

Scottish autism

WHERE AUTISTIC PEOPLE
ARE VALUED

Child Safeguarding Policy

Director Responsible

Director of Autism Services

Author

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9

DOCUMENT HISTORY

Date	Author/Editor	Summary of Changes	Version No.
Mar 2002			1
Apr 2004			2
Jun 2010	Vincent Kennedy	Policy update	3
Jun 2012	Vincent Kennedy	Policy Update	4
Jul 2014	Vincent Kennedy	Policy Update	5
Jan 2017	Karen Gracie	Policy Update	6
Mar 2018	Karen Gracie	Minor addition to policy. <i>“Should there be an indication that a criminal act has occurred then Police must be contacted in the first instance prior to any other agency.”</i>	7
Oct 2018	Karen Gracie	Minor changes to structure of document to ensure consistency with Adult Support and Protection Policy. Changes to Reporting Flowcharts, simplifying into one document.	8
Jun 2020	Karen Gracie	Revision as a result of Project Lightyear implementation	9

Please note the only valid version of the policy is the most recent one. Whilst this document may be printed, the electronic version posted on Source is the controlled copy. Any printed copies of this document are not controlled. As a controlled document, this document should not be saved onto local or network drives but should always be accessed from Source.

CONSULTATION AND RATIFICATION SCHEDULE

Name of Consultative Body	Date of Approval
Board of Trustees	10 th November 2020
Senior Leadership Team	14 th September 2020
Policy Group	20 th August 2020

CROSS REFERENCE TO OTHER POLICIES/STRATEGIES

This policy should be read in conjunction with:	Detail
Policy 1	Adult Support and Protection Policy
Policy 2	Guidelines on the Administration of Medication: Appendix 5 –Guidelines on the Covert Administration of Medicines
Policy 3	New Struan School Anti-Bullying Policy
Policy 4	Relationships and Sexual Well-being
Policy 5	Minimising Restrictive Practice Policy
Policy 6	Recruitment Policy
Policy 7	Relationships with Service Users Policy
Policy 8	Accident/Incident Reporting Policy
Policy 9	Whistleblowing Policy
Policy 10	Duty of Candour
Policy 11	Protection of Vulnerable Groups Policy
Policy 12	Risk Management Policy

EQUALITY & PRIVACY IMPACT ASSESSMENTS

Log Number: 2020/23	Date completed: August 2020
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1 INTRODUCTION

At Scottish Autism we are committed to the people we support, providing excellent care to keep people as safe as is possible. We do this through safeguarding and promoting safe practices to promote all children from harm.

All actions detailed within this policy are underpinned by Scottish Autism values, aiming to support and enable all staff and managers to take the right action when protection concerns occur.

Supporting people is complex and protection concerns will occasionally be raised. We have developed this policy to ensure our response is compassionate, whilst ensuring compliance with our duty to safeguard and report concerns.

2 SAFEGUARDING

Our primary concern is to safeguard children and young people. This is explored, discussed and taught through annual training and ongoing coaching for all staff enabling them to:

- promote the right for children and young people to live in safety and free from harm
- understand the importance of positive practice in order to minimise harm
- develop a sound knowledge of harm and how harm arises
- Know to respond when concerns arise, including reporting procedures.

3 DUTY TO REPORT

Staff have a legal and moral obligation to report protection concerns urgently. Awareness raising about this will be done through training and coaching which will include detailing the reporting process whilst stressing there should be no delay in reporting concerns.

Scottish Autism's duty is to report any protection concern to Social Work and/or Police as the lead agencies in safeguarding children and young people.

For the purposes of this policy and guideline, given our purpose of supporting and educating children and young people, a child is defined as an individual under the age of 18 years as per the *United Nations Convention on the Rights of the Child* and the *Protection of Children (Scotland) Act 2003*.

The *Children (Scotland) Act 1995* defines a child as an individual under the age of 16 years unless certain circumstances apply, including harm, in which case child protection procedures may be extended to cover children with special needs (mental or physical disability) until the age of 18. In addition, The Children and Young People (Scotland) Act 2014 makes provision for young people to remain within their current care setting, if appropriate, until age 25.

The Head Teacher, Residencies Manager and Regional Managers, as Scottish Autism's Lead Protection Officers, should familiarise and adhere to local processes for child protection.

There is a duty to notify the Care Inspectorate of the protection concern, the action taken and outcome from events.

Where concerns have been raised relating to a member of staff's fitness to practice, a referral will be submitted to SSSC.

Where there is evidence to suggest a criminal act has occurred, the Police must be contacted immediately, and before all other agencies.

Following investigation, should an allegation of harm towards a supported individual be found, the member of staff will be referred to Disclosure Scotland.

4 IDENTIFYING AND REPORTING HARM

Incidents of harm or risk of harm can be identified in a number of ways; through the child/young person, members of staff or third parties. Reporting child protection concerns can be complex and stressful for all involved, therefore it is essential all concerns are responded to timeously and with sensitivity.

Staff who identify harm or a risk of harm, should immediately report this to a manager (managers are available 24/7 through On Call), who will, provide support and instruct them to record their concerns in writing, being clear about their concerns. The manager will immediately contact the Head Teacher, Residencies Manager or Regional Manager who will take responsibility for responding to the concerns as per the reporting procedure in appendix 1.

All staff have a professional responsibility to report if they are concerned a supported individual has been harmed or at risk of harm, including when the concern involves families/parents/carers or other supported individuals.

Children and young people, their families, carers and guardians will be made aware of their right, through the Service Agreement and Reviews, to report concerns and will be advised concerns can be raised with any staff/manager within the service who will respond as per the reporting procedure.

A support document (appendix 2), has been developed to support staff when a child/young person discloses harm to them. This will support staff to obtain relevant information without compromising any future investigation.

Third parties referring protection concerns to Scottish Autism should be reassured the concerns will be addressed as per the reporting procedure.

In some circumstances, identifying harm or risk of harm can be straightforward as an act has been observed and it is clear it is a protection concern and needs reported. In other circumstances, identifying the protection concern can be much more complex as it relies on vigilance from staff to note changes in presentation from the child/young person (see handout 2, What is Harm? from Protection Training). In all circumstances, it is essential concerns are reported to a manager to allow further investigation and subsequent safeguarding of children and young people.

Scottish Autism's priority is to safeguard the health and wellbeing of children and young people, therefore if an allegation of harm is raised implicating a member of staff, there may be a requirement, in order to safeguard all, that the member of staff will be suspended from duties, on full pay, to allow a full investigation into events. Support will be provided to the suspended member of staff from HR Department.

Should there be an allegation of harm or risk of harm implicating a volunteer/contractor working for Scottish Autism, this should be immediately reported to Social Work and/or Police to allow for investigation. It may be necessary to suspend volunteers/contractors until the outcome of the investigation is known.

Where concerns are raised relating to potential harm from parent/carers, information should be shared immediately with the Head Teacher, Residencies Manager or Regional Manager who will report to Social Work and/or Police. In these circumstances, staff should be mindful of their communication with parents/carers advising all communication relating to the allegation of harm should be directed to Social Work/Police.

On receiving a report of an allegation of harm, staff should receive assurances from the Head Teacher/Residencies Manager/Regional Manager that appropriate child protection procedures will be implemented immediately. When a staff member is not satisfied with the Head Teacher, Residencies Manager or Regional Manager's response to their concern, the staff member should discuss this with them. If concerns remain, the staff member has every right to make their own report to the child protection agencies and to discuss this action and concern with the Senior Leadership Team.

Responding to allegations of harm can be difficult and stressful therefore staff are offered support from their line managers as well as counselling support through the Employee Assistance Programme.

5 INVESTIGATION

Where concerns relate to Scottish Autism staff, Social Work and/or Police may agree for Scottish Autism to continue and carry out an internal investigation which will inform whether a formal child protection investigation is required by Social Work or criminal proceedings by Police. The detail and outcome from the investigation should be openly shared with Social Work and/or Police.

In circumstances where the protection concerns relate to a family member or third party, Social Work and/or Police will be responsible for undertaking the investigation.

6 TRAINING

Scottish Autism will provide all new staff with Protection Training. Staff working directly with supported individuals will receive this training during their induction which is usually within a month of commencing employment; all other staff will receive this training within six months.

Training will include information on signs and indicators of harm as well as the process to follow when there is a concern that a supported individual is being harmed or is at risk of harm.

Refresher training will be delivered on an annual basis.

7 INCREASED VULNERABILITY

Protection Training allows staff to explore the increased vulnerability and therefore increased risk of harm to children and young people whilst also enabling them to understand the complexities of delivering respectful, compassionate and safe support.

Supported individuals are potentially at a greater risk of harm due to:

- a) intimate care needs
- b) being supported by a number of individuals
- c) the need to sometimes use interventions such as medication and restraint, which may be harmfully applied
- d) a sense of powerlessness due to dependency on others
- e) communication differences which may make it hard to disclose, complain or to be understood
- f) differences with social interactions and limited life experiences which can lead to a lack of awareness in relation to personal boundaries (e.g. physical, sexual and neglect) and of what is considered to be acceptable and unacceptable behaviour
- g) Children and young people who self-harm may mask underlining harm.

8 CHILD SEXUAL EXPLOITATION (CSE)

Child sexual exploitation is a form of child sexual abuse in which a person(s) of any age takes advantage of a power imbalance to force or entice a child into engaging in sexual activity in return for something received by the child from those perpetrating or facilitating the abuse. As with other forms of child sexual abuse, the presence of perceived consent does not undermine the abusive nature of the act.

If someone takes advantage of an imbalance of power to get a child/young person to engage in sexual activity, it is CSE if:

1. The child/young person receives or believes they will receive something they need or want in exchange for the sexual activity.

and/or

2. The perpetrator/facilitator gains financial advantage or enhanced status or power from the abuse.

Where the victim who is offered, promised or given something they need or want, the exchange can include both tangible (money, drugs or alcohol, for example) and intangible rewards (status, protection or perceived receipt of love or affection, for

example). It is critical to remember the unequal power dynamic within which this exchange and to remember that the receipt of something by a child/young person does not make them any less of a victim.

It is also important to note that the prevention of something negative can also fulfil the requirement for exchange, for example, a child who engages in sexual activity to stop someone carrying out a threat to harm his/her family.

Where the gain is solely on the part of the perpetrator/facilitator, it must be something more than sexual gratification to constitute CSE (as opposed to another form of sexual abuse). This could be money, other financial advantage (reduced cost drugs/alcohol or discharge of a debt for example), status or power.

9 DUTY OF CANDOUR

Transparency and learning from incidents is important to Scottish Autism. Where harm has occurred, we meet the requirement to consider Duty of Candour and whether there has been an unintended or unexpected incident resulting in death or harm to an individual. Please refer to the Duty of Candour Policy.

10 BRUISING PROTOCOL

Scottish Autism takes seriously its duty of care to children and young people, therefore, all incidents of bruising should be reported to a manager with these being investigated as per the procedure outlined in appendix 3.

It is important staff are vigilant when supporting individuals and record details of any accidents/incidents/daily living occurrences that could cause bruising. It is, however, acknowledged that many supported individuals enjoy time alone and require less intimate care and therefore, it is not always possible to observe situations that could lead to bruising and/or injury.

11 CONFIDENTIALITY & RECORD KEEPING

GDPR and Data Protection Act 2018 provides a legal framework for managing personal information relating to an individual ensuring that in normal circumstances, only information consented to, can be shared. When issues relating to harm or risk of harm arise, all information can be shared within Scottish Autism and with external agencies such as Social Work, Police and Care Inspectorate.

All records relating to child protection concerns will be managed by the Head Teacher, Residencies Manager or Regional Manager.

12 AVAILABILITY AND ACCESSIBILITY OF POLICY & PROCEDURES

All staff will be made aware of how to access a copy of this policy through Source. Copies of the policy will be made available to all children/young people on request. Scottish Autism will also take reasonable steps to make this policy accessible in alternative formats if required.

13 POLICY REVIEW STATEMENT

This policy will be reviewed every three years or earlier if required due to legislative updates.

This policy and guidance complies with legislation relating to the safeguarding and protection of children and young people:

- *Protection of Children (Scotland) Act 2003*
- *Children (Scotland) Act 1995*
- *Public Service Reform Act 2010*
- *It's Everyone's Job that I'm Alright 2002*
- *Getting it Right for Every Child 2005*
- *Protecting Children – A Shared Responsibility 2003*
- *Keeping Children Safe 2003*
- *National Guidance for Child Protection in Scotland 2014*
- *Children and Young People (Scotland) Act 2014*
- *National Risk Framework 2012*
- *Health (Tobacco, Nicotine etc, and Care) (Scotland) Act 2016*