

# Aberdeenshire Care and Risk Management Process

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## Introduction

It is expected that where agencies need to work together to identify and meet needs and manage risks, they will plan together using a single Child's/Young Person's Plan. The Child's/Young Person's Plan should be the primary resource for interagency risk management planning. This Plan can be formulated using the Aberdeenshire GIRFEC approach through a Multi-Agency Action Planning Meeting (MAAPM), Looked After Review (LACR), or Child Protection Case Conference (CPCC).

A CARM meeting may be considered in circumstances where a child or young person presents a risk of **serious** harm to others due to their behaviour. The CARM process in Aberdeenshire ensures a transparent, proportionate and rights-based approach which places the child or young person at the centre of decision-making and considers risks and needs holistically. The process does not stand alone from GIRFEC and the single Child's/Young Person's Plan – rather, it ensures that decisions about risk inform the Plan in a meaningful way.

Risk management plans need to be proportionate so they manage risk robustly, but do not limit developmental opportunities for the child or young person to such an extent that normal maturation is impaired. To allow for this, it is important to balance the protection of the public and the management of risk with thinking about how particular activities could be undertaken in a safe, pro-social manner. To make this possible, where appropriate, the adults in a child or young person's life: parents, carers, teachers etc., will be the main source of monitoring and supervision and need to be actively engaged with the risk management process.

This document is based on and should be read in conjunction with:

- Aberdeenshire's Care and Risk Management Planning for Children and Young People;
- 'Framework for Risk Assessment Management and Evaluation (FRAME) Planning for Local Authorities and partners: For Children and Young People Under 18', (Scottish Government, September 2011);
- The AC&FPC Multi-Agency Guidance: 'Working With Children and Young People Displaying Harmful Sexual Behaviours: Practice Guide';
- National Guidance for Child Protection in Scotland (Scottish Government, May 2014).

## Risk Management within Education Settings

Decisions around risk in school settings should not be unilateral and should be made at a multi-agency level through the CARM process: exclusion of a child may resolve issues in the school but may increase risk in the community if the child is not supervised during the day and may present a danger to younger children. Effective management of risk should not be separated from identifying and meeting the individual child's needs.

## Criteria/Thresholds

The CARM process applies to children and young people between 12 and 18 years of age who display serious sexually harmful behaviour and/or behaviour involving serious violence.

The [Youth Justice National Guidance](#) (NDT, 2013) provides that the key elements of sexually harmful behaviour are sexual exploitation and power imbalance.

The Youth Justice National Guidance describes the key elements contributing to violence as level of intent; use of coercion or force; and, potential for harm to the person (whether this is realised or not).

**Assessment of intent and the potential for harm should be the key measures which lead to formal risk management processes.**

This process does not apply to children and young people who present a risk of harm to themselves.

Child Protection Procedures should be followed for:

- Children under the age of 12
- Any victims of the child or young person's abusive behaviour

Child Protection Procedures should also be considered exclusively for the child/young person themselves if they are at risk of significant harm, this may be a cause for their behaviour.

## Referral

### Who Can Refer

A range of professionals can refer including: Police, Lead Professionals, Named Persons and nominated professionals co-ordinating child or adult protection investigations.

### When To Refer

A referral should be made in relation to a child or young person under the age of 18 when: there is alleged involvement in the commission of an offence of a serious nature; where there are significant concerns about the escalation in the frequency and/or seriousness of offending behaviour which is likely to include serious violence and/or sexually harmful behaviour.

### How to Refer

Contact the Children Services Team Manager with responsibility for the young person to provide them with all the relevant information. The purpose of the referral discussion is to clarify the nature of the prospective referrer's concerns and consider whether a CARM meeting may be required or whether the behaviour/concerns need further investigation.

## **Initial Procedure Following Referral**

1. The Team Manager will gather information from other professionals and relevant agencies and ensure discussions take place with Police and Review Managers.
2. The Team Manager will discuss all the gathered information with the Children Services Social Work Manager.
3. If it is agreed to proceed to a CARM meeting the following steps should be taken:
  - a. The agreed date of the CARM meeting, with 21 calendar days;
  - b. Agreement of strategies to manage a child or young person's increased risk to self.
  - c. Development of safety plans in relation to particular settings (See appendices: home, residential unit, school, community safety plan templates) outlining interim risk management measures to be put in place.
  - d. A review of living arrangements and education, employment or training placement (where necessary);
  - e. Measures in place to mediate community response;
  - f. Agreement of a communications strategy to manage any media attention;
  - g. The need for a case to be referred to the Children's Reporter;
  - h. The need for a case to be referred to specialist services (e.g. for completion of relevant offence-related risk assessments); and
  - i. The allocation of the case to a Lead Professional (if this has not already occurred).
4. If there is insufficient information to make a decision the following steps should be taken:
  - a. Decision as to whether to convene a MAAPM.
  - b. Agree timescale to have MAAPM
  - c. Any interim relevant safety plans, see list above.
5. If it is agreed that a CARM meeting is not needed reasons for this decision should be clearly recorded.

## **Proceeding to a CARM meeting**

1. If it is agreed to convene a CARM meeting this should be done within 21 calendar days of the decision to proceed to a CARM meeting. If there is an ongoing police investigation this should not delay the meeting.
2. The Social Work Manager will request the relevant Review Manager to convene the CARM meeting. It may be the case that the child or young person whose behaviour is giving cause for concern is already involved in other formal review processes (e.g. Child Protection Case Conferences, Looked After Child (LAC) Reviews, etc.). In such situations consideration should be given to combining forums in order to support a child-centred, coordinated single planning approach, for example a joint CARM/LACR:

- a. For initial CARM meetings it may be most appropriate to have this as a standalone meeting in order to establish/maintain focus on risk assessment and planning. However, the live single Child's Plan should be discussed and any action points added to this single Child's Plan. In making this decision consideration should be given to whether the young person will be attending and the length of this initial meeting should the agendas be combined.
  - b. For subsequent review CARM meetings combining the forums should always be considered.
3. The Review Manager should be sent/request all relevant information including any assessments, minutes of meetings and plans.
4. The Review Manager will consider whether or not the child/young person and their parents should be included in the CARM. Consideration should be given as to whether it would be appropriate for them to attend part of the meeting if not all. It would be best practice to include them where possible.
5. The child/young person should be informed that a CARM meeting is being convened, what it means and what their involvement will be. Agreement should be reached between professionals as to who is best to inform the family.
6. Letter templates contained within the 'Guide to GIRFEC Assessment and Action Planning' can be used to inform the child or young person and their parent(s) / carer(s) of the meeting.
7. Appropriate sharing of written material should happen prior to the meeting to prepare the child or young person and their parent(s)/carer(s) for the meeting.

## **Initial CARM Meeting**

In considering attendance at this meeting, a balance is needed between individuals who have direct knowledge of the child and family and individuals who have sufficient seniority within their respective agencies to commission relevant resources.

At the outset, the Care and Risk Management meeting must consider whether or not a child or young person is subject to any form of statutory order(s) (e.g. Compulsory or Interim Compulsory Supervision Order and any related conditions, Community Payback Order (CPO) and any related conditions, bail conditions, etc.) and the implications of related legal obligations.

## **Living Circumstances**

- The nature and level of risk to others (particularly other children and young people) in the home environment;
- The impact of family dynamics in either sustaining or preventing further behaviour of a harmful nature;

- The nature and level of risk to others in the community;
- The relationship between the referred child or young person and the victim(s);
- The views of the referred child or young person;
- The views of parents/carers and;
- The potential negative impact of a sudden change to a child or young person's living arrangements.

### **Educational/Employment Arrangements**

- The safety of the child or young person's victim(s) if attending the same institution or in the same work environment;
- The safety of other students / colleagues both in the referred child or young person's classes / workplace and in the wider educational, training or employment setting;
- The safety of other service users/attendees and staff members at the institution / workplace;
- The potential risk to the referred child or young person of retribution in relation to the harmful behaviour;
- The safety of the referred child or young person when travelling to and from the institution / workplace;
- The nature of supervision and monitoring required to manage safely any identified risks; and
- The internal disciplinary response of the institution / workplace to the harmful behaviour (e.g. exclusion).

### **Community Integration**

- What further action (if any) needs to be taken to keep the referred child or young person safe?
- What further action (if any) needs to be taken to keep the referred child or young person's family member(s) / carer(s) safe?
- What further action (if any) needs to be taken to keep other members of the community safe (e.g. peers, teaching staff, victim(s), residential care staff, etc.)?

## **Risk Assessment**

As a minimum, risk assessments must address the likelihood, pattern, nature and seriousness of any previous offending behaviour and implications for future risk.

The Review Manager will specify which risk assessments require to be completed giving due regard to the child or young person's age, behaviour, circumstances and capacity.

## **Risk Management Strategies**

The Review Manager must consider each of the following risk management strategies:

- Monitoring
- Supervision
- Intervention
- Community disclosure
- Victim safety planning
- Contingency Planning

Where a referred child or young person already has a single Child's Plan in place, this will be updated to reflect the risk management strategies agreed at the CARM meeting. When an Child's Plan has not yet been drafted or is in the process of being drafted, it will be the responsibility of the meeting to incorporate and implement the risk management strategies agreed at the CARM meeting.

## **Risk Management Classification**

The Review Manager will seek to establish attendees' views on one of three risk management classifications and reach agreement:

- Aware
- Attentive
- Active and Alert

The Chair may ask attendees to specify evidence for their choice of classification particularly if there are differences of opinion. Provision should be made for any dissenting views to be recorded when agreement cannot be reached. In such cases it will be the responsibility of the Review Manager to take a final decision about the most appropriate risk classification and risk management arrangements.

### **Aware**

A further scheduled CARM meeting will not be required. In such cases, universal services will be required to address any further issues in relation to the referred child or young person's behaviour and activities can be reviewed via appropriate multi-agency processes.

### **Attentive**

The Review Manager will recommend the establishment of a risk management core group. It is assumed for cases which reach the **attentiveness** level that a Lead Professional will already be in place or will have been identified. A date

for the core group should be agreed at the initial CARM meeting and a review CARM Meeting should be arranged to take place within six months.

#### Active and Alert

The Review Manager will make arrangements for further CARM meetings to review the referred child or young person's case at least three monthly. In tandem with this arrangement, risk management core group meetings should also be held regularly in the intervening period between CARM meetings. Classification as **active and alert** is likely to occur in only the "critical few" cases.

#### Record of Meeting

A minute of every CARM meeting will be taken which captures discussion as well as key decisions and actions, following the GIRFEC Record of Meeting template. A full minute will be verified and signed by the Review Manager and circulated to all attendees. In exceptional circumstances a note of action points may need to be circulated after a meeting if immediate risk management decisions need implemented. CARM meeting minutes should be filed safely and securely in "Restricted Access" or each agency's equivalent.

While provision of a full CARM meeting minute to the child or young person referred for discussion may not be appropriate, if the child or young person and his / her parent(s) / carer(s) were not present at the meeting, it is imperative that the key decisions are communicated to them as soon as possible.

### Core Group

Risk management core groups should occur at a frequency agreed at the CARM Meeting.

Anyone can chair the Risk Management Core Group meeting, although in practice, this task will usually lie with the Lead Professional or their Manager. It will be the responsibility of the Lead Professional and the other members of the CARM meeting to identify the members of the risk management core group and to stipulate how frequently meetings should take place. The participation of the relevant child or young person and his parent(s)/carer(s) is strongly encouraged at the risk management core groups.

The functions of a risk management core group include:

- To ensure that the child or young person and his parent(s) / carer(s) are active participants in the process of risk management and risk reduction.
- To ensure ongoing assessment of the needs of, and risks to, a child or young person subject to the CARM process.
- Implementing, monitoring and reviewing risk management strategies so that the focus remains on improving outcomes of the child or young person. This will include evaluating the impact of work done and/or changes within the family in order to decide whether risks have increased or decreased.
- Activating contingency plans promptly when progress is not made or circumstances deteriorate.
- Reporting to CARM review meetings on progress.

- Referring any significant changes to risk management strategies, including non-engagement of the child / young person and/or their family, to the chair of the CARM meetings.

## **Review**

The role of the Review Manager at any CARM review meeting is to direct attendees:

- To consider any further offences or incidents of concern involving the referred child or young person in the intervening period since the previous CARM meeting.
- To consider whether any form of further assessment is required to inform risk management strategies.
- To review the risk management elements of the Child's Plan and to identify what progress has been made, if any, as regards the implementation of agreed risk management strategies particularly with respect to interventions with the referred child or young person.
- To consider whether modifications or additions to the existing risk management strategies as encompassed in the Child's Plan are necessary and to ensure that the Lead Professional records any such changes.
- To evaluate progress in relation to risk reduction.
- To consider the views of the child or young person and his/her parent(s) /carer(s) and to assess their level of co-operation with risk management strategies.
- Re-assess the risk classification under which the child or young person's behaviour is being managed and to continue to implement risk management strategies in accordance with this decision.

## **Multi-Agency Public Protection Arrangements (MAPPA)**

Children and young people who present a serious risk will be managed in a multiagency way regardless of the system they are in. When risk management strategies are in place for a child or young person charged but not yet convicted of an offence of a serious nature, it is possible that during the course of the CARM process their legal status will change.

Multi Agency Public Protection Arrangements (MAPPA) is the framework which joins up the agencies who manage offenders. The fundamental purpose of MAPPA is public safety and the reduction of serious harm. Where a child or young person under the age of 18 is convicted of a relevant Sexual Offence or other offending with a notable sexual element, the court may require that they comply with the Sex Offender Notification Requirements (SONR) set out in Part 2 of the Sexual Offences Act (2003). Such persons are commonly referred to as Registered Sex Offenders (RSO's) or as being on the Sex Offender Register. In this situation the client will be subject of MAPPA.

In addition to the above, and only in exceptionally rare circumstances, a child or young person who is assessed as presenting a "High Risk of Serious Harm" can be subject of MAPPA when in the community.

Where the Local Authority is involved in the care or management of a young person who has, or is likely to become subject of MAPPA, the relevant Team Manager will have contact with the MAPPA Coordinator to ensure that:

- a) A decision is reached on the most appropriate single forum through which to consider and review the case.
- b) Ensure that all relevant Services/Agencies are engaged in risk management planning.
- c) That a proportionate risk management plan is developed.

Such matters will be determined on a case by case basis.

Further information on the purpose and operation of MAPPA is available at: [Multi-Agency Public Protection Arrangements \(MAPPA\) National Guidance 2016](#)

In preparation for a planned transition of a child or young person from CARM to MAPPA, it may be beneficial for the CARM core group to liaise with the child and family to explain the change in legal status and the differences between the two processes. It may also be helpful for the relevant MAPPA Chair to attend the last CARM meeting prior to the change.

## **Exit Planning**

Every effort should be made to ensure that a child or young person is retained within the CARM process for no longer than is absolutely necessary.

It is recognised that in some instances a child or young person's exit from the CARM process will not be triggered by progress made but simply as a result of the passage of time, sometimes the culmination of an extended period of non-engagement. In such instances appropriate arrangements and continuity of service provision will be necessary owing to the ongoing level of assessed risk.

The overriding objective in managing a child or young person's transition out of the CARM process to an environment with reduced supervision and monitoring must be to reduce risk to a level where the child or young person is functioning more effectively and is able to access more mainstream support to a level as required by assessed need. In order to achieve this objective, practitioners must ensure that there is continuity in the provision of support, advice and guidance to the child or young person.

## **Case Transfers and Out of Authority Placements**

When a child or young person who is being actively managed through CARM processes moves from one local authority to another local authority within Scotland, the CARM chair (Review Manager in Aberdeenshire) will make contact with their counterpart in the receiving local authority to inform them of this.

If it appears that the child or young person intends to reside in the receiving local authority on a permanent basis and this is a viable move, arrangements will be

made for an official case transfer. This will be best managed through direct liaison between both CARM chairs and the exchange of relevant information (including risk assessments, Child and Young Person's Assessment, the Child's Plan and any other relevant reports or information).

The CARM process should not automatically cease following the decision of a Children's Hearing or Court to change the child or young person's living arrangements. The CARM process should remain active for as long as it is deemed necessary to manage the risk presented by the child or young person. The originating local authority will retain responsibility for risk management while the child or young person is in an out of authority placement but certain functions may through negotiation be devolved to the host local authority.

## **Additional Reading**

The following documents provide further information in relation to work with children and young people with complex needs who present a risk of serious harm to others:

- <http://www.girfec-aberdeenshire.org/guidance/> - Working with Children and young People Displaying Harmful Sexual Behaviour: Practice Guide
- National Guidance on Under-age Sexual Activity: Meeting the Needs of Children and young people and Identifying Child Protection Concerns (Scottish Government, 2010)
- Responding to Self-Harm in Scotland Final Report: Mapping Out The Next Stage Of Activity In Developing Services and Health Improvement Approaches (Scottish Government, 2011)
- National Guidance for Child Protection in Scotland (Scottish Government, 2010)
- Getting it Right for Children and Young People who Present a Risk of Serious Harm (Scottish Government, 2008)
- Framework for Risk Assessment, Management and Evaluation (FRAME) (RMA, 2011)
- National Accommodation Strategy for Young People Who Display Sexually Harmful Behaviour
- Youth Justice National Guidance (NDT, 2013 – specifically Chapter 7)

## APPENDIX 1 – COMMUNITY SAFETY PLAN

During each phase of intervention it is necessary to consider and respond to a number of areas that could contribute to further sexual and/or serious violent behaviours occurring. The Community Safety Plan is a framework to facilitate discussions that inform risk management. The completion of the safety plan is an initial information gathering process that highlights areas that need to be considered further and clarifies the external controls and limits designed to help parents/carers manage potential risk situations out with the child/ young person's living environment. It is not a risk assessment.

This plan should be developed and reviewed by workers undertaking the assessment and intervention in collaboration with the family and other relevant professionals. It should be formally reviewed in care and risk management meetings.

Careful consideration should be given as to how to communicate the safety plan with the child/ young person and how this can be incorporated in their own safety plan. It is important that the child/ young person receive positive messages about the plan and that positive behaviour is supported.

Name of child/young person:

Date of birth:

Worker:

Parents / carers

Date Safety Plan agreed:

Date of review:

<b>Sexual and/or Serious Violent Behaviour in the Community (either outside or in another persons home)</b>
<ul style="list-style-type: none"><li>• Has there been any sexual and/or serious violent behaviour in the community?</li><li>• If yes in what circumstances?</li></ul>
<b>1. Activities in local neighbourhood</b>
<p><b>Note: there is a specific Community Groups Safety Plan that should be completed if required</b></p> <p>In considering the rules required about activities in local neighbourhood it may be helpful to consider the following if appropriate:</p>

**Activity**

- How does the child/ young person spend their time in the local neighbourhood?
- Are there particular things they are fond of doing?
- Are there particular activities that increase emotional arousal?
- Are they in other people's houses?
- What is in the local neighbourhood e.g. parks, schools
- What is the lay out like and where can be seen from where they live?
- What level of supervision is there, and is this adequate?
- What rules are there for playing out and going into other people's houses?
- How is their access to multi media monitored in other people's houses

**People**

- Is the child/ young person vulnerable in the local neighbourhood?
- Has the child/ young person friends locally?
- Who do they have contact with?
- Who might be vulnerable within the local community and how will this be managed?
- How appropriate are the young person's relationships in the local neighbourhood?
- Do other children/ young people seem comfortable being with the child/ young person?
- Does being around certain others increase the young person's stress level?
- Is the young person exposed to, or influenced by older children's / young people's behaviours
- How do the parents/ carers know they are with who they say they are going to be with?
- How able are the adults to provide the level of supervision required?
- If they are in other people's houses who does this bring them into contact with?
- How is it decided if they can go into other people's houses?
- Are there any adults locally who need to know about concerns and risk? This should be discussed within the Care and Risk Management Review.
- If so how will this be managed?

Please give relevant detail in relation to activities undertaken by the child / young person:

ACTIVITY

PEOPLE

AGE

RISK MANAGEMENT CONSIDERATIONS

ACTIVITY	PEOPLE	AGE
RISK MANAGEMENT CONSIDERATIONS		
ACTIVITY	PEOPLE	AGE
RISK MANAGEMENT CONSIDERATIONS		
ACTIVITY	PEOPLE	AGE
RISK MANAGEMENT CONSIDERATIONS		
ACTIVITY	PEOPLE	AGE
RISK MANAGEMENT CONSIDERATIONS		
ACTIVITY	PEOPLE	AGE
RISK MANAGEMENT CONSIDERATIONS		

3. Care and Risk Management Reviews
Are changes/issues needing to be discussed the next risk management review
<b>YES</b>
<b>NO</b>
If yes please identify changes/issues needing to be discussed below:

## APPENDIX 2 - SCHOOL SAFETY PLAN

During each phase of intervention it is necessary to consider and respond to a number of areas that could contribute to further sexual and/or serious violent behaviours occurring. The School Safety Plan is a framework to facilitate discussions that inform risk management. The completion of the safety plan is an initial information gathering process that highlights areas that need to be considered further and clarifies the external controls and limits designed to help parents/carers manage potential risk situations within the school setting. It is not a risk assessment.

This plan should be developed and reviewed by workers undertaking the assessment and intervention in collaboration with the school staff. It should be formally reviewed in care and risk management meetings.

Careful consideration should be given as to how to communicate the safety plan with the child/ young person and how this can be incorporated in their own safety plan. It is important that the child/ young person receive positive messages about the plan and that positive behaviour is supported.

Name of child/young person:

Date of birth:

Worker:

School:

School staff member:

Date Safety Plan agreed:

Date of review:

<b>Sexual and/or Serious Violent Behaviour in School</b>
<ul style="list-style-type: none"><li>• Has there been any sexual and/or serious violent behaviour in school?</li><li>• If yes in what circumstances?</li></ul>
<b>1. Staffing and layout</b>
In considering staffing and location it may be helpful to consider the following: <b>Staffing:</b> <ul style="list-style-type: none"><li>• What staff are involved in teaching / supporting the child/ young person?</li></ul>

- Who is aware of concerns about their harmful sexual / serious violent behaviours?
- Do other staff need to be made aware and if so how will this be managed (does this require to be discussed within the Care and Risk Management Review)?
- What is the current level of supervision and is this appropriate?
- Is the level of supervision required achievable in the current circumstances?
- Are all staff aware of the level of supervision required?
- Who is responsible for discussing the child/ young person' risk and needs to other staff?

**Layout:**

- Are there areas within the school and grounds that are unsupervised?
- Are there any other building issues that may increase risk? e.g. building works, nursery or primary school located in same building, communal play ground

**2. In the classroom**

In considering in the classroom it may be helpful to consider the following:

- Who in the class may be vulnerable and why?
- Is the level of supervision in the class adequate?
- How much information does the class teacher and any others responsible for the child/ young person in the class have about the child/young person's behaviours, risk and needs?

- Are there particular times or circumstances where the child/ young person seems more unhappy / upset / distracted / irritable / distressed?
- Can extra support / supervision be put in place during difficult times?
- Are the seating arrangements satisfactory?
- Are there times when the child/ young person is allowed to leave the class during class times?
- Is the classroom environment free of confusing sexual images and behaviours?
- Are there any other children displaying sexually harmful behaviour / language?
- How is sex education managed and does the child/ young person need further information?
- Does the class teacher need to be able to talk to the child/ young person about their sexually harmful behaviours?
- If so what level of support will the teacher require?
- Are there particular areas of risk in the class e.g. when the teacher is occupied with other pupils, and how can this be managed?
- Are there occasions where there is physical contact between adults/children, children/children?

### **3. Times out with classroom structure**

In considering times out with the classroom structure it may be helpful to consider the following:

- What children may be particularly vulnerable and how can this be managed?
- What level of supervision is there when the child / young person is
  - going between classes,
  - lunch time
  - break time
- If more supervision is required how will this be achieved?
- Are particular rules required for going to the toilet?

- Are there rules about showering, dressing and undressing for PE that need to be considered?
- Is the environment free of confusing sexual messages, images and behaviours, e.g. access to computers, phones/games consoles etc?

#### **4. Care and Risk Management Reviews**

Are changes/issues needing to be discussed the next care and risk management review

**YES**

**NO**

If yes please identify changes/issues needing to be discussed below:

## APPENDIX 3 – RESIDENTIAL SAFETY PLAN

During each phase of intervention it is necessary to consider and respond to a number of areas that could contribute to further sexual and/or serious violent behaviours occurring. The Residential Safety Plan is a framework to facilitate discussions that inform risk management. The completion of the safety plan is an initial information gathering process that highlights areas that need to be considered further and clarifies the external controls and limits designed to help parents/carers manage potential risk situations within the residential setting. It is not a risk assessment.

This plan should be developed and reviewed by workers undertaking the assessment and intervention in collaboration with other relevant professionals. It should be formally reviewed in care and risk management meetings.

Careful consideration should be given as to how to communicate the safety plan with the child/ young person and how this can be incorporated in their own safety plan. It is important that the child/ young person receive positive messages about the plan and that positive behaviour is supported.

Name of child/young person:

Date of birth:

Name of Unit:

Key Worker:

Manager:

Date Safety Plan agreed:

Date of review:

<b>Sexual and/or Serious Violent Behaviour in Residential Unit</b>
<ul style="list-style-type: none"><li>• Has there been any sexual and/or serious violent behaviour in the Unit?</li><li>• If yes in what circumstances?</li></ul>

**1. Unit Occupancy**

Who lives in the unit and what are their ages?

Who are regular visitors to the unit who could be in need of protecting?  
(include frequency of visits)

Does anyone else regularly care for this child / young person?  
If so, other living environment safety plans will have to be considered.

## 2. Bedrooms and sleeping

What are the sleeping arrangements in the unit?

Rules required for bedroom and sleeping

In considering the rules required about bedrooms and sleeping it may be helpful to consider the following:

### Privacy and Boundaries

- How many staff are on duty on the night shift and is there waking staff?
- If yes: where are staff located during night and how often do they check on children/young people?
- What are the children and young people's routines around going to bed, getting up?
- When do children and young people tend to go to sleep and how is this known?
- Are any bedrooms shared?
- Are there locks on any of the bedroom doors and if so are they used, when and why?
- Are young people allowed in each others rooms: how is this decided and implemented?
- Do any visitors go into bedrooms?
- Are bedroom doors open / closed / locked and how is this decided?
- Can staff hear what is going on at night in different rooms?

**Activity**

- Is there access to multi media in the child / young persons bedrooms or any other bedrooms? If so are there any rules re access?
- How do children/ young people spend time in bedrooms?

**Dress code**

- Is there a rule re night attire, dressing and undressing particularly in room sharing?

How are rules implemented?

**3. Bathroom / toilet**

In considering the rules required about the bathroom it may be helpful to consider the following:

**Privacy and boundaries**

- Has the bathroom/toilet/s got a working lock?
- Who uses the lock and who doesn't and are there any rules about this?
- Does anyone share the use of the bathroom
- Can staff hear what is going on in the bathroom from other rooms in the unit?
- Are children / young people up during the night to use the bathroom?

- What do children / young people wear to and from the bathroom?

#### **4. Sexualisation of the environment**

The sexualisation of the unit is like an unwritten code from which everyone living and working there understands acceptable and unacceptable ways of interacting with each other. This covers privacy, intimacy and access to sexual information as well as sexual behaviours. This helps us understand the messages a child or young person will be getting about sexuality.

In considering the rules required about sexuality it may be helpful to consider the following:

##### **Privacy and Boundaries**

- What is the unit's policy on physical contact?
- What are staff's views on intimacy and physical touch?
- What language is tolerated / not tolerated?
- Do staff talk about sex or sexual acts in front of the children or to the children?
- Do the children / young people touch each other in a sexualised way, and if so in what circumstances?
- Do the children/ young people touch the staff in a sexualised way and if so in what circumstances?
- Do the children / young people discuss sex and sexual behaviours with each other?
- Is it possible for younger children to observe older young people engage in sexual behaviours?

##### **Access to sexual images/materials**

- Is it possible for the child/ young person to have pornographic magazines in the unit?
- What kind of access has the child/ young person to TV and the Internet?

- What newspapers are regularly in the unit?
- What posters are deemed acceptable /unacceptable

## **6. Play and other activities in the unit**

In considering the rules required about play and other activities it may be helpful to consider the following:

### **Activities**

- How does the young person spend his/her time in the unit?
- Who do they tend to associate most with and is this appropriate?
- Is there a lot of physical contact during play?
- Do friends come in to the unit?
- How is it negotiated for friends to be in the unit?
- What are the current levels of supervision?

### **Layout**

- Where does the young person play/hang out with other young people in the unit?
- Do staff always know the whereabouts of children /young people in the unit?
- How do staff know what they are doing?

## 7. Play and other activities outside the family home

(See community safety plan)

## 8. Staffing and Layout

In considering staffing and layout it may be helpful to consider the following:

### Staffing:

- Have staff got all the information they need regarding the child/ young person
- How many staff are on each shift?
- How is absence covered?
- What staff need to be aware of the child/ young person's behaviour and risk?
- Who is responsible for sharing information about the child / young person and how is this done?
- Are all staff aware of the required level of supervision? How is this communicated within the staff group?
- How is supervision managed at vulnerable times including: staff change over; staff dealing with incidents involving other young people; movements between care and education?
- Does family contact take place within the unit? If so how is this managed? (See Contact Safety Plan for Risk Management considerations.)

### Layout:

- In considering the layout of the unit and grounds are there particular "blind spots"?

- Is the unit close to any potential risk environments e.g. primary schools, nurseries etc?
- Are there any other building issues to consider?

### **8. Care and Risk Management Reviews**

Are changes/issues needing to be discussed the next care and risk management review

**YES**

**NO**

If yes please identify changes/issues needing to be discussed below:

## APPENDIX 4 – HOME SAFETY PLAN

During each phase of intervention it is necessary to consider and respond to a number of areas that could contribute to further sexual and/or serious violent behaviours occurring. The Home Safety Plan is a framework to facilitate discussions that inform risk management. The completion of the safety plan is an initial information gathering process highlights areas that need to be considered further and clarifies the external controls and limits designed to help parents/carers manage potential risk situations It is not a risk assessment.

There are core sections [S.1 – S.5] that should be completed in the initial stages of the process with the family. However S.7 and 8 would potentially be completed when a relationship has been established with the parents. The timing of completing these more sensitive sections will be informed by the presenting issues at the point of disclosure.

Safety plans contribute to the overall Risk Management Plan. They should be ratified within Care and Risk Management Meetings. Risk management is an ongoing process and the plan can be developed and reviewed by workers as the assessment and intervention is ongoing. Alternatively, if there are ongoing care and risk management meetings then the process of reviewing risk management issues can be held in these meetings.

Name of child/young person:

Date of birth:

Worker:

Parents / carers

Date Safety Plan agreed:

Date of review:

<b>1. Sexual and/or Serious Violent Behaviour in the Home</b>
<ul style="list-style-type: none"><li>• Has there been any sexual and/or serious violent behaviour within the home?</li><li>• If yes in what circumstances?</li><li>• Do the children touch the adults in a sexualised way in the home and if so in what circumstances?</li><li>• Do the children/young people in the home discuss sex and sexual behaviours with each other?</li></ul>

## 2. Home Occupancy

Who lives in the house and what are their ages?

Who are regular visitors to the home who could be in need of protecting?  
(include frequency of visits)

Does anyone else regularly care for this child / young person in the family home?

## 3. Bedrooms and sleeping

Who sleeps where in the house?

### Rules required for bedroom and sleeping

In considering the rules required about bedrooms and sleeping it may be helpful to consider the following:

#### Privacy and Boundaries

- What are the family routines around going to bed, getting up?
- When do family members tend to go to sleep and how is this known?
- Are there locks on any of the bedroom doors and if so are they used, when and why?
- Are siblings allowed in each others rooms and how is this decided?
- Are children allowed in parent's bedroom and how is this decided?

- Do friends play in / hang out in bedrooms?
- Do other visitors go into bedrooms?
- Are bedroom doors open / closed / locked and how is this decided?
- If guests stay where do they tend to sleep?
- Proximity of parent's bedroom to other bedrooms?
- Do parents hear what is going on at night in different rooms?

#### **Activity**

- Is there access to multi media in the child / young persons bedrooms or any other bedrooms? If so are there any rules re access?
- How do people spend time in bedrooms?

#### **Dress code**

- Is there a rule re night attire, dressing and undressing particularly in room sharing situations?

#### **Communication of Rules**

How is the above communicated to the children? Is any of the above assumed or communicated non-verbally? What are appropriate consequences? Are family meetings necessary?

#### **4. Bathroom / toilet**

In considering the rules required about the bathroom it may be helpful to consider the following:

##### **Privacy and boundaries**

- Has the bathroom/toilet/s got a working lock?
- Who uses the lock and who doesn't and are there any rules about this?
- Do people share the bathroom at the one time, if so who tends to do this most often and what are parental views on sharing the bathroom?

**Activity**

- Do any family members bathe/shower together and if so who and in what circumstances e.g. assistance to small children, sexual intimacy?
- Do older siblings help to bathe/toilet younger children?
- Can parents hear what is going on in the bathroom from other rooms in the house?
- Are family members up during the night to use the bathroom?

**Dress code**

- What do family members wear to and from the bathroom?

**Communication of rules**

How are any rules communicated to the children? Is any of the above assumed or communicated non-verbally? What are appropriate consequences? Are family meetings necessary?

**5. Play and other activities in the family home**

In considering the rules required about play and other activities it may be helpful to consider the following:

**Activities**

- How and where does the young person spend his/her time at home?
- How and where do the siblings spend their time together?
- Is there a lot of physical contact during play?
- Do parents know when friends are in the house?
- How does the young person spend their time with friends in the house?
- What are the current levels of supervision and is this adequate?

**New Technologies**

- Has the child access to the internet? If so is this through PC, laptop, games console, mobile phone. Where are these devices located.
- Is there a webcam on the PC. Is there wireless connection?
- What length of time does the child spend on the computer

- What sites does the child access
- Are there any filters/safeguards on computer/laptop.
- Do parents/carers check online activity? How is this checked?

**Communication of rules**

How are any rules communicated to the children? Is any of the above assumed or communicated non-verbally? What are appropriate consequences? Are family meetings necessary?

**6. Play and other activities outside the family home**

(See community safety plan)

## 7. Family Nudity

In considering the rules required about nudity it may be helpful to consider the following:

### Privacy and boundaries

- Are parents nude in front of the children, and if so in what context?
  
- Are adults naked around children, children naked around adults and children naked around other children? If so, what is the context?
  
- Is underwear worn around the house?

### Communication of Rules

How are any rules communicated to the children? Is any of the above assumed or communicated non-verbally? What are appropriate consequences? Are family meetings necessary?

## 8. Family Sexuality

A family's sexuality is like an unwritten code from which family members understand acceptable and unacceptable ways of interacting with each other and with others out with the family. This covers privacy, intimacy and access to sexual information as well as sexual behaviours and helps us understand the messages a child or young person is being given about sexuality. The sexual socialisation section within the assessment will also assist workers to consider areas in this section in more detail.

In considering the rules required about sexuality it may be helpful to consider the following:

### **Privacy and Boundaries**

- Are children potentially exposed to sexualised behaviours of older siblings?
- How do parents show affection to each other in front of the children?
- Has the child/young person unlimited access to TV? If so what stations are available?

The following areas are more sensitive. Workers should consider how they explore these with parents / carers and when in order to facilitate a meaningful discussion. Information may also be gathered from alternative sources such as file review. It should be remembered that the purpose of gathering information is to inform what risk management activity is required.

- Is the child exposed to sexual contact between the parents?
- Do parents talk about sex or sexual acts in front of the children?
- Are there pornographic magazines in the home and where are they kept and who has access to them?
- Are there pornographic DVD's and if so where are they kept and who has access to them?
- Does anyone in the house have access to sexually explicit material online, use pornography or internet related sexual activities.

### **9. Care and Risk Management Reviews**

Has the child / young person been engaged in a discussion about the sexual and/or serious violent behaviours?

If yes what has been communicated?

Has the child / young person been engaged in a discussion about risk management?

If yes what has been communicated?

Are changes/issues needing to be discussed the next risk management review

If yes please identify changes/issues needing to be discussed below:

**Version Control**

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