ease, and understands the process of which they are subject. Investigating officers should:

- Ensure children have a parent or trusted adult close by while being interviewed (unless this is deemed to interfere with the investigation or child's safety);
- Provide age appropriate explanations about what is happening;
- Answer questions honestly;
- Decide the best method of communicating with a child of a given age;
- Determine if the child has additional support needs requiring specialist help with communication;
- Clarify the support needs of the child, especially those who are very young;
- Allow the child to express their views and fully participate; and
- Explain what will happen next – especially if the child is being asked to agree to a medical examination.





### 3 Process for Child Protection Referrals Flowchart



File ref: Process for CP Referrals Flowchart\_1-0-0

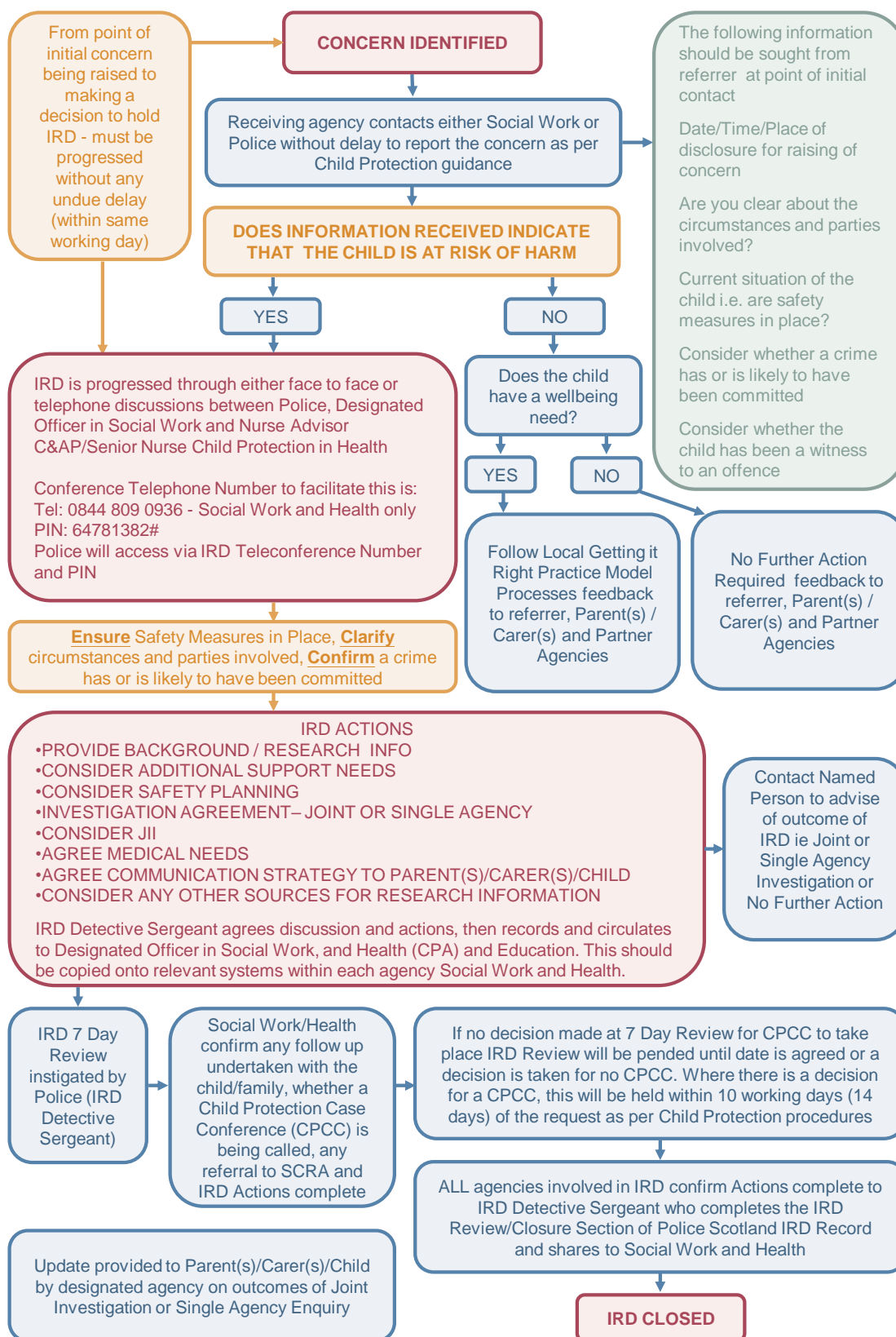




## 4 Appendices

### 4.1 Appendix | Highlands and Islands IRD Protocol

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**CONFIRM:**

- **WHO HAS LAST SEEN THE CHILD AND WHEN**
- **WHERE IS THE CHILD NOW**
- **WHAT THE IMMEDIATE SAFETY AND CARE ARRANGEMENTS ARE FOR THE CHILD**

**RESEARCH CHECKS IN PREPARATION FOR INTER-AGENCY REFERRAL DISCUSSION**

**INITIAL CHECKS BY CHILDREN'S SOCIAL WORK**

- Log Child Protection register check, research registration history including if the child has been on another local authority CPR
- Social Work database with reference to adult(s) as well as children's services and note: legal status record, chronology, whether child has disability
- Looked after child and placement history
- Child Protection and looked after child history for siblings, step siblings and half siblings
- Allocated worker
- Child's network
- Professional network
- Other agency checks – Housing, Third sector, previous local authority areas

**POLICE SCOTLAND**

- Police National Computer
- Criminal History System
- Vulnerable Persons Database
- Criminal Intelligence
- Incident Logging
- Legacy files
- STORM

**HEALTH**

- Check child health records
- Chronology
- Check GP records
- Discuss GP information with GP practice – if appropriate
- Consider any disabilities and how these impact on the child
- Consider protective factors
- Consider risk factors

**EDUCATION**

- Check PPR for Child Protection Chronology
- Risk factors
- Protective factors
- Communication issues/requirements
- Disability
- Risk taking behavior
- Family circumstances - risks and supports
- Health issues
- Circumstances of other significant family members i.e. siblings
- Evidence in reaction to the current enquiry which becomes relevant

**All agencies must follow all internal procedures**

File ref: P0318-PRFL-003-VER-1-0-0



## 4.2 Appendix | Acronyms

Acronyms	Definition
CAMHS	Child and Adolescent Mental Health Services
CJU	Criminal Justice Unit
DCAIU	Police Scotland Divisional Child Abuse Investigation Unit
Getting it Right	Getting it Right for Every Child
IRD	Inter-agency Referral Discussion
JII	Joint Investigative Interviews
NSPCC	National Society for the Prevention of Cruelty to Children
OPPC	Orkney Public Protection Committee
PARIS	PARIS is the case recording and record management database system for Orkney Health and Care.
VRI	Video Recorded Interview



## 5 Related Documents and Resources

Related documents and resources:
"It's everyone's job to make sure I'm alright" - Report of the Child Protection Audit and Review <a href="https://www.webarchive.org.uk/wayback/archive/20150219072531/http://www.gov.scot/Publications/2002/11/15820/14009">https://www.webarchive.org.uk/wayback/archive/20150219072531/http://www.gov.scot/Publications/2002/11/15820/14009</a>
National guidance for child protection in Scotland (2014) <a href="https://www.gov.scot/publications/national-guidance-child-protection-scotland/pages/12/">https://www.gov.scot/publications/national-guidance-child-protection-scotland/pages/12/</a>
Why children reveal abuse and What to say to a child and how to respond. <a href="https://www.nspcc.org.uk/keeping-children-safe/reporting-abuse/what-to-do-child-reveals-abuse/">https://www.nspcc.org.uk/keeping-children-safe/reporting-abuse/what-to-do-child-reveals-abuse/</a>
National Guidance on Joint Investigative Interviewing of Child Witnesses in Scotland. <a href="https://www2.gov.scot/Resource/Doc/365398/0124263.pdf">https://www2.gov.scot/Resource/Doc/365398/0124263.pdf</a> .
Orkney Islands Council Information for Professionals – see 'Related Links', 'Related Sites' and 'Related Downloads'. <a href="https://www.orkney.gov.uk/Service-Directory/S/information-for-professionals.htm">https://www.orkney.gov.uk/Service-Directory/S/information-for-professionals.htm</a>

## 6 Version History

Document status				
Version	Status	Date	Amended by	Reason / overview
0.0.A	Draft	28 July 2020	JL	Initial draft
1.0.0	Live	03 August 2020	JL	Issued for use
1.0.A	Draft	23 November 2020	JL/AJR/GO	For Official Launch on 2 December 2020
2.0	Live	24 November 2020	JL	Approved for use.
2.1	Live	25 November 2020	JL	Update to 'The Child at the Centre' section.
2.2	Live	26 November 2020	JL	Minor update