

Allegations against Residential Workers

Guidance on How Agencies Should Respond

March 2011

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Ministerial Foreword



When children are harmed or at risk in the community they may be placed in public care. Children's homes are places of safety under the law, so children, parents and the wider public should be confident that children are indeed safe and nurtured while they are looked after in residential care. Safe and nurtured are two of the key goals in the Scottish Government's ['Getting it Right for Every Child'](#) programme.

Many concerns raised about a child's welfare will not need a response under local child protection procedures. Having made initial enquiries it may be decided that another professional response which meets the child's needs and rights is appropriate.

This guidance aims to make sure that children can complain about mistreatment and be sure they will be heard and action taken to protect them, in other words that they will be safe. If they are to be nurtured then it is essential that those adults who are their carers also feel safe and respected as they seek to provide that daily nurture.



Adam Ingram
Minister for Children and Early Years

Foreword from the residential child care sector

1. Keeping everyone safe and nurtured

Keeping children safe and treating residential workers fairly, without creating 'hands off', sterile care environments is one of the biggest challenges facing care providers today. [The Scottish Government](#) recently launched guidance developed by [the Fostering Network](#) on the improved management of allegations against foster carers. Children in residential child care settings also sometimes make 'allegations' of mistreatment against their residential care staff, and the Government commissioned the [Scottish Institute for Residential Child Care](#) (SIRCC) to develop similar guidance for residential care services. Allegations of mistreatment made by children are taken seriously by residential services and incidents of all kinds are routinely recorded and investigated. The need for this guidance in the residential sector recognises the fact that in recent years, allegations of mistreatment have sometimes led to confusion about how and when child protection procedures should be initiated. There has been considerable variation in practice and, in some cases, residential workers have been suspended for lengthy periods in the course of investigations of relatively minor incidents.

The problem arises from the fact that many of these investigations lead to 'no further action' and workers return to post. However the impact on them, the children and the organisation is huge and it is clear, in retrospect, that the investigation process has sometimes been unnecessarily protracted and disproportionate to the initial incident or allegation.

It has also become apparent that allegations involving staff in local authority services may be treated differently to those involving the independent sector. In some cases, though not all, senior managers of the residential services in the independent sector have not been kept informed of the status of an investigation while their counterparts in local authority services are. This has made it difficult for managers to know how best to support all the children and staff not just those involved in the allegation.

2. Distinguishing between discontent, poor practice and child abuse

Distinguishing between allegations which involve a claim of 'significant harm' or the risk thereof, and those which constitute poor but non-abusive practice, or which are an indication of unhappiness in a placement, poses a challenge to the current operation of the child protection system. One of the reasons that child protection procedures have been applied in an inappropriate fashion in relation to residential care incidents, is undoubtedly related to the widespread awareness of serious sexual and physical abuse which has happened in some residential services, a number of which have been the subject of inquiry ([Edinburgh 1999](#), Fife 2002, and [Kerelaw 2009](#)).

As a profession, therefore, residential workers must recognise that some workers have committed acts of sexual and physical abuse and that children's attempts to communicate were sometimes not heard or taken seriously and proper investigations of complaints did not occur. It is right,

therefore, that every provider and staff team takes the potential for abuse seriously.

3. 'Safe caring' measures: the child protection agenda in residential care

It is also important for those outside the residential sector to recognise that, in response to the revelations of sexual and physical abuse, many systemic changes have been made to the operation of residential care.

Improvements have been made in many aspects of the residential care service, including:

- more thorough recruitment practices
- the development of 'whistle-blowing' procedures
- the creation of national care standards and independent inspection
- increased availability of independent advocacy services
- strict guidance and specialised training around physical restraint
- the development of complaints system within service organisations and through the [Care Commission](#) (which will be superseded by Social Care and Social Work Improvement Scotland [[SCSWIS](#)] from April 2011).

Regulation of the work force has also resulted in improvements and clear codes of practice set out some basic expectations that agencies and workers providing care services should meet.

Recognition of the potential for abuse has also informed the training of residential workers in child protection, a topic which is a mandatory element in all HNC in Social Care and SVQ training. All of these contribute to the 'safe care' agenda as it is sometimes called.

4. Precautionary suspension

Precautionary suspension means being suspended from work without prejudice, usually to allow an investigation to take place. Being subject to an allegation of abusive practice which most commonly relates to issues around physical restraint, often involves 'precautionary suspension'. This is a very traumatic experience for workers. While precautionary suspension may be justified in very serious cases, in many cases the investigation does not proceed beyond an initial stage and workers frequently return to work with no further action taken. Such a situation need only happen once in an organisation to leave all the workers anxious that situations that arise in daily practice can lead to suspension and investigation.

There can also be emotional costs for the children and young people whose allegations may have consequences more far-reaching, and indeed traumatic, than those they intended. Significant financial and human resource costs are also involved and it is vital to the integrity of the care system that such costs should be proportionate to the actual risk or harms involved. Such investigations and precautionary suspensions will also impact severely on other children in the service.

We owe it to all the children who are looked after to distinguish between

different kinds of complaint and to respond appropriately and not allow children or adults to be subject to fear, uncertainty and bureaucratic procedures or delays.

5. Improving the management of allegations

This guidance aims to ensure that the current residential context is recognised and that allegations of mistreatment that do not meet the test of 'significant harm' or risk thereof, are not *routinely* referred to child protection investigation, but are, *in the first instance*, looked at by external managers of the residential service and the child's social worker.

The guidance recommends an approach which is proportionate, fair and thorough but which retains at its centre the protection of the child and a focus on ensuring their safety and well-being.



Jennifer Davidson

Director, Scottish Institute for Residential Child Care

Summary

This guidance is for all providers of residential child care services, child protection personnel in local authorities and the Police.

Part One provides important information about residential care culture and the context in which such services for children are provided in order to improve the understanding of those who are given shared responsibility for responding to allegations. It also highlights a number of key principles which support best practice and provides a definition of key terms. This section also includes guidance on the monitoring and review of the management of allegations.

Part Two identifies considerations which should inform initial decision making and aims to develop practice which ensures that responses are proportionate, i.e. that situations which merit a child protection investigation are reliably identified, but that other situations which do not involve allegations of significant harm, or risk thereof, are managed in ways appropriate to the nature of the allegation and the child and worker's circumstances. It is envisaged that the process and guidance will be incorporated into local authority and provider procedures and so be customised to suit local circumstances.

The guidance then outlines best practice steps which should be taken in investigating an allegation where there is concern that a worker has acted in a way which has caused a child actual harm or a significant risk thereof.

In this part of the guidance agencies are prompted to think about how children should be supported when an investigation is taking place. Employers are reminded that they continue to have responsibilities to workers who may be subject to an allegation and reminds providers and child protection agencies that workers must always be treated fairly.

The final part of the guidance provides information on how ending an investigation should be managed and evaluated.

Part One – The context for this guidance

1. Culture and Context of Residential Care

1.1 *Open, responsive and warm services*

The culture in which residential services are provided is key to ensuring that any allegation made by a child is responded to appropriately. Much has been written about the importance of developing a child-centred culture in a residential service and the importance of it being an ‘open’ service which welcomes ‘outsiders’, while creating a homely environment in which children’s privacy is maintained. Residential services and agencies providing them should learn the lessons from enquiries written into abuse of children in residential settings where cultures have been described as “closed” and tending to be staff rather than child-centred.

Roger Kent’s Children’s Safeguard Review¹ challenges providers of residential child care services to create a safe and secure environment where children will be listened to. Transparent, self-critical and responsive residential cultures are key to safeguarding children appropriately. Environments which are characterised by warmth and mutual respect, where children can raise their concerns and challenge the practice of staff, are less likely to be ones where children’s unhappiness, and perhaps distress, about their placement, or minor incidents, become translated into allegations necessitating child protection investigations.

1.2 *‘Holding safely’ and child protection*

In recent years child protection procedures have been invoked for a wide range of allegations but it is important to note that these procedures are intended to identify *significant* harm of a child or a risk of significant harm, which is clearly highlighted in [the Scottish Government’s National Child Protection for Scotland 2010](#). Agencies are reminded that the child protection system is not designed to be used in response to minor allegations or complaints. Complaints about physical restraint are especially challenging to evaluate and all child protection staff who respond should make themselves aware of the relevant [National Care Standards](#) and current national guidance ([Holding Safely](#)). They should also be aware of the approved approaches to managing restraint, before initiating child protection procedures.

1.3 *The context of residential care*

It is acknowledged that certain aspects of the context in which residential workers care for children can present obstacles to a measured and fair approach to allegations against them. Increasing awareness of these contextual factors plays a part in achieving good practice and improved outcomes. Here are some examples.

As evidence has come to light of children in public care being abused by workers, public perceptions of the trustworthiness of people who care for

¹ Children’s Safeguards Review, Social Work Inspectorate for Scotland (1997)

children have changed. Social work and social care professionals are not exempt from these shifts in public attitudes. In addition they may worry that they themselves have placed children with people who have abused them.

It is not unusual for children living in residential care to have experienced significant trauma in their life. Some allegations may have their roots in the child's previous experiences rather than the current placement. Notwithstanding this, agencies must always respond to and consider any allegation made within the context of significant risk or harm.

It is also important that placing social work teams fulfil their obligations and supply written information about the mental and emotional development of children they place. This information should also include a detailed history about the child's care experience including previous allegations made and their outcome.

Awareness of, and commitment to children's rights have increasingly informed the Scottish approach to care practice. Consequently, children living in residential care are often well-informed about their rights to protection and freedom from abuse, and the [National Care Standards](#) for children's services identify that children should have information about their rights and what to do if they have a concern.

This has been a positive development, although it is also an arena which involves constant negotiation and reflection in order to make sure that everyone's rights are promoted and respected.

1.4 Creating the right conditions

Agencies providing care service need to ensure that workers understand and respect that children have the right to be safe. In terms of responding positively to allegations it is important, when organisations are recruiting, that they make candidates aware of the potential for allegations to be made, how they are supported to help children communicate their concerns and the policies and procedures by which any allegations are investigated.

Providers have a duty to ensure that residential workers are enabled to safeguard children in their care and to act in an authentic caring manner. Scotland has a detailed legal framework which sets out that workers should be provided with and participate in appropriate training, supervision and support throughout their professional career. An important component of training, support and supervision must focus on how allegations are responded to.

'Precautionary suspension', i.e. on full pay and involving no attribution of culpability, has become a widely-adopted practice in recent years. It is not used by all local authorities and it is not a step that should be taken lightly or routinely. Such events are traumatic at the time but are also likely to remain on the worker's record, especially as agencies embrace the recommendations of the Scottish Government's Guidance on [Safer Recruitment through Better Recruitment](#), specifically around agencies being asked about candidates' suitability to work with vulnerable people.

Providers should ensure that the culture in their organisation is not a 'blame' one and if precautionary suspension is used managers must aim to affirm that it is a 'neutral' step, not a punitive one, to allow full facts to be gathered in a way which aims to keep children and workers safe. Although challenging it is important that providers provide training and support on how allegations will be managed and on the nature and purpose of precautionary suspension where this is used in the agency.

The relationship between providers and their workers should be fair and honest. It is acknowledged that this presents a challenge when an allegation is made against a worker, especially allegations of sexual abuse.

1.5 Professionalism and justice in investigations

Fairness requires that allegations against residential workers are investigated in a way which takes account of the situations in which children are looked after. This is not about offering a different level of protection for children in residential care but about recognising that a high level of professional skill will often be needed to discern what may have prompted an allegation and how children with very particular needs can best be safeguarded. Effective procedures, underpinned by informed learning, should allow for this level of professional understanding and judgement.

When a worker is informed that an allegation of abuse has been made against them it is vitally important that the provider ensures that the worker is supported at all stages, irrespective of the outcome of any investigation. Providers will need to tell a number of other agencies that an allegation has been made and work cooperatively with those responsible for conducting any investigation.

While an allegation is being investigated the provider will retain responsibility for continuing communication with the worker on how the investigation is being carried out. To enable this to happen, agencies carrying out the investigation will have to work openly and cooperatively with the provider in a way that does not compromise either the investigation or safety of children. All reasonable steps will have to be taken to ensure that there are no voids in information sharing and that providers are not left in a position where they cannot fulfil their duty of care to workers.

It is acknowledged that children and young people may use allegations as a means of drawing attention to worries or unhappiness that they may have about their care. In some circumstances the child concerned may not be able to articulate their concerns in any other than making an allegation.

Notwithstanding this it must be acknowledged that children will speak out when they have been abused and providers and those responsible for carrying out investigations need to ensure that children are supported at all stages having made their disclosure.

2. Applying the guidance

This guidance should be used by organisations when there is concern that a residential worker has:

- Behaved in a way that has or may have caused significant harm to a child or exposed them to the risk thereof;
- Possibly committed a criminal offence against a child or related to a child.

In most cases the concern will be about a specific harmful action or exposure to risk, but in others there may be a cluster of concerns or complaints which indicate that some aspect of the worker's practice, for example attitude to the child, use of discipline or standard of physical care is exposing the child to significant harm or risk thereof.

The guidance can be adapted to fit local circumstances, and it is envisaged that it will be implemented by incorporating key elements into relevant agency policy and procedures.

Where a complaint is made against a worker which does not imply any significant harm to the child, or risk thereof, agency mediation and complaints procedures should be used.

Where implementation affects the interagency response to child protection concerns, it will be necessary to negotiate local agreements and policies with key partners, notably police and health. Area Child Protection Committees will be well placed to co-ordinate these negotiations.

3. Principles in applying the guidance

The following principles reflect best practice in how this guidance should be applied:

- The welfare of the child is paramount and their views are sought, listened to and respected at all times.
- A child will never be stigmatised because they have made allegations, irrespective of the outcome of any investigation.
- Children and their parents (and those adults with relevant person status) as appropriate are kept informed at all stages throughout the process about how the allegation is being managed.
- Workers about whom there are concerns should be treated fairly and honestly and principles of natural justice for them should apply.

4. Key definitions in this guidance

The starting point for any definition used in this guidance must be that this guidance applies where an allegation is made that a worker has acted in a way which will require to be investigated using child protection procedures; i.e. that there is concern that a worker has behaved in any way which exposes a child to significant harm or risk thereof.

While a detailed glossary is offered in Appendix 3 the following key

definitions are considered to be most relevant when introducing this guidance.

- *'Allegation' is used to refer to any claim or concern that a worker may have harmed a child or exposed the child to a significant harm or risk thereof (use of the term 'allegation' does not necessarily imply that the alleged level of harm or risk is necessarily significant or that the matter should automatically be investigated through a child protection investigation).*
- *'Child' or 'young person' is used to refer children and young people up to the age of 18. However the protective interventions that can be taken will depend on the circumstances and legislation relevant to that child or young person.*
- *'Harm' means the ill treatment or the impairment of the health or development of the child, including, for example, impairment suffered as a result of seeing or hearing the ill treatment of another. In this context, "development" can mean physical, intellectual, emotional, social or behavioural development and "health" can mean physical or mental health.*
- *'Significant Harm' - there is no absolute criteria for judging what constitutes significant harm. In assessing the severity of ill treatment or future ill treatment, it may be important to take account of: the degree and extent of physical harm; the duration and frequency of abuse and neglect; the extent of premeditation; and the presence or degree of threat, coercion, sadism and bizarre or unusual elements. Sometimes, a single traumatic event may constitute significant harm, for example, a violent assault, suffocation or poisoning. More often, significant harm results from an accumulation of significant events, both acute and long-standing, that interrupt, change or damage the child's physical and psychological development.*

Agencies should note that the definitions of child, harm and significant harm are taken from the [Scottish Government's National Guidance for Child Protection in Scotland](#). This should help improve consistency of definitions used to keep children in care services safe.

Part Two – The process of responding to an allegation of abuse

6. Responding to an allegation

6.1 When an allegation is made against a worker, staff receiving the allegation should respond in accordance with their organisation's procedures, which should be consistent with local child protection procedures in terms of making an initial assessment of the immediate risk to the child and any other child living in the service.

If the child or any other child is considered to be at immediate risk of significant harm decisions need to be taken urgently by managers to ensure the threat is removed. This would lead to an interagency discussion immediately and action to protect the child.

6.2 Staff receiving the allegation must inform the manager of the service without delay, i.e. the same working day (or shift if out-of-hours (or their manager if the allegation is about them)). They should also ensure that a record of the allegation is made in the child's placement records and what is being done in response. 10.4 of this guidance suggests how and when the worker who is subject of the allegation should be told.

6.3 The manager of the service should also advise the child's social worker immediately that an allegation has been made and that they are taking steps to find out more about this. The purpose of this discussion is to inform the child's social worker of what is being alleged, taking into account the circumstances in which the allegation was made.

6.4 The following areas would be relevant to the discussion:

Nature of the Allegation

- *Consideration should be given to: the actual or potential impact on the child, taking into account the child's age, developmental stage and previous experience; the level of alleged harm to the child and or the likelihood of risk; the circumstances in which the alleged incident or lack of care took place; the intent behind the worker's action i.e. was it unintentional, did the worker intend to hurt the child or was the motivation to keep the child safe?*

Child

- *Background: reasons for being accommodated; how the child has experienced parental care; previous abuse of the child; previous placements and how these have ended in the past.*
- *Current issues: any pressures on the child, for example a hearing or review coming up; contact issues; school issues; recent sanctions; any situations where workers have had to limit the*

young person's activities.

- *Past and present behaviour: how the child behaves when under pressure; his/her responses to stress; any previous allegations or complaints made by the child or members of his/her family; how the child has responded to the alleged behaviour on the part of the worker.*

Worker

- *History of their employment, the experience of and response to different kinds of challenges; any previous allegations, complaints against them or issues identified as part of their professional supervision.*
- *Current issues affecting performance, the demands of current children placed.*

Person making the allegation

- *Consideration should be given to: the relationship between the child, the worker and the person making the allegation (if these are different people); current tensions or circumstances which may have contributed to the allegation being made; any previous allegations, how these were investigated and the outcome; taking the allegation seriously, while also acknowledging factors which suggest that the allegation may be not be true.*

7. **Decisions about the nature of the allegation**

7.1 Unless there are indications that a child is at immediate risk of significant harm, decisions about removing children or suspending workers should not be taken until a discussion has taken place between the child's social worker or senior social worker / team leader **and managers of the residential service**, including the external manager. The aim of this careful assessment is to ensure that children are protected with the least possible disruption to their lives.

Any question about suspending the worker in such situations should be deferred until these discussions have taken place **unless** there is an immediate risk to the child. Given that residential workers do not usually work on their own but are part of teams then suspension to protect the child is not usually necessary unless there is evidence that the worker is in some way harming or poses a risk of harm to the child. If the decision is that further enquiries are necessary before action is taken then the external manager could authorise the managers in the service or the child's social worker to make those further enquiries.

7.2 An allegation will usually fall into one of the following categories:

1. Includes information that there may have been significant

- harm or risk of significant harm to the child, as a result of physical, sexual or emotional abuse or neglect;
2. Amounts to a worker acting inappropriately or in ways which are considered unsuitable for the child, but not causing or likely to cause significant harm. Examples might include the worker criticising the child.
 3. Indicates no aspect of the worker's behaviour or practice has been observed to be problematic, but some concerns have been raised about the child's behaviour, lifestyle or frame of mind. For example a child may be reluctant to go home to the residential service or have talked about feeling depressed in the placement. Concerns of this kind might emerge from a range of sources e.g. school staff, psychologist, social worker. In assessing the significance of this kind of concern, it is particularly important to take account of the child's age, stage and previous experience.
 4. Is a complaint from the child, the child's parent or someone else about some aspect of the worker's behaviour or practice, but which does not imply any risk of significant harm to the child. Examples might include complaints about choice or quality of food, clothing or use of sanctions.
 5. Is about conflict between a child and a worker, e.g. the worker's management of restraint where they have practised according to the approved method or system but which the child has complained about.

7.3 Where it has been decided that it is in the child's best interests that they should be moved from their placement, the child's social worker must immediately inform the Reporter of this in writing and the reasons for this.

At this stage, the social worker should also inform the child's parents or any other relevant individual unless there are specific reasons that doing so is not in the child's best interest.

7.4 If children are to be moved from a placement and or if a worker has to be suspended because of an allegation, the reasons for this should be explained carefully to those children affected, using appropriate methods for communicating with younger children or children with additional support needs.

This decision and the reason for this should be clearly recorded in the child's case file held by the local authority responsible looking after them. The decision should also be noted at the child's next review which should also note any further action required to support the child who has made the allegation or those children who may be affected by it.

7.5 Children and young people have the right to express their views on moving from the residential service where this is being considered. These views should be taken into account, giving due consideration to

the child or young person's age, maturity and understanding. In some circumstances it may be appropriate to offer children and young people the support of an independent advocate or children's rights officer to help them effectively present their views.

7.6 Responsibility for discussing these matters with children will usually rest with the child's social worker. In some circumstances, for example if the social worker has seldom met the child, it may be helpful to also involve someone whom the child knows well and trusts, e.g. the child's key worker in the residential service (if this is not the person who is subject of the allegation).

7.7 Unless they are considered to be at immediate risk, children should be given time to say goodbye to the other children and workers in the service as well as friends in the local area. They should also be made aware of what opportunities there will be for maintaining contact with people who have been important to them. Unless there may be immediate risks to the child, no major changes, for example to schooling, should be made until the matter has been considered and decided at their next review.

7.8 Children will need support to adjust to any move and opportunities to talk about how this has affected them. They may also need to be updated on implications for their future care, especially if there is a possibility that they will return to the residential service. This would usually be the responsibility of the child's social worker, but might be delegated to another suitable person if the child's social worker cannot be allocated adequate time to carry out this role. Best practice would determine that independent advocacy services or local children's rights services would be well placed to either do this directly or provide advice to the child or provider.

8. Initial Information Gathering

8.1 Local authority procedures should identify who they will nominate as '**designated manager**', i.e. which senior staff will have responsibility for overseeing and/or managing the response to allegations against residential workers working in their locale. Those appointed should have experience and understanding of both child protection and residential care.

8.2 In some situations it will be clear to the designated manager whether or not the allegation involves significant harm, or the risk thereof, but in others they may decide that additional information is needed to help them come to a decision about the best way to proceed. It will be important that managers making this decision consult fully with the child's social worker and the service's external managers who may have a fuller understanding of the child and the residential placement, which may include consideration of any previous allegations made against the worker.

8.3 There may also be a case for having further discussion with the child or person making the allegation, other residential workers in the service or other professionals who know the child or worker well, for example a teacher, psychologist or worker from a voluntary organisation. In some instances it may be helpful to consult with the designated contact person within the police. Any enquiries of this kind should be authorised by external managers.

Local authority procedures should specify a reasonable timescale for carrying out additional enquiries and reporting back to the designated manager. Written and verbal reports should be provided. Having considered these, the designated manager should consult with others who took part in the initial internal discussions and make a decision on how to proceed.

8.4 In some situations there may be reasonable grounds to believe that the allegation is not substantiated. This could be because the child has made unsubstantiated allegations in the past or they have recently indicated that they are going to make an allegation to achieve another purpose; for example, in order to end the placement. It is important that there is an early discussion of these two aspects of the allegation which ensures that what the child is saying has been listened to, carefully assessed and appropriately responded to.

8.5 At each stage of the initial decision making process, a record should be made of all key information considered, decisions taken and the reasons for them. A pro forma for recording relevant information is available at **Appendix 3**.

8.6 At this stage those allegations which do not meet the test of significant harm, or risk thereof, should be followed through in the context of discussions between the residential team and the social worker, in order to explore the issues that have arisen and seek to address the child's concerns. If the professional decision is that there may have been significant harm, or risk thereof, then the process moves into planning an investigation, which will be the responsibility of the designated manager.

9. Planning an investigation: Points for consideration

9.1 In any situation where there may have been actual or potential significant harm or risk thereof, the designated manager will be responsible for planning how any investigation will take place. This will apply in all category 1 situations and in any other situations where there is evidence of actual or potential significant harm to a child. Situations involving the possibility of emotional abuse or neglect will often be difficult to assess in terms of the level of actual or potential significant harm. In these situations decisions about how to proceed should be based on what is likely to achieve the best outcome for the child. Medical or psychological assessments may be required to assist with

assessing the impact on the child.

9.2 In planning an investigation the designated manager should satisfy themselves that the matters outlined in **Sections 6, 7 and 8** have been addressed and to ensure that relevant information held by other agencies is included in the decision making process. Local procedures will determine how long this should take but agencies should aim to complete this no later than five working days after an allegation has been made.

9.3 The early stages of planning may conclude that the allegation or concern does not involve significant harm or the risk thereof and that the most appropriate way of taking the matter forward would be to allow the provider to conduct further enquiries and review and further guidance on how this should be managed is outlined in **Appendix 2**.

9.4 The employer should notify the worker in writing that the allegation will not be investigated using formal child protection procedures but, where applicable, that the matters raised are to be subject to further review by the provider. A copy of this written notification should be stored in the worker's employment record.

9.5 The child's social worker should also inform the child of the decision at this stage and work with the child to help resolve any outstanding issues, which might involve accessing further supports for the child.

At each stage of the decision making process, consideration should be given to arrangements for informing the child's parents that an allegation has been made against the worker looking after their child. In deciding what information should be given to parents and when, social work staff should take into account their statutory responsibility to involve parents in decisions which affect their children, alongside the child's wishes on what their parents should be told and, if appropriate, considerations to do with the child's safety.

9.6 The pro forma at **Appendix 4** can be used to guide and record initial decision making. Completed forms would also provide information on current practice in managing these complex situations which in turn might be used for practice development.

10. Carrying out an investigation: Best practice considerations

10.1 As soon as a decision is taken to initiate a child protection investigation, the child's social worker should inform the provider and any local authorities responsible for children living in the service without delay.

Where the child is on supervision, or is subject of a referral, the child's social worker must inform the Reporter that a child protection investigation will take place, which should be done as a matter of

urgency.

10.2 Providers and host authorities should work together to establish local protocols, as happens in some parts of Scotland, to ensure that the provider formally informs the host authority that allegations are subject to investigation under child protection procedures by the placing authority.

10.3 The provider must inform the [Care Commission](#) that an investigation has been initiated and should provide the following information as a minimum:

- The name of the worker involved.
- Any risk assessment/management plan that is in place to manage the allegation, e.g. whether or not the worker has been redeployed etc.
- Any information about evidence that indicates that harm or the risk thereof may have occurred.

10.4 Arrangements for informing the residential worker that an allegation has been made against them should be agreed by the key professionals involved. These would include the police, child's social worker and the manager of the residential service (or their manager when the allegation is about them).

10.5 Providers and managers of residential care services must be involved in any planning meetings about how an investigation will be conducted.

10.8 Local child protection procedures will determine the timescale for holding planning meetings and it is important that these take place within three days of the decision having been taken to investigate the allegation as a child protection concern.

The planning meeting should be convened and chaired by the designated manager and those attending should include police, an appropriate representative from education and health services, and senior staff from the provider agency responsible for the residential service and from the local authority responsible for the child or children currently affected by the allegation. It is important that those present include someone who knows the child, the residential worker and service well.

10.9 As well as the substance and context of the allegation the planning meeting should consider the following areas:

- The child's legal status;
- Significant information about the child concerned, including previous placements, and information about any previous allegations or complaints made by the child and up to date information on their circumstances;
- Significant information about the residential worker, their record of

employment with the provider, their category of registration with the Scottish Social Services Council ([SSSC](#)) or other regulatory body, their employment history, their record as a worker and any past allegations/serious concerns relating to them or their practice;

- Whether anything needs to be done immediately to safeguard the welfare of the child or any other children in the residential service;
- The likely impact on any children who may need to be moved from their current placement, how any negative impact might be minimised and arrangements for supporting children after the move;
- Whether anything needs to be done to safeguard the welfare of other children with whom the residential worker has contact, which will include discussions about any caring responsibilities that the worker may have outside of work;
- What action, if any, needs to be taken in relation to other children previously placed in the residential service;
- Identifying key people and the information to be given to them, including residential workers, parents/people with parental responsibility, other local authorities who have children in placement/previously had children in placement; out-of-hours services. The planning meeting should also carefully consider the implications of informing parents or those with parental responsibility if there is a non-disclosure order in place in relation to the child and ensure that any information provided is not at risk of breaching that order;
- Deciding what information is to be given to the child, by whom, what support/counselling will be provided for them and what will be recorded;
- Decisions made in relation to informing parents, what information is to be shared and who is responsible for telling them and how, that is verbally or in writing. The child's social worker will usually carry out this task (or this can be undertaken by the provider following agreement with the social worker).
- The timescale for interviewing key adults and children;
- The timescale in which the agencies involved, including police, will aim to complete an investigation;
- Clarification of the role of the provider's ongoing support to the residential worker;
- Management of any media implications and potential for preserving anonymity for the worker against whom the allegation has been made.

10.10 Planning meetings should agree what information can be shared with the worker at each stage of the investigation, what cannot be shared and who would be responsible for communicating key information to the worker. Police may not always be able to share all the information they hold at the meeting and while workers would want to hear what is happening from the police, this may not be possible as the police investigation may still be on-going.

Timescales and communication

10.11 Minutes of the planning meeting should record decisions and action points on each of the above matters and distributed to those attending no later than 10 working days of the meeting being concluded; it is noted, however, that local child protection procedures may make specific provision for this.

A date should be set for the planning meeting to reconvene one month from the date of the first meeting in order to review progress. Further meetings should be held on a monthly basis until the inquiry is completed or more frequently if required.

10.12 The length of time needed to complete investigations will vary widely, but a target timescale should be agreed at the planning meeting and progress reviewed at least monthly, when the planning group reconvenes. Local Area Child Protection Committees may wish to agree indicative timescales which are realistic for their area. In situations where enquiries are continuing beyond the agreed timescale and reasons for this are not clear, it will be the responsibility of the external managers to liaise with police and local authority colleagues carrying out the investigation in order to ascertain the reasons for the delay and discuss possible ways of overcoming them. Unless there are good reasons for withholding the information, the provider and worker should be told about these decisions and detail of discussions.

11. Supporting children

11.1 As with all activity with children and young people, children should be helped to understand how child protection procedures work, how they can be involved and how they can contribute to decisions about their future. Taking the child's age and maturity into account, they will often have a clear perception of what needs to be done to ensure their own safety and well-being. Children should be treated with respect and listened to at every stage of the child protection process and given appropriate information about the decisions being made. Where a child has additional support needs, additional specialist support may be required to ensure that children fully understand what is happening.

11.2 Careful consideration needs to be given to the needs of the child or young person. They may have been groomed or controlled by explicit or implicit threats and violence and fear of reprisals if they disclose. In some instances a child may be too distressed to speak to investigating agencies or they may believe that they are complicit in the abuse.

11.3 Immediate, therapeutic, practical and emotional support may be required; while [Part 3 of the National Guidance for Child Protection in Scotland 2010](#) gives further information on involving children, agencies are reminded that it is good practice to provide a confidential and

independent counselling service for children affected by abuse. Agencies are also reminded to ensure that investigations are managed in a child-centred way.

11.4 The use of an advocacy service for children, e.g. Who Cares? Scotland or local children's rights services, where available, should always be considered.

12. Supporting Workers

12.1 Once the worker has been informed that an allegation of abuse has been made against them, the provider should ensure that the worker:

- Is given a copy of the placing local authority's child protection procedure;
- Is advised that they may seek legal advice and representation (and access to trade union as applicable);
- Understands the process of investigation and why it is taking place;
- As far as possible, knows when, where and by whom interviews will be conducted and concluded;
- Is informed about the support that will be provided.

12.2 Providers should also ensure that the worker:

- Understands the current status of their continued employment remains unaffected during the process of investigation;
- Understands that their employer is obliged to notify the [Care Commission](#) and other regulatory bodies that an allegation of misconduct has been made (this may also involve notifying the host authority where this is different from the placing authority);
- Understands that the [SSSC](#) may wish to undertake its own investigation;
- Understands and complies with any limitations placed on their contact with the child who has made the allegation and, when suspended, about any limitation on contact with staff working in the service and children living there;
- Is provided with regular verbal and written updates of progress with any investigation;
- Understands that if they resign while the investigation is yet to start, or is underway, this will not affect its progress or outcome.

13. Ending the investigation

13.1 When the designated manager decides to end a child protection investigation, those who have contributed to the planning discussions should be informed as soon as possible, usually within three working days. Providers and social workers for the child should be told the reasons for ending the child protection investigation and advised whether any further inquiries are continuing. The investigation may have

uncovered some issues for the child in the placement or in relation to the residential worker's practice. The child's social worker and provider should be informed of these, in case there are concerns and issues to be examined further, once the child protection investigation has been completed.

13.2 The child's social worker should also inform the Reporter that the investigation is concluded, its outcome and where the child will continue living. This will allow the Reporter to consider what needs to be done about convening a hearing to determine what action may be required to continue to safeguard the child's best interests.

13.3 In most instances the outcomes will fit into one of the following four categories:

- Criminal charges continue to be processed through criminal justice system and further review of implications for worker's future employment is needed;
- No criminal case is being pursued, but concerns persist and further review is needed of the implications of some aspects of the worker's practice or conduct;
- No concerns have been substantiated about the worker's practice, but the allegation has highlighted or resulted in stress between the worker and one or more of the children placed, so the implications of this need further review;
- No concerns have been substantiated about the worker's practice or their relationships with the children currently in placement.

Within three working days of a decision to bring a child protection investigation to a close, the provider, any local authorities responsible for children placed within the service (and the host authority where this is different), the [Care Commission](#) and [SSSC](#) should be informed that the investigation has ended and given reasons for concluding the investigation and brief details of the outcome. Local procedures should indicate who is responsible for conveying this information.

13.4 The outcome of the investigation must be recorded in the child's social work file and/or placement file as appropriate. The provider must also ensure that a record is made in the worker's employment record of the outcome, the reasons for this and any further action required for that worker.

13.5 Irrespective of whether they made the allegation or not, children affected by an allegation should be informed of the outcome of an investigation and given an opportunity to express their views about how this has affected them. Children and young people should be offered advocacy support, e.g. from Who Cares? Scotland when they first raise their concerns and reminded about this throughout the process should they have declined this at an early stage.

13.6 Parents should also be informed when an investigation has been

completed. Where it is decided to delay or limit the information given to parents, reasons for this should be recorded in the minute of the meeting where the decision is taken.

13.7 Referring agencies should also be aware that the [SSSC](#) would consider the information received but may wish to undertake its own investigation into the continued suitability of the registered worker concerned even where the outcome of a child protection investigation is to take no further action.

13.8 It is important to note that the [SSSC](#) will take account of any other investigation and the findings of such investigations but the [SSSC](#)'s considerations, when information has been received about allegations of misconduct against a registered worker, are set within a much broader framework of suitability for registration and take account of the requirements within the [Code of Practice](#).

13.9 If the investigation concludes that a worker should be referred to Disclosure Scotland who administer the [PVG](#) scheme and the [SSSC](#) or other regulatory body, notification should be made in accordance with local procedures.

14. Evaluation following an investigation

14.1 Allegations of abuse are extremely stressful for residential workers. At the end of the process of any investigation, residential workers should be offered a formal opportunity in the form of an evaluation meeting to talk about the impact of the allegation and subsequent investigation and review on them. They should have an opportunity to identify any support or other services which would help them manage the impact and to state what additional support they believe that they may need to do their job well.

14.2 The meeting should be chaired by provider and the worker should attend. Care should be taken to ensure that the meeting does not become a 're-run' of the investigation process and it should be conducted at a time and place that takes account of the residential worker's needs. The provider should outline what steps they will take to ensure that the worker is fully supported on their return to work.

14.3 Consideration should also be given to whether a separate process should take place for any children and young people involved and a record of the meeting should be taken and sent to everyone present within 10 working days.

14.4 Points which might be considered at the meeting would include:

- the child's comments on the way in which the agency undertook their roles and responsibilities;
- the impact of the allegation and subsequent investigation on the children living in the service;

- the impact of any decision to remove children from the placement;
- how any needs identified by children or the provider will be met;
- what on-going support the child may need to help deal with the outcome of the allegation and/or its investigation and how these will be met.

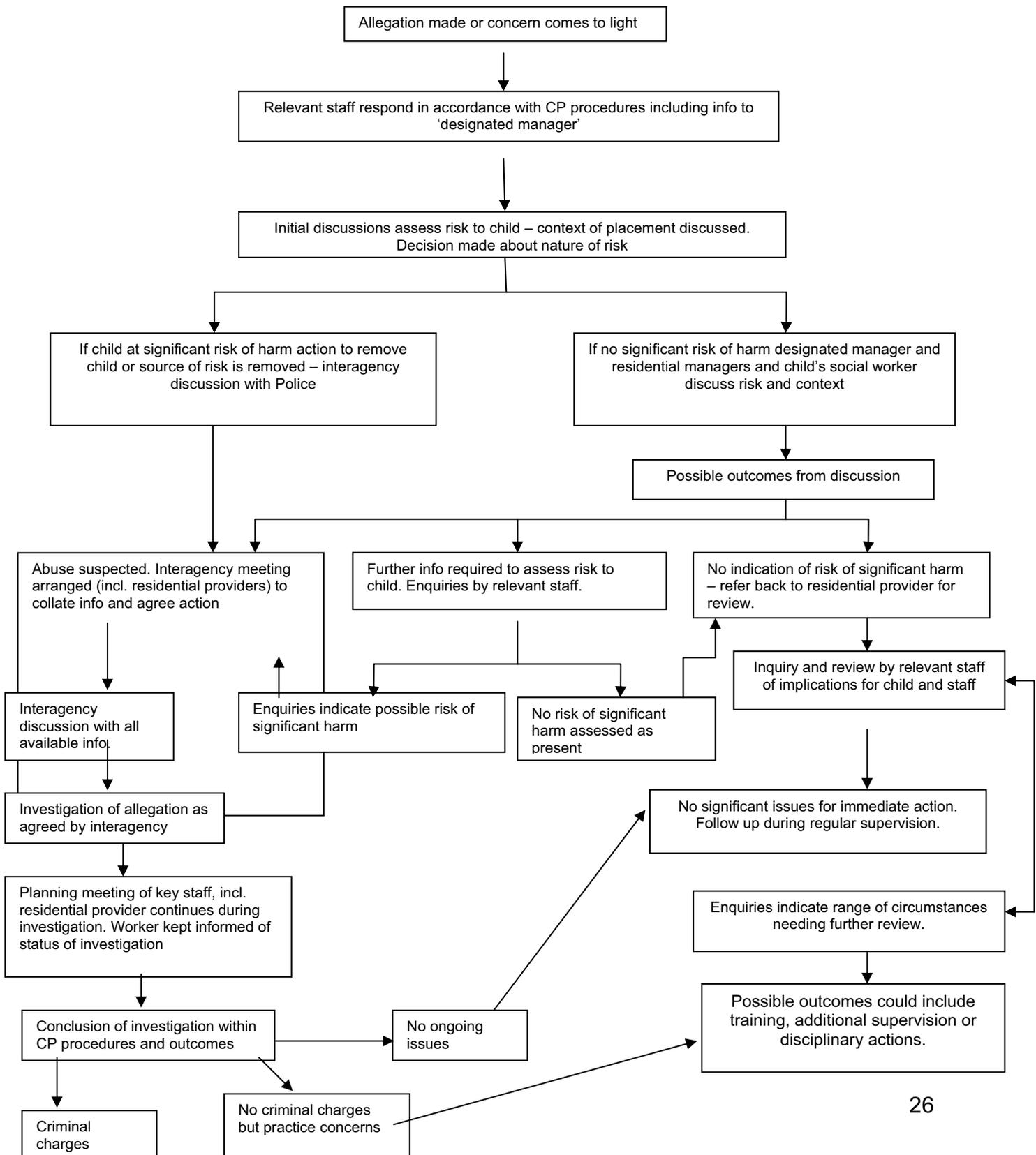
14.5 Workers involved in the management of the investigation should have the opportunity to reflect on their experience of this and any implications for future practice. Where the investigation has been particularly stressful or contentious, there may be value in also including staff that carried out the investigation and social workers responsible for the child. In some circumstances it may be appropriate to engage an independent person to facilitate this kind of evaluation meeting. Building in this kind of debriefing and support will help staff manage their own anxiety and to continue to treat workers fairly and honestly when faced with an allegation. This in turn will help ensure that children's safety and welfare remains paramount in their decision making.

14.6 Organisations should use the learning from any such evaluations to demonstrate that learning has taken place and improvements have been made.

14.7 Providers and local authorities may want to institute arrangements for monitoring how effectively procedures incorporating this guidance operate in practice, whether or not they result in any changes in how agencies respond to allegations against residential workers and whether or not these changes are helpful. A pro forma which could be used to collate relevant information is provided at Appendix 4.

Appendix 1

Key stages in the process of responding to allegation against a worker



Appendix 2

Guidance for providers on conducting further enquiries and internal reviews of practice

At three stages following an allegation and initial enquiries, providers may be called upon to carry out further enquiries with a view to looking at the residential worker's practice.

These are:

- Following initial consideration of a report/allegation/concern by senior child protection staff, senior staff in the provider agency and the child's social worker;
- Following formal or informal interagency discussions which decide not to proceed with a child protection investigation;
- Following the completion of a child protection investigation.

Some allegations may throw up specific practice issues, or children's needs, which are relatively simple to identify and address. Following-up allegations may lead to a review of more complex aspects of practice concerning the individual worker or even the whole residential service. Some situations may only require staff from the provider agency to carry out one or two interviews, followed by discussion of relevant issues at the worker's next supervision meeting.

Others may call for an independent review of practice in the service carried out over several weeks. To differentiate this process from the performance management systems used in the service or agency, the process of carrying out further enquiries, reporting key findings and making subsequent decisions might be termed an 'internal review of practice'.

It is important that the response to any specific situation is proportionate to possible risk of harm to children, so within their policies and procedures, provider agencies may wish to develop more specific guidelines on appropriate levels of response to different levels of concern.

Irrespective of how formal the internal investigation is, its purpose will be to find out whether change is needed to any aspects of the worker's practice and how this relates to life in the service.

Key findings will be reported in an internal investigation report which will be considered either as part of the worker's normal professional supervision or as part of their formal performance appraisal.

Providers should have agreed systems in place on how the detail/and or findings from any such investigation are shared beyond the service. Providers should also be aware that the [Care Commission](#) will have the

right to request this information as part of their regulation of the service.

In some situations this process may result in a recommendation to the provider agency that the worker's performance should be subject to investigation under the provider's disciplinary procedures, which may conclude that the worker's employment be terminated.

However, in many instances the internal review of practice or disciplinary investigation will identify ways of supporting the worker to continue their career and ways in which the service provider can improve the way in which services are being provided.

The provider will have managerial responsibility for deciding how extensive and formal any review should be and senior managers in the provider agency will be responsible for defining:

- what issues are to be addressed in the review,
- who is to be interviewed as part of the process;
- within what timescale the review report should be completed;
- who should carry out the enquiries and prepare the review report.

Unless there are unusually complex issues to be addressed, the internal review report should be completed within four weeks. Should the process extend beyond four weeks, the person conducting the review should inform the senior managers of the reasons for this and a revised date for completion should be agreed.

In deciding who should undertake the internal review the senior manager should weigh up the advantages of involving someone who is already familiar with the service against introducing an element of independence, in which case the review would be carried out by someone who has not previously been involved with the service or the children looked after there.

A suitably qualified practitioner from the provider agency will often be able to offer this element of independence and objectivity. However, in smaller agencies or in situations where the relationship between the worker and agency is contentious, there may be advantages in someone from an outside the agency being commissioned to conduct the enquiries and review.

Within three working days of the senior manager agreeing that an internal review is required, the worker should be informed of this decision and what the review will entail. Workers who have been subject to a child protection investigation should be informed about this at the completion of that investigation.

For other workers, the manager will be responsible for informing them, both verbally and in writing that a review is to be carried out.

Workers should be informed of :

- the reasons for the internal review;
- what the internal investigation will entail;
- the timescale the internal review will be carried out in;
- who will be responsible for completing the internal review report;
- the process for considering the internal review report,
- arrangements for the meeting to review performance and possible outcomes from the review.

Arrangements for internal reviews should take the worker's needs into account. If the worker is not willing or able to co-operate, for example because of illness, the provider should take all possible steps to enable the worker to participate fully in the process. Where appropriate, this should include reconsidering who has been appointed to carry out the internal review. If the worker remains unwilling to participate with internal review, the senior manager should decide when the point has been reached to proceed without the worker's co-operation.

When that point is reached, the worker should be given seven days notice that all relevant information will be considered at a meeting to discuss their performance and whether or not their alleged conduct should be subject to further investigation under the provider's disciplinary procedures. The worker should be informed of the timescales for this process, and again invited to participate fully.

If the worker gives notice of their intention to cease their employment the provider should continue with its internal review or disciplinary investigation as appropriate.

In this situation, the provider should nevertheless continue to investigate the matter as fully as possible and formally dismiss the worker if this is considered to be the appropriate action, which may include notification to the [SSSC](#) or other regulatory body that the worker has left their employment with a possible disciplinary issue pending.

The senior manager should continue to collate the information already known in order to include it on the residential worker's employment record. S/he should immediately notify the relevant senior manager in the local authorities responsible for all the children involved. This notification should be followed up in writing, setting out the date from which the worker has resigned and summarising information collected to date in the course of the investigations and/or further enquiries undertaken as part of the review process.

The internal investigation report should summarise the nature of the allegation, circumstances which may have contributed to it being made and, if applicable, the outcome of the child protection investigation.

Any implications for the worker's current suitability to work in social care,

and training or support needs should be highlighted. It may also be relevant to highlight the implications of the allegation for each individual child who is currently placed in the residential service or may be returning there on completion of the review process. Based on this information, the report should indicate what action is needed to ensure that children placed in the service will be safeguarded and cared for to the standard expected by the provider or placing agency (where these are different).

Recommendations may include:

- the residential worker receives additional training, support or advice on specific aspects of practice;
- the appropriateness of individual children's placements be reviewed with the child's social worker and senior social worker;
- the worker's conduct is subject to investigation under the provider agency's disciplinary procedures and has been notified to the [Care Commission](#) and [SSSC](#).

If there is a decision to refer the worker's alleged conduct for further investigation under the provider's disciplinary procedures the manager should inform local authority's Director of Social Work or Chief Executive immediately. The provider agency should also notify the [Care Commission](#) and the [SSSC](#) of the decision made at this point.

The minute of the meeting should be held in the worker's employment file and be referred to at their next supervision meeting or next annual performance review. The minute of this internal investigation should indicate what progress has been made on implementing agreed actions and/or highlight if further support or training are required.

Procedures followed by local authorities and provider agencies should specify who will be informed when reviews of this kind are completed and who is responsible for informing them.

Local procedures should also include a mechanism for ensuring that adverse findings from this process link into arrangements for referral for possible listing under the [PVG](#) scheme and notification to the [Scottish Social Service Council Conduct Committee](#) or other regulatory body as applicable.

Appendix 3

Glossary of Terms

Child Protection²: ‘Child protection’ is when a child requires protection from ‘child abuse’ or ‘child neglect’. For a child to require protection, it is not required that child abuse or neglect has taken place, but rather a risk assessment has identified a significant *likelihood* or *risk* of abuse or neglect. Equally, in instances where a child may have been abused or neglected but the risk of future abuse has not been identified, the child and their family may require support and recovery services but not a response under child protection measures.

There are circumstances where abuse may have taken place but formal child protection procedures may not be required, for example, where the family have themselves taken protective action. Children who are abused by strangers would not necessarily require a child protection plan, unless the abuse occurred in circumstances that resulted from familial responsibility. For example, if a young child is abused by a stranger, a child protection plan may be required only if the family were in some way responsible for the abuse occurring in the first instance or were unable to adequately protect the child in the future without the support of a child protection plan being in place.

Child Protection Investigation: An investigation carried out in accordance with local authority child protection procedures.

Child’s Social Worker: The social worker responsible for the child.

Codes of Practice: Standards which SSSC issue to social care agencies and workers about how they should fulfil their obligations to protect service users and workers respectively.

Complaint: Any statement which does not imply any significant risk of harm to a child but alleges that worker’s behaviour or practice has not met the standard expected of them either by the agency or another person, for example the child, the child’s parent or another professional.

Concern: Any indication that the care of a child may not be meeting the standard expected of residential workers and/or be having an adverse effect on one or more children.

Designated manager(s): Manager(s) in the local authority where the worker is employed who have been designated as responsible for overseeing allegations against them.

^{2&3} National Guidance for Child Protection in Scotland, the Scottish Government (2010)

Evaluation: Three kinds of evaluation are referred to:

1. hearing from the residential worker about the impact on themselves;
2. giving staff involved in managing the allegation an opportunity to identify what can be learned from the process;
3. A system for collating information on decision making and outcomes, so that agencies and/or local authorities can monitor and learn from current practice.

External Manager: The term ‘external manager’ is used to refer to those people who are responsible for the external line management of the service, including board members in the independent sector.

Host authority: The local authority in which the residential service is located where different from the home authority.

Independent: The term ‘independent’ is used in relation to support and reviews. In most instances this means that the practitioner involved is outside line-management for the child and worker and so brings an element of objectivity. In small agencies or in very complex and contentious situations, it may be helpful for someone outside the provider agency to provide independent support.

Internal Investigation: Investigation carried out by the provider agency or person appointed by them to assess what action needs to be taken following an allegation being made against the residential worker. The investigation can be carried out following a child protection investigation or in situations where the allegation, concern or complaint does not involve abuse to the child, so no child protection investigation is considered necessary.

Internal Investigation meeting: A meeting at which the internal investigation report is considered.

Internal Investigation Report: The report which summarises findings from the investigation and makes recommendations about what action is needed to ensure high standards of residential child care practice are maintained.

Manager: Person responsible for the day to day management of the service named on the Certificate of Registration as provided by the [Care Commission](#) in accordance with Section 9 of the [Regulation of Care \(Scotland\) Act 2001](#).

Manager: The term ‘manager’ is used to refer to those people who are responsible for the day-to-day management of the residential service, including those who hold “registered manager” status with the [Care Commission](#).

Placing authority: The local authority that has placed or looks after the child.

Planning or strategy meeting: An interagency meeting to plan the investigation. A planning meeting should always be convened to plan and review investigations involving the residential worker.

PVG: Where an employer takes disciplinary action to remove an individual from regulated work as a result of harmful behaviour towards a vulnerable person, then they have a duty to refer the individual to [Disclosure Scotland](#) which administers the [Protection of Vulnerable Groups Scheme](#) so that consideration can be given to whether that individual should be barred from any kind of regulated work with vulnerable groups. Without this duty there would be no way of preventing individuals moving undetected to other organisations where they may continue to pose a risk.

Reporter: This is the person who decides whether or not a child or young person, who has been referred to SCRA, should attend a Hearing.

Residential Child Care Service: The term 'residential child care service' is used to denote any service registered by the [Care Commission](#) under the following categories:

- Care home service for children and young people;
- School Care Accommodation Service (including residential special schools and mainstream boarding schools):
- Secure Accommodation Service.

Senior Manager: External manager(s) for residential service in accordance with [Chapter 4, Paragraph 57 of The Children \(Scotland\) Act 1995 Regulations and Guidance – Volume 2 Children Looked after by Local Authorities](#).

Social Worker: The local authority worker who manages the child's care plan.

SSSC: The agency which regulates the social care work force in Scotland.

Draft Record of Initial Decision Making and Outcomes following an allegation against a residential worker.

- 1. Description of the allegation/ concern.**

- 2. Source of the allegation /concern.**

- 3. Personnel involved in initial decision making about the nature of the allegation and appropriate response.**

- 4. Format of discussion or information sharing e.g. by phone, e-mail, in person.**

- 5. Conclusion on the nature of the allegation**
 - a. Allegation includes information that there may have been significant harm or risk of significant harm to the child, as a result of physical, sexual or emotional abuse or neglect (YES/NO).

 - b. Allegation amounts to a worker acting inappropriately or in ways which are considered unsuitable for the child, but not causing or likely to cause significant harm (YES/NO).

 - c. No aspect of the worker's behaviour or practice has been observed to be problematic, but some concerns have been raised about the child's behaviour, lifestyle or frame of mind. For example a child may be reluctant to go home to the residential service or has talked about feeling depressed in the placement (YES/NO).

 - d. Complaint from the child, the child's parent or someone else about some aspect of the worker's behaviour or practice, but the complaint does not imply any risk of significant harm to the child. Examples might include complaints about choice or quality of food, clothing or use of sanctions (YES/NO).

 - e. Allegation is about poor practice, e.g. about a worker's practice around their management of restraint where the worker has practised according to the approved method or

system but which the child has complained about (YES/NO).

Please provide reasons for reaching the above conclusion:

6. Action Taken:

- a. Tried to obtain additional information about the circumstances or nature of the allegation/concern/complaint e.g. by speaking informally with key people (YES/NO).
- b. Convened a multi-agency Initial Referral Discussion (YES/NO).
- c. Referred to police, [Care Commission](#) and [SSSC](#) (YES/NO).
- d. Convene a planning meeting prior to carrying out a child protection investigation (YES/NO).
- e. Carried out child protection investigation (YES/NO).
- f. Matter dealt with through internal review (YES/NO).
- g. Matter dealt with through complaints procedure (YES/NO).
- h. Moved child(ren) named in the allegation from the residential service (YES/NO).
- i. Moved other children looked after in the residential service (YES/NO).

To be completed when the investigation or inquiry has been brought to an end.

7. Outcome from child protection investigation

- a. Criminal charges continue to be processed through criminal justice system and further review of implications for worker's employment is needed (YES/NO).
- b. No criminal case is being pursued, but concerns persist and further review is needed of the implications of some aspects of the worker's practice or conduct (YES/NO).
- c. No concerns have been substantiated about the worker's practice, but the allegation has highlighted or resulted in stress between the worker and one or more of the children looked after in the service placed, so the implications of this need further review (YES/NO).
- d. No concerns have been substantiated about the worker's practice or their relationships with the children currently in the residential service (YES/NO).
- e. Time taken for investigation and enquiries to be completed

and a conclusion reached (i.e. date original allegation was made and date when the whole matter was concluded).

- f. Outcome notified to [Care Commission](#) and [SSSC](#) (YES/NO).

8. Outcome for child's placements:

6. The child remained in the residential placement throughout (YES/NO).
7. The child was removed from the residential placement and returned following the allegation being investigated (YES/NO).
8. The child was removed from the residential placement and will not return there (YES/NO).
9. Other children remained in the residential placement throughout (YES/NO).
10. Other children were removed from the residential placement and returned following the allegation being investigated (YES/NO).
11. Other children were removed their residential placement and will not return there (YES/NO).

9. Outcome for worker:

12. No changes considered to be necessary (YES/NO).
13. Additional training, supervision or support provided by the provider agency (YES/NO).
14. Referred to provider's disciplinary procedures for further investigation (YES/NO).
15. Referral to Disqualified from Working with Children List and SSSC or other regulatory body (YES/NO).

10. Following the completion of the investigation:

16. Was an evaluation/debriefing meeting arranged for the worker (YES/NO)?
17. Was an evaluation/debriefing meeting arranged for staff involved in the investigation (YES/NO)?

Useful links, further reading and helpful contact details

www.sircc.ac.uk: provides detailed information about the Scottish Institute for Residential Child Care, a key organisation providing services to improve the quality of residential care in Scotland.

Contact via <mailto:sircc@strath.ac.uk> or 0141 950 3683

<http://www.scotland.gov.uk/Resource/Doc/334290/0109279.pdf>: provides a link to the Scottish Government's Revised Child Protection Guidance, which aims to improve the safeguarding and protection of Scotland's children and young people.

www.fostering.net: provides information about The Fostering Network Scotland which provides learning and development opportunities for foster carers and fostering services, as well as information and advice for anyone involved in fostering.

Contact via <mailto:fosterlinescotland@fostering.net> or 0141 204 1400

www.carecommission.com: provides useful information about the regulation of care services in Scotland.

Contact via <mailto:enquiries@carecommission.com> or 0845 603 0890

Please note that from April 2011 the Care Commission, Social Work Inspection Agency and HMIE Child Protection team will be superseded by Social Care and Social Work Improvement Scotland [SCSWIS](#)

www.swia.com: provides information about the Social Work Inspection Agency which aims to drive up standards and improve the quality of social work services across Scotland.

Contact via 0131 244 4735

Please note that from April 2011 the Care Commission, Social Work Inspection Agency and HMIE Child Protection team will be superseded by Social Care and Social Work Improvement Scotland [SCSWIS](#)

<http://www.scotland.gov.uk/About/kerelaw>: provides information about the Scottish Government's review of into the abuse which took place in Kerelaw School.

<http://www.scotland.gov.uk/Topics/Health/care/17652>: provides information on the range of national care standards which are used to regulate residential child care services in Scotland.

<http://www.whocaresscotland.org/>: provides detailed information about

Who Cares? Scotland, an independent organisation providing advocacy and information to children who are looked after.

Contact via <mailto:enquiries@whocarescotland.org> or 0141 226 4441

<http://www.scotland.gov.uk/Resource/Doc/310394/0097964.pdf>: provides a copy of the guidance used to manage allegations against foster carers.

<http://www.childline.org.uk/pages/home.aspx>: provides a link to ChildLine which provides a counselling service for children and young people.

Children and young people, or anyone who is concerned about a child, can contact ChildLine on 08001111.



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