

SCRA Research Report

Child Protection Orders



Contents

| | Page |
|--|-----------|
| Executive summary | 4 |
| Chapter 1. Introduction | 6 |
| Emergency legal measures to protect children at risk | 6 |
| Child Protection Orders | 7 |
| After the Child Protection Order | 8 |
| Scope of the research | 9 |
| Research aims | 10 |
| Methods | 11 |
| Chapter 2. Trends in Child Protection Orders | 12 |
| Numbers of Child Protection Orders – 1999-00 to 2013-14 | 12 |
| Ages of children with Child Protection Orders made in 2013-14 | 12 |
| Child Protection Orders by area | 13 |
| Chapter 3. Children with Child Protection Orders made between 1 October and 31 December 2013 | 15 |
| Established grounds of referral | 15 |
| Non Disclosure Conditions | 16 |
| Outcomes at six months | 17 |
| Chapter 4. Children already known to services | 18 |
| Before the Child Protection Order | 18 |
| Reasons first known to services | 18 |
| Child Protection Registrations | 18 |
| Referrals to the Reporter | 19 |
| Number of moves | 20 |
| Statutory basis of the children | 21 |
| Siblings | 21 |
| The Child Protection Order | 22 |
| Ages of children | 22 |
| Risks | 22 |
| After the Child Protection Order | 24 |
| Residence | 24 |
| Contact conditions | 24 |
| Plans at six months | 25 |
| Chapter 5. Children identified at risk pre-birth and Child Protection Orders Made at or shortly after birth | 27 |
| Before the Child Protection Order | 27 |
| Siblings | 27 |
| The Child Protection Order | 28 |
| After the Child Protection Order | 28 |
| Contact conditions | 29 |
| Further referrals | 30 |
| Plans at six months | 30 |

| | |
|---|-----------|
| Chapter 6. Children not previously known to services or the Reporter | 31 |
| After the Child Protection Order | 31 |
| Chapter 7. Discussion | 32 |
| Questions for policy and practice | 33 |
| References | 35 |
| Glossary of terms | 37 |
| Annex 1. Research variables | 39 |
| List of figures | |
| Figure 1. Numbers of children with CPOs made 1999-00 to 2013-14 | 10 |
| Figure 2. Ages (years) and gender of children with CPOs made between 1 April 2013 to 31 March 2014 | 13 |
| Figure 3. Non Disclosure conditions | 16 |
| Figure 4. Number of moves before the CPO | 19 |
| List of tables | |
| Table 1. Number of children under 30 days old with CPOs made between 1 April 2013 to 31 March 2014 | 13 |
| Table 2. Number of children with CPOs made in 2013-14 and between 1 October and 31 December 2013, by local authority area | 14 |
| Table 3. Children previously known to services, not known, and identified pre-birth with CPO at birth | 15 |
| Table 4. Established grounds of referral | 16 |
| Table 5. Agencies that first identified risk to the child | 18 |
| Table 6. Grounds of first referrals to the Reporter | 19 |
| Table 7. Reporter decisions on first referrals | 19 |
| Table 8. Length of time between first referral to the Reporter and CPO | 20 |
| Table 9. Reporter decisions on referrals in the 3 months before the CPO | 20 |
| Table 10. Ages of children known to services when CPOs made | 22 |
| Table 11. Risks identified in CPO applications of children already known to services | 23 |
| Table 12. Agencies that identified the CPO risk for children already known to services | 23 |
| Table 13. Time from CPO made to grounds established | |
| Table 14. Residence conditions of CPOs and CSOs | 24 |
| Table 15. Contact conditions with parents for children previously known to services | 25 |
| Table 16. Agencies that first identified risk to unborn child | 21 |
| Table 17. Sibling placements before birth of CPO child | 28 |
| Table 18. Risks identified in CPO applications of children with CPOs at birth | 28 |
| Table 19. Residence conditions immediately before CPOs, at CPOs and CSOs/ICSOs | 29 |
| Table 20. Contact conditions with parents for children with CPOs at birth | 29 |

Executive Summary

In Scotland, the most commonly used legal measure to protect a child in an emergency situation is a Child Protection Order (CPO) made by the Sheriff. The tests for making a CPO are high – the child must be suffering or threatened with ‘significant’ harm, and that the making of the Order must also be ‘necessary’ to protect the child from the actual or threatened significant harm. The making of a CPO requires removal of a child from (usually) his or her parents, it also determines whether that child should have contact with their parents and what that contact should be, and if the whereabouts of the child should be disclosed to their parents. In practice, a CPO should be implemented immediately.

CPOs were made for 734 children in 2013-14. The numbers of CPOs have increased since their introduction, particularly for very young children. There are variations in the numbers of CPOs, with three areas accounting for almost half (Glasgow, Fife and Dundee), and it is not clear why such variation exists.

This research was carried out to look at why children come to have CPOs made and their outcomes following the CPOs. SCRA’s case information on 175 children, who had CPOs made between 1 October and 31 December 2013, formed the basis of this research which covered: 1. Child’s history prior to the CPO, 2. the CPO, and 3. the six months after the CPO.

Three groups of children were identified: 1. those already known to services or the Children’s Reporter; 2. those identified pre-birth and CPOs made at or shortly after birth; and 3. children not previously known to services.

In this research, most children (66%, n=116) were already known to services, on average for just over four years before the CPOs. 61% of these children had been on the Child Protection Register (CPR). 77% had previously been referred to the Reporter, and the most common first grounds of referral related to lack of parental care (60% of cases). 40% had previously been removed from their parent(s)’ care, and 49% had siblings who were accommodated. Six months after the CPOs, most children previously known to services went onto have compulsory measures of supervision (85%) and 65% did not return to their parent(s)’ care, and there were permanence plans for 30% of them.

The second group were those identified pre-birth (26% of children, n=45), where plans were put in place and CPOs made at or shortly after their births. Pre-birth Child Protection Case Conferences were held and children were placed on the CPR on average two months before their births. These children’s families were already involved with services, as 89% of the parents who had other children had already had at least one child removed from their care. The planning before birth and actions taken after seem to have been necessary and effective. Within six months of their births, 98% of children were on compulsory measures of supervision, 87% had not been returned to their parent(s)’ care and there were permanence plans for 58% of them.

Similarly, for the fourteen children (8%) not previously known, services acted very quickly and effectively with CPOs being made on average within two days of risks being identified. Six months after the CPOs nine children had not been returned to their parents and there were permanence plans in place for them.

For most of the children in this research, the CPOs led to compulsory measures of supervision (85%) and placement away from parent(s) (70%), and for 40% permanence plans. This implies that it was necessary for most of the children to be removed from the risks presented by their parent(s).

Questions for policy and practice

This research raises a number of questions about decision making and interventions to protect children at risk:

- Could risks have been identified at an earlier stage and interventions planned to protect the child without the escalation of concerns or exposure to new risks that led to the emergency intervention of a CPO, particularly in neglect cases?
- How can the differences between local authorities in the numbers of CPOs be explained?
- Is the evidence provided to Children's Reporter of the quality needed to make the right decision for the child?
- How can the timescales from CPO to the grounds for referral being established be reduced?
- How do delays in Reporter decision making and the establishment of grounds affect planning for and securing the best outcomes for a child?
- How can a better shared level of understanding be brought about so that all professionals understand and agree thresholds for intervention?
- How does the availability of resources impact on the level of early intervention?
- What will need to be different in the practice of named persons and lead professionals to lead to earlier intervention which may obviate the need for CPOs, while ensuring that children are safeguarded?

Chapter 1. Introduction

In Scotland, there are 11, 436 children who have been removed from the family home and live in the care of relatives, foster carers, residential care (including secure accommodation), or with prospective adopters (Scottish Government, 2015). For majority (6,257 children) the legal route that led to them being looked after and accommodated was through the Children's Hearings System and Compulsory Supervision Orders (CSOs) made by Children's Hearings (SCRA, 2014). CSOs are medium to long-term measures made after assessment and planning.

In some cases, urgent action may be required to protect a child from actual or likely significant harm and/or until compulsory measures of supervision can be put in place by the Hearings System. These are cases where the risk of significant harm, or the possibility of the parents or carers removing the child without notice, makes it necessary for agencies to take immediate legal action for the child's protection (Scottish Government, 2014).

Emergency legal measures to protect children at risk

The most commonly used measure to protect a child in an emergency situation is a Child Protection Order (CPO) made by the Sheriff¹. CPOs were made for 734 children in 2013-14 (SCRA, 2014).

CPOs were introduced under the Children (Scotland) Act 1995 (the 1995 Act), following the Orkney case and the publication of the inquiry report (the Clyde Report) (House of Commons, 1992); and form the basis of the current measures found in the Children's Hearings (Scotland) Act 2011 (the 2011 Act). CPOs were introduced to ensure there was clear legal authority and professional justification for the removal of a child from home, and to allow that the granting of the Order could be challenged.

The other emergency measures are (SCRA, 2015):

- Where it is not practicable to apply to the Sheriff for a CPO, application can be made to a Justice of the Peace; these Orders last for 24 hours after which either a CPO is made by a Sheriff or the child returns home².
- The police have the power to remove a child to a place of safety and keep the child there³. This provision also lasts for 24 hours and allows time for a CPO application to be made to the Sheriff.
- A child may request refuge, and if the child appears at risk of harm, may be provided with short term refuge by the local authority or a person who provides a care home service⁴.
- A local authority may apply to the Sheriff for a Child Assessment Order to allow an assessment of a child's health or development or the way a child has been or is being treated or neglected⁵.

¹ Section 39(1) 2011 Act

² Section 55 2011 Act

³ Section 56 2011 Act

⁴ Section 38(1) 1995 Act

⁵ Section 35(1) and (2) 2011 Act

There are also other times when a child's parents or carers may agree on a voluntary basis to a local authority social work service providing the child with accommodation and looking after them until concerns about the child can be clarified; or that others in the child's extended family could look after the child while agencies carry out further inquiries or assessment⁶.

Child Protection Orders

An application for a CPO may be made by a local authority or any other person, and the Sheriff may make the Order if satisfied⁷:

(a) that there are reasonable grounds to believe that the child⁸ :-

- (i) has been or is being so treated in such a way that he or she is suffering or is likely to suffer significant harm, or
- (ii) has been or is being neglected and as a result of the neglect the child is suffering or is likely to suffer significant harm, or
- (iii) is likely to suffer significant harm if the child is not removed to and kept in a place of safety, or
- (iv) is likely to suffer significant harm if the child does not remain in the place at which the child is staying (whether or not the child is resident there), AND

(b) the Order is necessary to protect the child from that harm or from other harm.

Both paragraphs (a) and (b) must be met⁹.

The CPO may require or authorise one or more of the following actions:

- (a) require any person in a position to do so to produce the child to a specified person,
- (b) authorise the removal of the child by the specified person to a place of safety and the keeping of the child in that place,
- (c) authorise the prevention of the removal of the child from any place where he or she is staying,
- (d) authorise the carrying out of an assessment either of the child's health or development or of the way in which he or she has been or is being treated or neglected¹⁰.

The Sheriff must also when making the CPO consider whether to include certain directions in the Order, namely an 'information non-disclosure direction'¹¹, a 'contact direction'¹², and a 'parental responsibilities and rights direction'¹³. Each of these directions cease to have effect when the CPO ceases to have effect; that is when it terminated by a Children's Hearing or when it is terminated, removed or varied by the Sheriff¹⁴.

In practice, attempts should be made to implement a CPO immediately.

⁶ Section 25 1995 Act

⁷ Section 39 2011 Act

⁸ From Norrie (2013) – "Child" does not include an unborn child.... The application may well be made before delivery of the child, but it may not be dealt with until after the child is born alive.'

⁹ Norrie, K. McK. (2013). Children's Hearings in Scotland. 3rd edition. W. Green, Edinburgh.

¹⁰ Section 37(2) 2011 Act

¹¹ Section 40 2011 Act

¹² Section 40(2) 2011 Act

¹³ Section 41(2) 2011 Act

¹⁴ Section 42 2011 Act

A CPO can therefore be seen as an extreme measure taken to protect a child. It requires removal of a child immediately from (usually) his or her parents, determines whether that child should have contact with their parents and what that contact should be, and if the whereabouts of the child should be disclosed to their parents. The tests for making a CPO are high – the child must be suffering or threatened with ‘significant’ harm, and that the making of the Order must also be ‘necessary’ to protect the child from the actual or threatened significant harm¹⁰. This is especially so with new-born babies. The European Court of Human Rights has said: ‘the taking of a new-born baby into public care at the moment of its birth is an extraordinarily harsh measure. There must be extraordinarily compelling reasons before a baby can be physically removed from its mother, against her will, immediately after birth’¹⁵.

After the Child Protection Order

When a CPO is in force and the child has been taken to a place of safety, the Children’s Reporter must arrange for a Children’s Hearing to take place to review the CPO on the 2nd working day after the Order was made¹⁶.

Following the 2nd working day Hearing, if the CPO remains in force, the Reporter must make a determination on the referral and whether to arrange an 8th working day Hearing.

The grounds of referral, prepared by the Reporter, are considered at the 8th working day Hearing. This must be held no later than the 8th working day starting from when either the day after when the CPO was made or the day after the child was removed to a place of safety.

The CPO ceases to have effect at the 8th working day Hearing. The Hearing must consider whether longer-term measures are required to protect the child. If there are, then the usual outcome is for the Hearing to make an Interim Compulsory Supervision Order (ICSO).

The grounds of referral are presented to the 8th working day Hearing (box 1 – for section 67 grounds). These must be accepted by the child and their parents, or if denied or not understood (e.g. young children) an application be made to the Sheriff to establish the grounds.

No CSO can be made by a Hearing unless one or more of the section 67 grounds are accepted or established (Box 1). Conditions can be made to an ICSO and CSO, most usually regarding where the child is to stay, contact with parents and other family members, and Non Disclosure conditions.

CSOs must be regularly reviewed by Hearings - every twelve months or earlier if a review is requested by the local authority, parent(s) or child. The Reporter may also arrange an earlier review Hearing to consider new or additional section 67 grounds. The review Hearing may continue the CSO unvaried or with variation to the

¹⁵ In: Norrie, K, McK. (2013). Page 273. Children’s Hearings in Scotland. 3rd edition. W. Green, Edinburgh

¹⁶ Unless there has been an application to terminate or vary the CPO.

conditions, or may terminate the CSO if it considers that compulsory measures of supervision are no longer necessary.

Box 1. Section 67 grounds¹⁷

- (a) the child is likely to suffer unnecessarily, or the health or development of the child is likely to be seriously impaired, due to a lack of parental care,
- (b) a schedule 1 offence has been committed in respect of the child,
- (c) the child has, or is likely to have, a close connection with a person who has committed a schedule 1 offence,
- (d) the child is, or is likely to become, a member of the same household as a child in respect of whom a schedule 1 offence has been committed,
- (e) the child is being, or is likely to be, exposed to persons whose conduct is (or has been) such that it is likely that –
 - (i) the child has been abused or harmed, or
 - (ii) the child's health, safety or development will be seriously adversely affected,
- (f) the child has, or is likely to have, a close connection with a person who has carried out domestic abuse,
- (g) the child has, or is likely to have, a close connection with a person who has committed an offence under Part 1, 4, or 5 of the Sexual Offences (Scotland) Act 2009 (asp 9),
- (h) the child is being provided with accommodation by a local authority under section 25 of the 1995 Act and any special measures are needed to support the child,
- (i) a permanence order is in force in respect of the child and special measures are needed to support the child,
- (j) the child has committed an offence,
- (k) the child has misused alcohol,
- (l) the child has misused a drug (whether or not a controlled drug),
- (m) the child's conduct has had, or is likely to have, a serious adverse effect on the health safety or development of the child or another person,
- (n) the child is beyond the control of a relevant person,
- (o) the child has failed without reasonable excuse to attend regularly at school,
- (p) the child –
 - (i) has been, is being, or is likely to be, subjected to physical, emotional or other pressure to enter into a civil partnership, or
 - (ii) is, or is likely to become, a member of the same household as such a child.
- (q) the child –
 - (i) has been, is being or is likely to be forced into a marriage (that expression being construed in accordance with section 1 of the Forced Marriage etc. (Protection and Jurisdiction) (Scotland) Act 2011 (asp 15) or,
 - (ii) is, or is likely to become, a member of the same household as such a child.

Scope of this research

There has been little research on the use of CPOs and outcomes for children after the Orders have been made. Francis and co-workers' (2006) comprehensive study examined trends in CPOs between 1999 and 2005 in relation to issues in child protection practice, including: risk assessment and the models of assessment used in social work practice; thresholds of intervention and definitions of 'significant harm'; and the effectiveness of inter-agency collaboration and information sharing. SCRA's study on forty cases of Edinburgh children who had CPOs made in 2006-07

¹⁷ Section 67(2) 2011 Act

examined family characteristics, factors that influenced the granting of the CPO, and outcomes following the CPO (SCRA, 2008), and another SCRA study looked at trends in children aged under two years old with CPOs made between 2005-06 and 2008-09 (SCRA, 2009).

These studies were carried out before the introduction of the GIRFEC (Getting It Right For Every Child) approach (Scottish Government, 2012) and associated guidance (Calder *et al*, 2012) to improve child protection services and practices in Scotland.

A pilot study carried out by SCRA on thirty CPOs made between May and September 2013 in one local authority area, identified three groups of children who had CPOs made:

1. Children identified at risk pre-birth, and CPOs made at or shortly after birth,
2. Children already known to services and, in some cases, already referred to the Reporter and on compulsory measures of supervision,
3. Children not previously known to services or the Reporter.

Each group was found to be different in terms of why the CPOs were made. For the first group, there had usually been a pre-birth assessment and decision made to apply for the CPO at birth, i.e. the CPO was planned. For the second group, it was not always clear what had changed in the child's circumstances to trigger the CPO or why the child had remained at home when agencies had been aware of the risks. CPOs were generally made for the third group in reaction to a crisis or the child coming to the attention of services indirectly (e.g. parental offending)¹⁸.

Research aims

This research aimed to look in greater depth at the reasons why children come to have CPOs made and their outcomes following the CPOs. It examined the cases of 175 children across Scotland who had CPOs made in the period 1 October to 31 December 2013¹⁹, and covered:

- Child's history prior to the CPO: involvement with services and the Hearings System, and looked after status prior to the CPO. This includes any siblings, and the child's family's involvement with services and the Hearings System.
- The CPO: Why the CPO was applied for and made, and the contact conditions attached to the CPO.
- After the CPO: Decision making by Hearings following the CPO, outcomes for the child after six months, and any future long-term plans for the child including permanence.

In addition, trends in CPOs are examined in Chapter 2.

¹⁸ SCRA (2014). Child Protection Orders – Fife. Internal report - unpublished

¹⁹ There were 176 children with CPOs made between 1 October and 31 December 2013.

Methods

A list of all the 176 children in Scotland who had CPOs made in the period 1 October to 31 December 2013 was produced from SCRA's Data Warehouse. 175 of these children comprised the research sample²⁰. This period was used to allow the children's cases to be followed for six months and more after the CPOs were made.

Each child's case was separately examined using the information held by SCRA in its Case Management System (CMS). The CMS holds all reports, correspondence, decisions made by Reporters and Children's Hearings and the reasons for them, and statutory documentation on Orders made by courts and Hearings. The CMS is a secure system which only trained SCRA staff are permitted access to.

The research variables were developed from those used in the pilot study, and covered three periods: 1. Child's history prior to CPO, 2. the CPO, and 3. decisions and outcomes in the six months after the CPO was made. The variables are provided at Annex 1.

Data were collected from CMS between October 2014 and January 2015.

Data were recorded in an anonymous format and held on secure encrypted systems to which only the SCRA Research Team have access. All members of the Research Team have Enhanced Disclosure clearance.

Data were analysed using MS Excel.

Trends data were obtained from SCRA's data warehouse and those published in SCRA's Official Statistics.

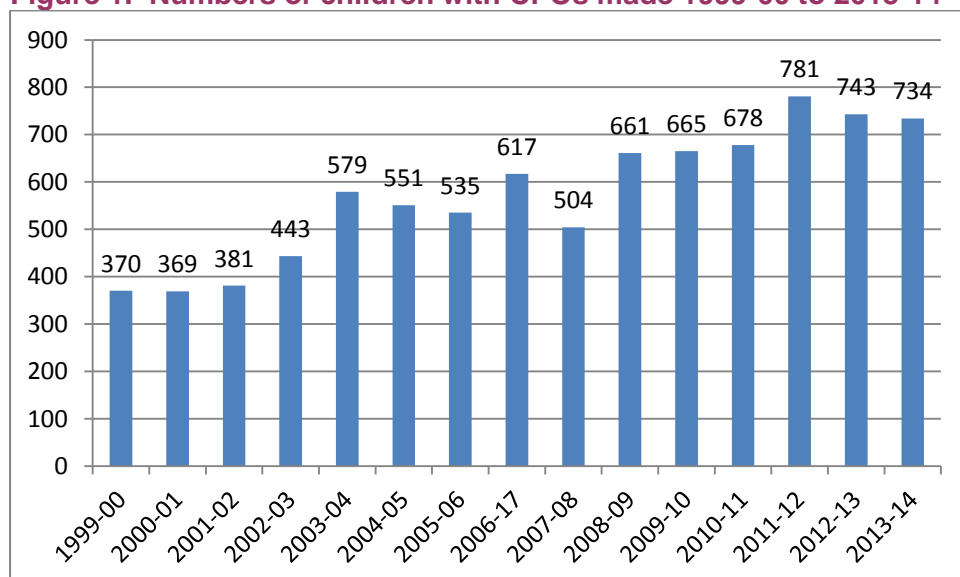
²⁰ One case was not included as there were no reports or documents saved in the child's file on SCRA's Case Management System.

Chapter 2. Trends in Child Protection Orders

Numbers of Child Protection Orders – 1999-00 to 2013-14

The numbers of children with CPOs made has increased over the last fifteen years (Figure 1).

Figure 1. Numbers of children with CPOs made 1999-00 to 2013-14^{18,21}



Most children who have CPOs are not returned to their parents' care after the CPOs and go on to be on compulsory measures of supervision.

An analysis of CPOs made in 2011-12 found that most of these children (88%) went on to have Supervision Requirements made by Children's Hearings. And that the majority of these Supervision Requirements (79%) required that the children reside away from home (SCRA, 2012).

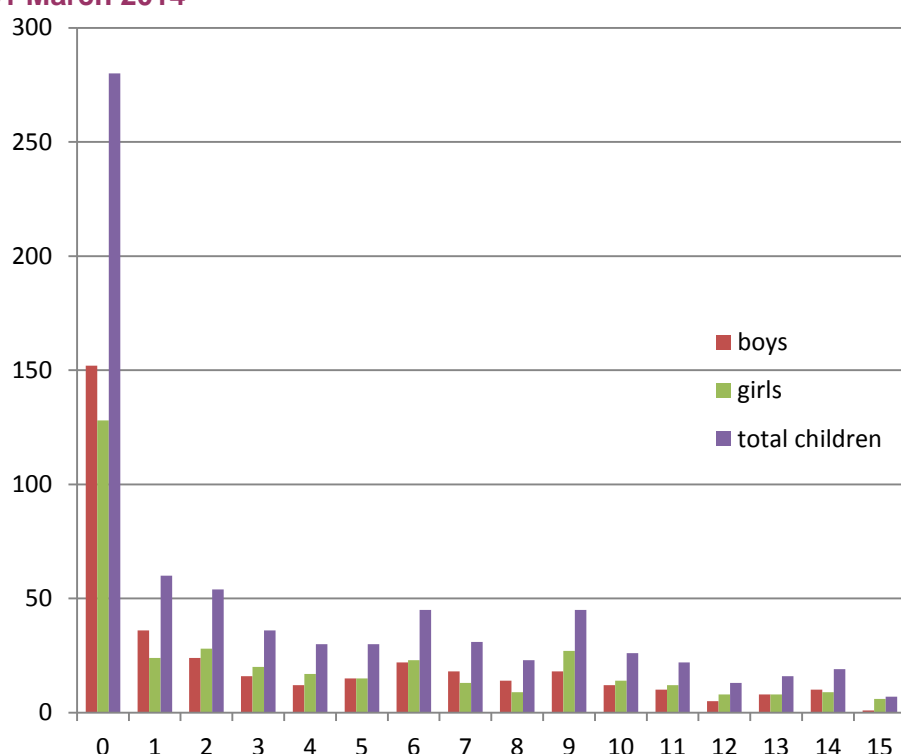
Ages of children with Child Protection Orders made in 2013-14

In 2013-14, 734 children and young people had CPOs made – 359 girls and 372 boys²². Children and young people of all ages had CPOs made. Almost half (339 children, 46%) were under two years old, and the most common age was under a year old (280 children, 38%) (Figure 2) (SCRA, 2014).

²¹ SCRA Online Statistical Dashboard 2013-14

²² The gender of three children was not recorded.

Figure 2. Ages (years) and gender of children with CPOs made between 1 April 2013 to 31 March 2014



164 children were under thirty days old when the CPOs were made, and 131 of these children were under seven days old (Table 1).

Table 1. Number of children under 30 days old with CPOs made between 1 April 2013 to 31 March 2014²⁴

| Age (days) | Children with CPOs made | | | | |
|---------------|-------------------------|------|-------|--------------------|--------------------------|
| | Girls | Boys | Total | % under 1 year old | % all children with CPOs |
| Under 7 days | 64 | 67 | 131 | 47% | 17% |
| Under 30 days | 74 | 90 | 164 | 59% | 18% |

Child Protection Orders by area

The numbers of children with CPOs made in 2013-14 varied across local authority areas (Table 2). The areas with the highest numbers of CPOs made were Glasgow - 149 children (20% of CPOs), Fife – 112 children (15% of CPOs), and Dundee – 79 children (11% of CPOs). There were two areas with no CPOs made – Argyll & Bute and East Renfrewshire.

Table 2. Number of children with CPOs made in 2013-14 and between 1 October and 31 December 2013, by local authority area

| Local authority area | Number of children with CPOs made | |
|----------------------|-----------------------------------|--|
| | 2013-14 ²³ | 1 October - 31 December 2013 (research sample) |
| Aberdeen City | 19 | <5 |
| Aberdeenshire | <5 | <5 |
| Angus | 14 | <5 |
| Argyll & Bute | 0 | 0 |
| Clackmannanshire | 11 | <5 |
| Dumfries & Galloway | 12 | <5 |
| Dundee | 79 | 16 |
| East Ayrshire | 17 | <5 |
| East Dunbartonshire | 5 | 5 |
| East Lothian | <5 | 0 |
| Edinburgh | 50 | 10 |
| East Renfrewshire | 0 | 0 |
| Eilean Siar | <5 | 0 |
| Falkirk | 23 | 10 |
| Fife | 112 | 30 |
| Glasgow | 149 | 30 |
| Highland | 34 | 11 |
| Inverclyde | 13 | 0 |
| Midlothian | 8 | <5 |
| Moray | 7 | 0 |
| North Ayrshire | 22 | 6 |
| North Lanarkshire | 21 | 5 |
| Orkney | 10 | 5 |
| Perth & Kinross | 13 | <5 |
| Renfrewshire | 16 | <5 |
| Scottish Borders | 9 | <5 |
| Shetland | <5 | 0 |
| South Ayrshire | 11 | <5 |
| South Lanarkshire | 33 | 8 |
| Stirling | 23 | 5 |
| West Dunbartonshire | <5 | 0 |
| West Lothian | 16 | 7 |
| Scotland | 734 | 176 |

Dundee, Fife and Glasgow were also the areas most represented in the research sample, with Dundee having 9% of children with CPOs made, and Fife and Glasgow each with 17% of children with CPOs made (Tables 2 and 3).

²³ SCRA (2014). Online Statistics 2013-14

Chapter 3. Children with Child Protection Orders made between 1 October and 31 December 2013

81 of the children in this research are girls and 94 are boys.

- 26% (n=45) - children identified at risk pre-birth, and CPOs made at or shortly after birth (i.e. pre-birth group)
- 66% (n=116) - children already known to services and, in some cases, already referred to the Reporter and on compulsory measures of supervision (i.e. known group)
- 8% (n=14) - children not previously known to services or the Reporter (i.e. not known group) (Table 3).

43% (n=76) of them are from Dundee, Fife and Glasgow (Table 3).

Table 3. Children previously known to services, not known, and identified pre-birth with CPO at birth

| LA areas | Number of children | | | |
|----------------------------------|--------------------|----------------|------------------|-------------------|
| | Pre-birth | Not known | Known | Total |
| Dundee, Fife, Glasgow | 17 (22%) | 10 (13%) | 49 (65%) | 76 (43%) |
| All except Dundee, Fife, Glasgow | 28 (28%) | 4 (4%) | 67 (67%) | 99 (57%) |
| All | 45 (26%) | 14 (8%) | 116 (66%) | 175 (100%) |

2nd working day Hearings - Hearings decided to continue 163 of the 175 CPOs (93%). Six CPOs were terminated, and for six there were applications to review or revoke the CPOs.

8th working day Hearings - 144 ICSOs, six IVCSOs and three warrants were made, and two CSOs were continued. Grounds were referred to the Sheriff to be established in 163 cases.

Established grounds of referral

Section 67 grounds were established after the CPOs in 142 cases (81%). In addition, there were four cases where there were already established grounds under the 1995 Act and three where grounds had not yet been established at the time of data collection (Table 4).

The most common established ground (or in combination with other grounds) related to lack of parental care (77% of established grounds).

Table 4. Established grounds of referral

| Established grounds | Number of children |
|---|---------------------------|
| 2011 (a) lack of parental care | 78 |
| 2011 (b) a Schedule 1 offence has been committed in respect of that child | 11 |
| 2011 (c) close connection with a person who has committed a Schedule 1 offence | 5 |
| 2011 (d) same household as a child in respect of whom a schedule 1 offence has been committed | 3 |
| 2011 (e) exposed to persons whose conduct is/has or is likely that the child will be abused or harmed, or the child's health, safety or development will be put at risk | 1 |
| 2011 (f) close connection with a person who has carried out domestic abuse | 4 |
| 2011 (m) the child's conduct has had, or is likely to have, a serious adverse effect on the health safety or development of the child or another person | 1 |
| 2011 (a) and (b) | 4 |
| 2011 (a) and (c) | 1 |
| 2011 (a) and (e) | 5 |
| 2011 (a) and (f) | 8 |
| 2011 (b) and (c) | 1 |
| 2011 (b) and (d) | 3 |
| 2011 (b) and (f) | 1 |
| 2011 (c) and (f) | 1 |
| 2011 (a), (b) and (d) | 2 |
| 2011 (a), (b) and (c) | 8 |
| 2011 (a), (c) and (d) | 2 |
| 2011 (a), (e) and (f) | 1 |
| Not evident | 2 |
| Total | 142 |
| Already established: | |
| 1995 (c) lack of parental care | 2 |
| 1995 (a) beyond control of any relevant person | 1 |
| 1995 (c) and (d) victim of Schedule 1 offence | 1 |
| Total | 4 |

Grounds were abandoned in fourteen cases, and were not established for three cases. In one case the Reporter decision on the CPO was insufficient evidence and it was not brought to a 8th working day Hearing.

Non Disclosure conditions

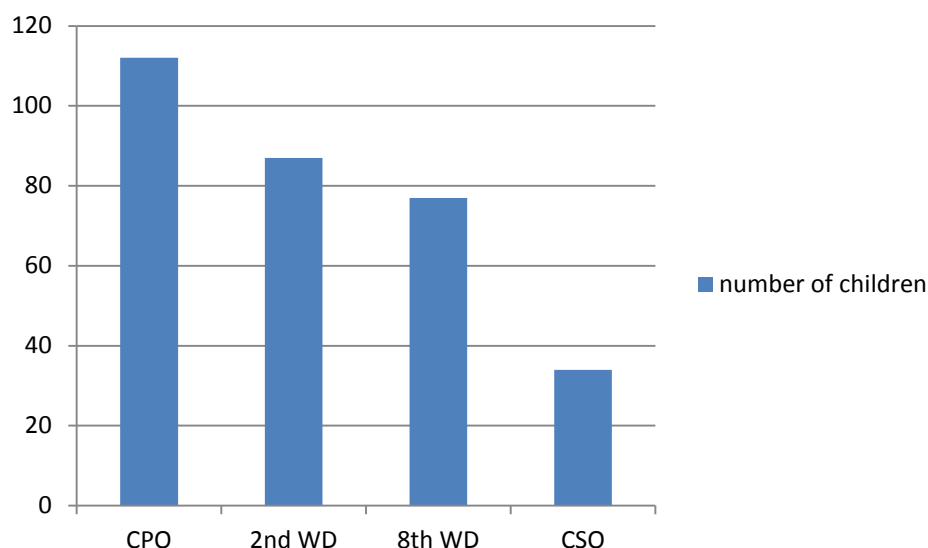
The Sheriff when making a CPO must consider whether to include a Non Disclosure Direction²⁴. Children's Hearings may decide not to disclose to any person any information about the child or about the child's case if disclosure of that information to that person would be likely to cause significant harm to the child²⁵. This is usually to prevent the child's parent(s) from knowing where the child is residing.

²⁴ Section 40 Children's Hearings (Scotland) Act 2011

²⁵ Section 178 Children's Hearings (Scotland) Act 2011

Sheriffs made Non Disclosure Directions in 112 of the 175 CPOs (64%). 163 of these CPOs were continued at 2nd working day Hearings, and the Non Disclosure conditions were continued for 87 CPOs (53%). After six months, 34 Non Disclosure Orders were in place – 23% of the 149 CSOs and ICSOs (Figure 3).

Figure 3. Non Disclosure conditions



Outcomes at six months

Most children (85%) remained on compulsory measures of supervision: CSOs – 126 children and ICSOs – 23 children. For 24 children (14%), there were no measures in place (and for two this information was not available).

- 123 children (70%) were not in their parent(s)'s care.
- 52 children (30%) had returned to their parent(s) – to fathers (twenty children), to mothers (twenty children), to both parents (twelve children).

There were permanence plans for seventy of the children (40%).

Chapter 4. Children already known to services

Before the Child Protection Order

116 children (66%) had some involvement with services before their CPOs were applied for and made. The average time that children had been known to services before the CPOs was four years and four months.

Reasons first known to services

A variety of agencies first identified the risks to the child, with the police (28%), health sources (25%) and multiagency groups (20%) the most common (Table 5).

Table 5. Agencies that first identified risk to child

| Agency that identified the CPO risk | Number of children |
|---|--------------------|
| Police | 32 |
| Multi-agency | 29 |
| Health (hospital -9, Health Visitor - 5, other – 9) | 23 |
| Social work | 19 |
| School | 3 |
| 3rd sector (Women's Aid – 2; Surestart – 1) | 3 |
| Family member | 1 |
| Not evident | 6 |
| Total | 116 |

The average age of the children when first known to services was sixteen months. Twenty children (17%) were first known to services before their births as pre-birth Child Protection Case Conferences (CPCCs) had been held.

For children who became involved with services after their birth, the reasons included domestic violence, physical abuse/ unexplained injuries to the child or siblings, parent(s) violence/ aggressive behaviour, parent(s) drug and/or alcohol use, parent(s) mental health, parenting capacity, neglect of child and/or siblings, and sexual abuse of the child.

For nineteen children (16%) the referral to the Reporter was the first record of the child's involvement with services (according to SCRA records). Sixteen of these referrals were from the police and three were from social work. Reporter decisions on these referrals were:

- No action – nine referrals
- Insufficient evidence – five referrals
- Arrange Hearing – three referrals
- No action current measures – two referrals.

Child Protection Registrations

71 children (61%) had Child Protection Registrations (CPRs) before the CPOs. The average time between first CPR and the CPO was just over two years (24.6 months).

61 children had been registered once, nine children had two separate CPRs and one child had three separate CPRs, before the CPOs.

39 children (34%) had current CPRs when the CPOs applications were made. Seventeen of these CPRs were made just before or at the same time as the CPO applications.

Referrals to the Reporter

89 children (77%) had previously been referred to the Reporter²⁶. Most first referrals (60%) were under s52(2)(c) of the 1995 Act²⁷ or s67(2)(a) of the 2011 Act and thus related to lack of parental care/neglect (Table 6).

Table 6. Grounds of first referral to the Reporter

| Grounds of 1st referral | Number of children |
|---|---------------------------|
| 1995 (c) lack of parental care | 36 |
| 1995 (d) victim of Schedule 1 offence | 17 |
| 1995 (b) bad associations or moral danger | 5 |
| 1995 (f) member of the same household as a Schedule 1 offence | 3 |
| 1995 (a) beyond control of any relevant person | 1 |
| 1995 (f) member of the same household as a victim of a Schedule 1 offence | 1 |
| 1995 (c) and (d) | 4 |
| 1995 (c) and (e) | 1 |
| 2011 (a) lack of parental care | 11 |
| 2011 (f) close connection with a person who has carried out domestic abuse | 3 |
| 2011 (b) a Schedule 1 offence has been committed in respect of that child | 3 |
| 2011 (c) close connection with a person who has committed a Schedule 1 offence | 1 |
| 2011 (a) and (e) exposed to persons whose conduct is/has or is likely that the child will be abused or harmed, or the child's health, safety or development will be put at risk | 1 |
| Not evident | 2 |
| Total | 89 |

Reporter decisions on first referrals are shown in Table 7.

Table 7. Reporter decisions on first referrals

| Reporter decision on 1st referral | Number of children |
|---|---------------------------|
| No action | 27 |
| Insufficient evidence | 21 |
| Arrange Hearing | 17 |
| No action refer to local authority | 11 |
| No action current measures | 9* |
| No action family have taken action | 2 |
| Not evident | 1 |
| Open/ no decision made yet | 1 |
| Total | 89 |

* Four of the nine children where the Reporter decision was 'No action – current measures', the referrals had been made before the CPOs and the Reporter decisions made after the CPOs.

²⁶ This includes the 19 children first recorded as known to services through referral to the Reporter.

²⁷ The s67 grounds came into effect in June 2013 with the implementation of the 2011 Act.

The average length of time from first referral to the Reporter to the CPO was almost four years (47.4 months).

65 children (56%) had been first referred to the Reporter over a year before the CPOs were made. Seven children (6%) had been first referred over ten years before the CPOs (Table 8). Of the 24 children (21%) with first referrals less than a year before the CPOs, twelve of these referrals were made less than three months before the CPOs.

Table 8. Length of time between first referral to Reporter and CPO

| Time between 1st referral and CPO (years) | Number of children |
|---|---------------------------|
| 0-1 | 24 |
| 1-2 | 12 |
| 2-3 | 9 |
| 3-4 | 7 |
| 4-5 | 5 |
| 5-6 | 5 |
| 6-7 | 8 |
| 7-8 | 2 |
| 8-9 | 5 |
| 9-10 | 5 |
| 10-11 | 4 |
| 11-12 | 2 |
| 12-13 | 1 |
| Total | 89 |

33 children (28%) had a referral to the Reporter in the three months before their CPOs were made (Table 9). Two of these children had two referrals.

25 of the 35 referrals were from social work, eight from the police, and two from other sources.

Table 9. Reporter decisions on referrals in the three months before the CPO

| Reporter decision on 1st referral | Number of referrals |
|---|----------------------------|
| No action | 4 |
| Arrange Hearing | 15 |
| No action current measures | 5 |
| Open/no decision made at time of CPO | 11 |
| Total | 35 (33 children) |

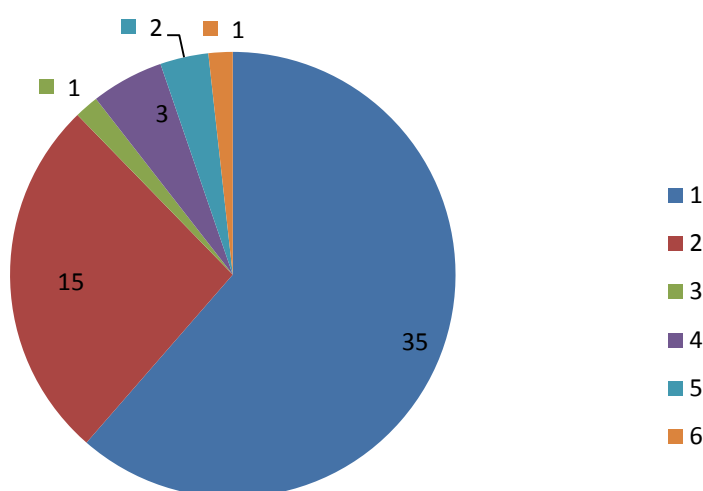
Number of moves

57 children (49%) had experienced at least one move to a placement away from their parent(s) before the CPO was made. For 22 children, this was within the month before the CPO was made either on a voluntary basis under s25 or by police using their emergency powers.

22 children (19%) had experienced two or more moves before the CPO was made and for seventeen children (15%) there had been at least one rehabilitation attempt

to their parent(s)' care. The most number of moves before the CPO was one child who had six moves (Figure 4).

Figure 4. Numbers of moves before the CPO



Statutory basis of the children

37 children (32%) were not in their parent(s) care at the time the CPO applications were made:

- 22 children on a voluntary basis under s25 – eight with relative(s), thirteen with foster carers, and one with their father. CPOs were required when the parent(s) removed their consent for the child to be accommodated
- Three children were on CSOs with relative(s), foster carers or in residential care
- Four children were living with relatives through Residence Orders (or equivalent), and CPOs were made to remove the children from their care.
- Four children had been removed from their parent(s) the day before the CPO by the police under their emergency powers²⁸.
- One child was in hospital, two children lived with relatives and one with foster carers, and the statutory basis of these placements was not evident.

Eleven children (9%) were on CSOs at home with their parent(s) when the CPO applications were made.

The majority (68 children, 59%) were living with parent(s) with no statutory measures in place when the CPO applications were made.

Siblings

97 of the children (84%) had siblings, and for 92 of these children (94%) their siblings were already known to services.

42 children were part of sibling groups of four or more children.

²⁸ Section 56 of The Children's Hearings (Scotland) Act 2011

At the time of the CPOs, 57 children had siblings who were accommodated, thirteen children had siblings on CSOs at home, and eleven children had siblings in permanent placements.

74 children had siblings with CPOs made at the same time as them.

The Child Protection Order

Ages of children

The youngest child was three weeks old and the oldest were fifteen years old when the CPOs were made (Table 10). The average age was five years and eight months.

Table 10. Ages of children known to services when CPOs made

| Age (years) | Number of children |
|--------------------|---------------------------|
| 0-1 | 27 |
| 1-2 | 8 |
| 2-3 | 9 |
| 3-4 | 10 |
| 4-5 | 5 |
| 5-6 | 6 |
| 6-7 | 9 |
| 7-8 | 7 |
| 8-9 | 3 |
| 9-10 | 7 |
| 10-11 | 8 |
| 11-12 | 3 |
| 12-13 | 5 |
| 13-14 | 1 |
| 14-15 | 6 |
| 15-16 | 2 |

27 children (23%) were under twelve months old when the CPOs were made – fourteen were 6 to 12 months old, seven were 3 to 6 months old and six were under 3 months old.

Risks

These children had experienced a variety of and multiple risks whilst in the care of their parent(s). The risks identified in the CPO applications are shown in Table 11.

Table 11. Risks identified in CPO applications of children already known to services

| Risk factor | Number of children | % children |
|---|---------------------------|-------------------|
| Physical abuse of child | 29 | 25% |
| Emotional abuse of child | 23 | 20% |
| Parent(s) violence/ aggressive behaviour | 23 | 20% |
| Poor state of accommodation | 21 | 18% |
| Parents(s) drug use | 19 | 16% |
| Parenting capacity | 18 | 16% |
| Parents(s) alcohol use | 18 | 16% |
| Parent(s) mental health | 17 | 15% |
| Neglect of child | 15 | 13% |
| Physical abuse of siblings | 14 | 12% |
| Parent is sex offender or has close association with a sex offender | 14 | 12% |
| Parent is Schedule 1 offender or has close association with a Schedule 1 offender | 13 | 11% |
| Parents(s) fail to seek medical attention for child | 12 | 10% |
| Domestic violence | 11 | 9% |
| Non-engagement with services | 10 | 8% |
| Parents(s) offending | 9 | 8% |
| Neglect of siblings | 8 | 7% |
| Sexual abuse of siblings | 6 | 5% |
| Parent(s) abandon child | 6 | 5% |
| Emotional abuse of siblings | 5 | 4% |
| Child's mental health | 4 | 3% |
| Parent(s) learning difficulties | 1 | 0.8% |
| Sexual abuse of child | 1 | 0.8% |
| Child's physical health | 1 | 0.8% |
| Number of children | 116 | |

A variety of agencies identified the risks to the children and prompted the CPO applications being made. The most common (42%) was a multi-agency assessment or immediate action being taken by several agencies to protect the child. Social work (34%) and the police (10%) were the single agencies that most commonly identified the CPO risk (Table 12).

Table 12. Agencies that identified the CPO risk for children already known to services

| Agency that identified the CPO risk | Number of children |
|--|---------------------------|
| Multi-agency | 49 |
| Social Work | 39 |
| Police | 12 |
| Hospital | 4 |
| Foster carer | 2 |
| Health Visitor | 1 |
| Nursery | 1 |
| School | 1 |
| Third sector | 1 |
| Total | 116 |

After the Child Protection Order

Residence

The CPOs required that the children be removed from the care of their parent(s) or carer(s). Most children (64%) were placed with foster carers or with kinship carers (24%). Seven children (6%) were placed with their fathers, three (3%) in residential accommodation and for two (2%) the CPOs were made to prevent their removal from hospital (Table 13).

At the time of data collection, 99 children (85%) had s67 grounds established and CSOs made. For nine of these children, grounds had been established before the CPOs were made. On average it took 4.2 months from the CPOs being made to grounds being established. The shortest time was 28 days and the longest time was almost 14 months (414 days) (Table 13).

Table 13. Time from CPO made to grounds established

| Time (days) | Number of children |
|--------------|--------------------|
| 0 – 30 | 3 |
| 31 – 60 | 18 |
| 61 – 90 | 13 |
| 91 – 120 | 22 |
| 121 – 150 | 11 |
| 151 – 180 | 3 |
| >180 | 20 |
| Total | 90 |

For most (55 children, 56%) the residence conditions of the CSOs were foster care (Table 14). Nineteen children had CSOs with kinship carers (19%) and eighteen children (18%) were on home CSOs.

Table 14. Residence conditions of CPOs and CSOs

| Residence | Number of children | |
|----------------|--------------------|------------|
| | CPO | CSO |
| Foster care | 75 | 55 |
| Kinship care | 28 | 19 |
| Father | 7 | 11 |
| Mother | 0 | 6 |
| Both parents | 0 | 1 |
| Residential | 3 | 3 |
| Hospital | 2 | 0 |
| Not applicable | 0 | 17* |
| Not evident | 1 | 4 |
| Total | 116 | 116 |

* No CSOs made – 17 children

Contact conditions

Sheriffs when making the CPOs, 2nd working day Hearings considering whether to continue the CPOs, 8th working day Hearings considering whether to make ICSOs, and Hearings that made CSOs after the grounds are established all considered where the child was to reside and, in most cases, contact with parents and other family members. These conditions are individual to each child and their

circumstances and have been put into groups for the purposes of this analysis (Table 15).

Table 15. Contact conditions with parents for children previously known to services

| Contact conditions | Number of children | | | |
|---|--------------------|--|--|------------|
| | CPO | CPO cont. at 2 nd working day Hearing | ICSO made at 8 th working day Hearing | CSO |
| Supervised contact | 82 | 81 | 78 | 56 |
| No contact 1 parent, supervised contact 1 parent | 8 | 13 | 13 | 7 |
| No contact 1 parent, unsupervised/unrestricted contact 1 parent | 3 | 2 | 0 | 6 |
| Supervised contact 1 parent, unsupervised/unrestricted contact 1 parent | 1 | 0 | 1 | 12 |
| No contact with parents | 10 | 6 | 5 | 3 |
| No contact conditions stated | 9 | 7 | 1 | 9 |
| Not applicable | 0 | 6* | 14** | 20*** |
| Not evident | 3 | 1 | 4 | 3 |
| Total | 116 | 116 | 116 | 116 |

* CPOs terminated

** CPOs terminated – 6 children; Application to vary or recall CPOs – 4 children; Hearing not held – 2 children (1 no grounds, 1 CSO already made); Hearing continued – 1 child; CPO revoked by court – 1 child;

*** No CSOs made – 17 children; CSOs at home and no contact conditions – 3 children

Sheriffs and 2nd and 8th working day Hearings also sometimes set contact conditions for other family members and associates of parent(s) where these individuals presented a risk to the child:

- CPO – Four children - no contact with grandparent(s)/other family; five children – supervised contact with grandparent(s)/other family. Three children – no contact with their mother's partner.
- 2nd working day Hearing – Four children - no contact with grandparent(s)/other family; three children – supervised contact with grandparent(s)/other family.
- 8th working day Hearing - Two children - no contact with grandparent(s)/other family; five children – supervised contact with grandparent(s)/other family. Five children – no contact with their mother's partner.

CSOs were made for 99 children (85%). The Hearings that made the CSOs also sometimes set specific contact conditions with other family members and associates of parent(s):

- Grandparent(s): Four children – no contact, two children – supervised contact
- Other family: Four children – no contact; one child – supervised contact
- Siblings: Three children – no contact; two children – supervised contact; four children – unsupervised contact
- Mother's partner or named associates of parents: Twelve children – no contact.

Plans at six months

22 children (19%) had further referrals to the Reporter in the six months after their CPOs. One child had two further CPOs.

Six months after the CPOs were made, 41 children (35%) had been returned to the care of one or both of their parents – fifteen with their fathers, nineteen with their mothers and seven with both parents.

Permanence had been identified for 35 children (30%).

Chapter 5. Children identified at risk pre-birth and Child Protection Orders made at or shortly after birth

Before the Child Protection Order

45 children (26%) were identified as at risk pre-birth, and CPOs made at or shortly after birth. The average age of the children when the CPOs were made was 11.6 days.

Risks to the unborn children were first identified by a range of agencies (Table 16). For twenty children, the first recorded involvement (in SCRA's records) was a CPCC or other multiagency meeting. However, pre-birth CPCCs were held for forty of the children, and for another child the CPCC was held shortly after birth.

Table 16. Agencies that first identified risk to unborn child

| Agency that first identified risk to unborn child | | Number of children |
|---|-----------------------------------|--------------------|
| Health 14 children | Midwife | 4 |
| | Health Visitor | 1 |
| | Hospital | 5 |
| | Other | 4 |
| Multi-agency 20 children | CPCC | 16 |
| | Other | 4 |
| Social work 6 children | Through involvement with siblings | 2 |
| | Other | 4 |
| Adult agencies 5 children | Police | 2 |
| | Addiction services | 1 |
| | Criminal justice social work | 1 |
| | Mother's social worker | 1 |

37 children (82%) had CPRs. These CPRs were made for 32 children on average two months before their births, and for five of these children within a week of their births.

Siblings

Seven of the 45 children had no siblings. 37 had living siblings. One child's sibling had died from unascertained causes.

Sixteen children (36%) were part of sibling groups of four or more children.

For the 37 children (82%) who had siblings, all had siblings who were known to services, with 34 children's siblings looked after or in permanent placements before the CPO child was born (Table 17). Two further children had siblings who had CPOs made at the same time as them.

Table 17. Sibling placements before birth of CPO child

| Type(s) of sibling placements | Number of children with CPOs at birth |
|--------------------------------------|---------------------------------------|
| Looked after and accommodated (LAAC) | 17 |
| Looked after at home (LAC at home) | 1 |
| Permanent placement* (Permanent) | 4 |
| LAAC and LAC at home | 1 |
| LAAC and Permanent | 10 |
| LAC at home and Permanent | 1 |
| Total | 34 |

*Adoption Order, Permanence Order, Residence Order (kinship)

This means that the parent(s) of 33 of the 37 children with CPOs made at or shortly after their births, and who had other children, had already had a least one child removed from their care (89%).

The Child Protection Order

A variety of risks from parent(s) were raised in the CPO applications. These are shown in Table 18, most of the 45 children would have faced multiple risks if they were in their parent(s) care.

Table 18. Risks identified in CPO applications of children with CPOs at birth

| Parental risk factor | Number of children | % children |
|--------------------------------|--------------------|------------|
| Drug use | 18 | 40% |
| Violence/ aggressive behaviour | 15 | 33% |
| Offending | 14 | 31% |
| Non-engagement with services | 12 | 27% |
| Parenting capacity | 12 | 27% |
| Mental health | 9 | 20% |
| Physical abuse of siblings | 8 | 18% |
| Alcohol use | 7 | 16% |
| Poor state of accommodation | 6 | 13% |
| Neglect of siblings | 5 | 11% |
| Learning difficulties | 5 | 11% |
| Sex offender | 5 | 11% |
| Schedule 1 offender | 4 | 9% |
| Domestic violence | 4 | 9% |
| Sexual abuse of siblings | 3 | 7% |
| Very young parent(s) | 2 | 4% |
| Emotional abuse of siblings | 1 | 2% |
| Dangerous pet animals in home | 1 | 2% |
| Number of children | 45 | |

For nineteen children, the CPOs were made to prevent their removal from hospital after birth and for one child to be admitted to hospital following a home birth (as parents refused).

After the Child Protection Order

For most children (82%) the place of residence at the time of the CPO application was in hospital following their births (Table 19).

Six months after the CPOs, 44 children (98%) had compulsory measures of supervision (35 CSOs and nine ICSOs). The CSOs and ICSO required that most of the children (29, 64%) lived with foster carers, and that five (11%) were in care of one or both of their parents (Table 19).

At the time of data collection 67 grounds had been established for 41 children (91%), and it took on average 3.3 months for the grounds to be established from when the CPO was made. For 26 children (63%), grounds were established within 120 days. The shortest time was 17 days and the longest almost 14 months (414 days). Three had not yet been established, and for one child there were no grounds as the Reporter had decided that there was insufficient evidence for the CPO.

Table 19. Residence conditions immediately before CPOs, and as conditions of CPOs, and CSOs/ICSOs

| Residence | Number of children | | |
|----------------|--------------------|-----------|-----------|
| | At CPO application | CPO | CSO/ICSO |
| Foster care | 0 | 22 | 29 |
| Kinship care | 1 | 4 | 4 |
| Father | 0 | 0 | 2 |
| Mother | 0 | 0 | 2 |
| Both parents | 5 | 0 | 1 |
| Hospital | 37 | 19 | 0 |
| Not applicable | 0 | 0 | 2* |
| Not evident | 2 | 0 | 5 |
| Total | 45 | 45 | 45 |

* For one child this was an ICSO made by the court. For one child there was no ICSO or CSO.

Contact conditions

The CPOs required that contact with their parent(s) for most children (84%) was supervised. These conditions were continued by Children's Hearings and the CPOs and ICSOs in place after six months required that 80% of children had supervised contact with one or both of their parents; 20% were to have no contact with one or both of their parents (Table 20).

Table 20. Contact conditions with parents for children with CPOs at birth

| Contact conditions | Number of children | | | |
|---|--------------------|--|--|-----------|
| | CPO | CPO cont. at 2 nd working day Hearing | ICSO made at 8 th working day Hearing | CSO |
| Supervised contact | 35 | 39 | 31 | 26 |
| No contact 1 parent, supervised contact 1 parent | 3 | 4 | 3 | 6 |
| Supervised contact 1 parent, unsupervised/unrestricted contact 1 parent | 0 | 0 | 0 | 4 |
| No contact with parents | 3 | 1 | 1 | 3 |
| No contact conditions stated/terminated | 3 | 0 | 5 | 3 |
| Not applicable | 0 | 0 | 3* | 1 |
| Not evident | 1 | 1 | 1 | 2 |
| Total | 45 | 45 | 45 | 45 |

*1 – CPO terminated by Sheriff, 1 – police emergency powers, 1 – insufficient evidence for CPO

One CPO included conditions that child was to have no contact with their grandmother, and one CSO that the child was to have weekly contact with siblings. There were no other conditions of contact with wider family.

Further referrals

Six children (13%) had referrals to the Reporter in the six months after the CPOs had been made. Three children (7%) had further CPOs – in one case because first CPO had been terminated by the Sheriff, and in another because the ICSO made at the 8th working day Hearing was not legal and the CPO was required to keep child in place of safety. In the third case the CPO was made after the child had been returned to their mother's care.

Plans at six months

39 children (87%) had not been placed in their parent(s) care. Six had been – four with their fathers and two with both parents.

44 children (98%) had compulsory measures of supervision (35 CSOs and 9 ICSOs). For one child the Reporter decision on the CPO was insufficient evidence.

There were permanence plans for 26 children (58%).

Chapter 6. Children not previously known to services or the Reporter

There were fourteen children (8%) who had not previously come to the attention of services or who had not been referred to the Reporter. Nine of the fourteen children were in two sibling groups. The children were aged from birth to eleven years old at the time of the CPOs, and their average age was five years and one month.

There were three main reasons why the children came to attention of services and CPOs were made:

1. For both sibling groups, the oldest child in each disclosed their parent(s) abuse of them and their siblings. This resulted in immediate child protection investigations and the CPOs being made.
2. The two children with CPOs at birth were not previously known to services as their mothers had concealed that they were pregnant. This was discovered when the mothers presented in labour at hospital. As well as a lack of antenatal care there were concerns about health of the child and parent(s) ability to care for them due to alcohol and/or drug use and their lifestyles.
3. CPOs were applied for and made when agencies raised concerns about three children:
 - The nursery school raised concerns about the mother's threats to harm the child.
 - A Health Visitor on a routine home visit noticed that the child had extensive bruising.
 - Housing raised concerns with social work about poor home conditions.

The average time between the child coming to the attention of services and the CPO being made was 2.1 days.

After the Child Protection Order

For five of the fourteen children no grounds were established and no CSOs were made following the CPOs. Four of these children returned home and one moved to live with his father. One CPO was terminated by the Sheriff. In another three cases the grounds were abandoned by the Reporter. And in the fifth case, the ICSO was terminated by a Hearing.

For the nine children where s67 grounds were established these were either 'a', 'b' and 'c' grounds or a combination of these. It took on average 4.9 months from the CPOs being made to grounds being established; the shortest time was 37 days and the longest was 302 days. The CSOs when made had conditions that these children stayed in foster care and had limited, supervised or no contact with their parent(s).

Six months after the CPOs were made, none of the nine children had been returned home and permanence had been identified for all of them. For two, prospective adopters had already been found and for another child their relative was to be their permanent carer.

Chapter 7. Discussion

Francis, McGhee and Mordant's (2006) study on trends in CPOs was carried out almost ten years ago, before the introduction of GIRFEC and its associated guidance and tools, The Early Years Framework (Scottish Government, 2009), the National Risk Framework to Support the Assessment of Children and Young People (Calder *et al*, 2012), revised National Guidance for Child Protection in Scotland (Scottish Government, 2014); and legislation including The Looked After Children (Scotland) Regulations 2009 and the 2011 Act.

Two of the findings from the 2006 study were also found in this research.

The first was a variation between local authorities in the numbers of CPOs. In this research three local authorities accounted for almost a half of CPOs. The reasons for such variation are not clear, nor why such variation continues to exist after the introduction of national frameworks and guidance.

The second was that: *'Children and their families are often already known to social work and child protection orders are taken in the context of known or ongoing cases. This raises questions about planning in child protection cases and the role of the children's hearing system and child protection case conferences.'*

In this research, most children (66%, n=116) were already known to services, on average for just over four years before the CPOs. 61% of these children had been on the CPR and over a half of them were still registered at the time of the CPOs. 77% had previously been referred to the Reporter, an average of just under four years before the CPOs, and the most common first grounds of referral related to lack of parental care (neglect) (60% of cases). 40% had previously been removed from their parent(s)' care, and 49% had siblings who were accommodated and 9% had siblings in permanent placements.

Neglect cases can be especially difficult to deal with. Services are dealing with accumulating concerns over a period of time, rather than a single 'big' crisis point. This means that it can be difficult to judge when an intervention should be made, especially as things may improve at times before regressing again. Daniel *et al* (2012) raised the issue of thresholds in this context and the confusion that seems to exist about whether the focus should be on:

1. the severity of the neglect and associated harm to the child or
2. the likelihood of the parents being able to accept help and make changes without the need for compulsory measures.

Six months after the CPOs, most children previously known to services went onto have compulsory measures of supervision (85%) and 65% and not return to their parent(s)' care, and there were permanence plans for 30%. This implies that it was necessary for the children to be removed from the risks presented by their parent(s) and raises the question on whether interventions could have been made earlier and have been planned rather than the 'extreme' intervention of a CPO.

There was a different picture for the 26% of children identified pre-birth (n=45), where plans were put in place and CPOs made at or shortly after birth. Pre-birth CPCCs were held and children were placed on the CPR on average two months before their births. These children's families were already involved with services, as 89% of the parents, who had other children, had already had at least one child removed from their care before.

The planning before birth and actions taken after seem to have been necessary and effective. Within six months of their births, 98% of children were on compulsory measures of supervision, 87% had not been returned to their parent(s)' care and there were permanence plans for 58% of them. This latter finding is similar to previous SCRA research which found that decisions about permanence had been made for 52% of the 23 children were placed in care at birth, before they were six months old (SCRA, 2011).

Similarly, for the fourteen children (8%) not previously known, services acted very quickly with CPOs being made on average within two days of risks being identified. Six months after the CPOs nine children had not been returned to their parents and there were permanence plans in place for them.

Questions for policy and practice

This research raises a number of questions about decision making and interventions to protect children at risk.

Identification of risk

There is a trend of increasing numbers of CPOs, particularly for very young children (SCRA, 2009). For most of the children in this research, the CPOs led to compulsory measures of supervision (85%) and placement away from parent(s) (70%), and for 40% permanence plans. This confirms previous studies that compulsory measures of intervention were needed to protect such children from risks presented by their parents and families (SCRA, 2008). However, that most children and their families were already known to services and the Reporter raises:

Could risks could have been identified at an earlier stage and interventions planned to protect the child without the escalation of concerns or exposure to new risks that led to the emergency intervention of a CPO, particularly in neglect cases?

Interfaces between universal services, social work services, and the Children's Hearings System

Most of the children in this study who were already known to services were of nursery and school age, they had also had involvement from social work, and in many cases had been referred to the Reporter usually by the police. Previous research has found that there are tensions between the roles of universal and social care services, and that many professionals feel that there are barriers that make it difficult for them to interfere in suspected neglect cases (particularly because of availability of resources) (Burgess, Daniel, Scott, Mulley, and Dobbin, 2013).

How can the differences between local authorities in the numbers of CPOs be explained?

Is the evidence provided to Children's Reporter of the quality needed to make the right decision for the child?

How can the timescales from CPO to the grounds for referral being established be reduced?

How do delays in Reporter decision making and the establishment of grounds affect planning for and securing the best outcomes for a child?

How can a better shared level of understanding be brought about so that all professionals understand and agree thresholds for intervention?

How does the availability of resources impact on the level of early intervention?

What will need to be different in the practice of named persons and lead professionals to lead to earlier intervention which may obviate the need for CPOs, while ensuring that children are safeguarded?

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Glossary of terms

Accommodated under section 25: - Separately from the Children's Hearings System, social workers can take a child into care where a parent is unable to care for them and does not object. They have powers to accommodate a child: if no-one has parental responsibility for them, if they are lost or abandoned or if the person caring for them is prevented from providing suitable accommodation or care (section 25 Children (Scotland) Act 1995).

Child Protection Case Conference (CPCC)¹: The purpose of a CPCC is to consider whether a child – including an unborn child – is at risk of significant harm and if so, to consider a multi-agency action plan to reduce the risk of significant harm (including the development of a Child Protection Plan). They are formal multi-agency meetings which enable services and agencies to share information, assessments and chronologies in circumstances where there are suspicions or reports of child abuse and neglect. There are several types of CPCC: an initial CPCC; a pre-birth CPCC; a review CPCC and a transfer CPCC.

Pre-birth CPCC¹: The purpose of a pre-birth CPCC is to decide whether serious professional concerns exist about the likelihood of harm through abuse or neglect of an unborn child when they are born. The participants need to prepare an inter-agency plan in advance of the child's birth. They will also need to consider actions that may be required at birth including whether there is a need to apply for a CPO at birth.

The pre-birth CPCC should be take place no later than at 28 weeks pregnancy or, in the case of late notification of pregnancy, as soon as possible from the concern being raised.

Child Protection Committee¹: Child Protection Committees are locally-based, interagency strategic partnerships responsible for child protection policy and practice across the public, private and wider third sectors. On behalf of Chief Officers, their role is to provide individual and collective leadership and direction for the management of child protection services in their area.

Child Protection Register¹: All local authorities are responsible for maintaining a central register, known as the Child Protection Register, of all children – including unborn children – who are the subject of an inter-agency Child Protection Plan. It has no legal status but provides an administrative system for alerting practitioners that there is sufficient professional concern about a child to warrant an inter-agency Child Protection Plan.

Getting it right for every child (GIRFEC)¹: The GIRFEC approach is a Scotland-wide programme of action to improve the wellbeing of all children and young people. Its primary components include: a common approach to gaining consent and sharing information where appropriate; an integral role for children, young people and families in assessment, planning and intervention; a co-ordinated and unified approach to identifying concerns, assessing needs, agreeing actions and outcomes, based on the Wellbeing Indicators; a Named Person in universal services; a Lead Professional to co-ordinate and monitor multi-agency activity where necessary; and

a skilled workforce within universal services that can address needs and risks at the earliest possible point.

Schedule 1 offence – An offence listed in Schedule 1 of the Criminal Procedure (Scotland) Act 1995. This is a list of offences against children, including violent offences, sexual offences and neglect and abandonment.

Research variables

1. Child's history – prior to CPO

Child known to services?

Date 1st involvement with services

Age at 1st involvement with services

Type of service 1st involved with child

1st involvement with services – description

Date 1st referred to Reporter

Reporter decision on 1st referral - date of decision, and decision

Placements – statutory basis (e.g. s25, CSO, CPO, police powers, etc.), types (kinship, Foster Care, home, etc.), dates and reasons moved

Child Protection Registrations – date(s) registered, categories, date(s) deregistered

Pre-birth Child Protection Case Conference

Has child been removed from home before?

Referrals to Reporter in 3 months prior to CPO:

- Date, type and source
- Progress at CPO – awaiting Reporter decision, Reporter decision, Hearing arranged, Hearing held, proof, grounds accepted/established, CSO made, etc. and dates

Number of siblings

Number of siblings known to services

Number of siblings - LAC status

Number of siblings – permanence/adopted

Number of siblings - CPO at same time

2. The CPO

CPO date

CPO – contact and Non Disclosure directions

Identified risks

Place of residence when CPO made – home, relative, foster carer, hospital, etc.

Which agency 1st identified CPO risk

Which agency(ies) are currently working with family and child

LAC status when CPO made – s25, CSO, none, police powers, etc.

3. After the CPO

2nd working day Hearing decision

8th working day Hearing decision

Any applications to recall or vary CPO – if yes – was advice provided by Hearing?

Grounds accepted/established – date, type

ICSOs made – date, type, contact conditions, Non Disclosure

CSOs made – date, type, contact conditions, Non Disclosure

At 6 months – statutory basis of child

At 6 months – residence of child (foster care, kinship, parent, etc.)

At 6 months – child returned home? If yes – statutory basis, date

At 6 months – any further referrals or CPOs? Details and dates.

At 6 months – plan for child

At 6 months – Is permanence identified?



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