

# Education, Children and Families Committee

10am, Tuesday, 2 March 2021

## Child Protection – Response to Motion

Executive/routine  
Wards  
Council Commitments

### 1. Recommendations

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- 1.1 The Education, Children and Families Committee is asked to:
  - 1.1.1 Note the contents of this report.
  - 1.1.2 Note the positive contribution of services across the City in keeping children safe.
  - 1.1.3 Note the plan for an Internal Audit regarding whistleblowing outcomes, including those relating to child protection issues.
  - 1.1.4 Note that this report will also go to Full Council for information on 29 April 2021.

**Andrew Kerr**

Chief Executive

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# Report

## Child Protection – response to motion

### 2. Executive Summary

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- 2.1 This report follows submission of the Edinburgh Child Protection Committee Annual Report 2019/20 which was submitted to the Education, Children and Families Committee and Full Council.
- 2.2 Relevant child protection information is provided in response to a motion relating to child protection in the City of Edinburgh. It provides detail and context around a number of topics including; child protection referrals, interagency training, public information campaigns and matters in relation to whistleblowing.

### 3. Background

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- 3.1 Following a motion put forward by Councillor Dickie at Full Council on 15 October 2020.

*“Council therefore requests*

*The Chief Social Worker and Head of Safer and Stronger Communities (and Chair of Edinburgh’s Child Protection Committee) reports to Education, Children and Families Committee in two cycles, referred onto full Council, on any increase in child protection issues that have been reported since the return to school in August.*

*Recognising that appropriate information for elected members acting on behalf of constituents is essential in child protection case which may relate to whistleblowing reports, asks that a review of the present arrangements be undertaken in order to suggests ways in which it can be improved.*

*The report to include action that can further promote public awareness of child protection issues and support for young people to speak out.*

*A review of the training given to all staff working with children and all councillors be undertaken to suggest how this can be improved including information and guidance about elected members assurance in relation to individual child protection cases.*

*That consideration be given to extending the whistleblowing audit and review to include,*

*The recommendations of all whistleblowing reports relating to child protection over the past 10 years, reporting the outcomes to the Governance, Risk and Best Value and Education, Children and Families Committees, and those committees consider any ward callings, or callings to any other elected members as appropriate.*

*A recommendation that all current and forward whistleblowing reports relating to child protection issues go appropriately to the Governance, Risk and Best Value and Education, Children and Families Committees, and those committees consider any ward callings, or callings to any other elected members as appropriate*

3.2 These issues are addressed in turn in the main report below.

## **4. Main report**

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### **Child Protection Issues Since August 2020**

- 4.1 A range of data is collated and analysed by the Child Protection Committee and the Chief Officers' Group. The two main forums for data collection and analysis are noted below. Between these two datasets, we can detect emerging issues and see long-term trends.
- 4.2 SOLACE data returns to the Scottish Government reported by all local authority areas each Thursday since April 2020.
- 4.3 This data is summarised into a monthly report which is provided to the Chief Officers' Group and elected members of the Education, Children and Families Committee. This dataset includes child protection information alongside adult protection, offender management and homelessness data.
- 4.4 There is no evidence of any sustained rise in child protection concerns reported since August 2020. Weekly SOLACE data shows that over the 20 weeks to 5 February 2021, the average number of children whose names were added to the Child Protection Register was less than two per week. This varies between a high of seven children in one week, and five weeks throughout this period where no children's names were added. There is also no evidence of an increase in emergency legal measures, such as Child Protection Orders (CPOs), being used to protect children – only three such Orders were granted in the 20 weeks to 5 February 2021. It should be noted that there are other means by which we can safeguard children out with applying for a CPO.
- 4.5 National Minimum Dataset for Child Protection Committees in Scotland, which collates rolling three-year trend data on a range of indicators.

- 4.6 This report includes quarterly trend data which requires to be collated from a range of sources and analysed; by its nature, such reporting is not absolutely current but does perform an important function in allowing us to see long term trends as opposed to the many common cause variations which can appear in weekly data.
- 4.7 The most recent version, included at Appendix 1, considers data to end of October 2020 and shows that the very small overall increase in the number of children subject to Child Protection Registration has not been due to an increase in concerns, but rather a reduction in the number of children being removed from the Register. This may reflect professionals being more reluctant to remove children's names from the Register during the pandemic, which ensures that the additional level of safeguarding provided by a Child Protection Plan remains in place for these children.
- 4.8 The National Minimum Dataset also includes the number of Child Welfare Concerns (CWCs) received by Social Care Direct; referrals to Social Work regarding children who may be at risk of harm. Worth noting is that the lowest level of CWCs over the three-year period occurred between November 2019 and January 2020, prior to the pandemic. Since then, we have seen a rise in CWCs to around the same level as previous years, suggesting that the pandemic has not led to fewer concerns being reported but instead that these are being reported at broadly the same level as previously.
- 4.9 Regular contact is being maintained with children whose names are on the Child Protection Register, with an average of 91% being seen each week over the 20 weeks to 5 February 2021. It should be noted that this data includes unborn children, which contributes to some extent to the figure being less than 100%, as whilst regular contact is maintained with pregnant women whose unborn children are subject to Child Protection Registration, weekly contact is not usually proportionate. In addition, an average of 91% of children subject to Multi-Agency Plans have been seen on a weekly basis over this 20-week period. This reflects the huge efforts to maintain contact with over 5000 children during the period of the pandemic.
- 4.10 Schools across the city are a key point of contact for children who are both already known to support services or who may require support. Prior to COVID restrictions, there was a 100% uptake of the NSPCC "Speak Up Stay Safe" programme across Edinburgh's primary schools. This programme provides age appropriate information to children regarding how to speak up if they are worried about themselves or another person. Ongoing dialogue is taking place between senior managers in Education and NSPCC to recommence this programme via virtual methods as soon as possible. In addition, all children receive input via PSE about the importance of speaking up to a trusted adult.

## Public Information and Awareness

- 4.11 As noted in the Child Protection Committee Annual Report 2019-20, one crucial function of a Child Protection Committee is public messaging. The 'All of Us' campaign launched in January 2020 and is scheduled to run until Spring 2021. This is a joint campaign with NSPCC Scotland, the first of its kind in the country, and seeks to address child neglect by ensuring that we all know where to turn to for support, and how to report concerns. The simple premise of the campaign is that it takes all of us to raise happy and healthy children, and we all need support from time to time. We have deliberately sought to take a non-stigmatising approach in our messaging which focusses on supporting others as opposed to reporting them to social work. This is in recognition that neglect is cumulative and providing early support is more effective than addressing issues once they have become entrenched. The messaging has taken on additional relevance over the period of the pandemic, with the campaign plan having to adapt to being primarily online. The campaign website is hosted at [www.edinburgh.gov.uk/allofus](http://www.edinburgh.gov.uk/allofus)
- 4.12 A full evaluation will be provided after the end of the campaign by NSPCC Scotland and will be provided to the convenors of the Education, Children and Families Convenors. This will include consideration of the impact of the campaign on directing families towards early support, as well as considering whether there is any evidence of an increase in referrals to social work which can be linked to the campaign messaging. An update on the progress of the campaign to date includes:
- 4.12.1 Hundreds of people attended four launch events in January and February 2020. These were aimed at local families and included information and activities from support organisations which operated in the local area.
- 4.12.2 Since April 2020, tens of thousands of hits on the campaign website have been recorded. Google analytics reports provide this data for each calendar month – the total of all unique page views since April 2020 is 43,230; the highest monthly total occurred in May 2020 (12,711 unique page views), with similar figures recorded for December 2020 (11,477) and January 2021 (9,971). The highest figures have been recorded following targeted social media advertising, indicating that this is working in driving people to information around support. The campaign messaging has also been adapted to ensure that this is of relevance to the challenges facing families over lockdown, in particular during periods such as Christmas and school holidays.
- 4.12.3 In addition to public facing information, a range of methods have been successful in raising awareness amongst multiagency professionals. This has included monthly "lunchtime learning" sessions themed around specific topics of relevance to the campaign and a virtual conference attended by almost 100 people and including keynote speakers from Royal Holloway University of London, Edinburgh University and local practitioners. Both have been highly evaluated by participant feedback.

4.12.4 The model of the campaign, developed completely by local workers and families in Edinburgh, is now being adapted by NSPCC for use in other local areas, and considered for adoption as a national campaign toolkit by Child Protection Committees Scotland.

## Learning and Development

4.13 The Learning and Development Subcommittee of the Child Protection Committee meets monthly, and carries out ongoing review of the relevance, impact and delivery of interagency child protection training as a core element of its work.

4.14 Since April 2020, the Subcommittee has developed a suite of e-learning options which are accessible to all colleagues across the City via their own agency's platforms. The table below illustrates the positive uptake of each course.

| <u>Course name</u>   | <u>Number of staff accessing</u> | <u>Number of staff completing</u> |
|--|----------------------------------|-----------------------------------|
| Child Protection: Keeping Children Safe Online                             | 1422                             | 597                               |
| Child Protection: Assessment Outcomes and the Language of Child Protection | 313                              | 179                               |
| Child Protection: An Introduction to Children's Hearings                   | 215                              | 169                               |
| Child Protection: Child Development, Trauma and Infant Mental Health       | 348                              | 162                               |
| Child Protection: Children with Disabilities                               | 232                              | 171                               |
| Child Protection: Communicating with Children                              | 316                              | 237                               |
| Child Protection: Domestic Abuse   | 405                              | 256                               |
| Child Protection: Foetal Alcohol Spectrum Disorder (FASD)                  | 382                              | 279                               |
| Child Protection: Neglect  | 912                              | 641                               |
| Child Protection: The Vulnerability of Babies                              | 193                              | 156                               |
| Child Protection: Case Note Recording                                      | 177                              | 104                               |

4.15 In addition, virtual training sessions are now well established. The training calendar to June 2021 is available on the Child Protection Committee website [child protection training](#). Each training course generates participant feedback which informs the delivery and content going forward. The Child Protection Committee commissioned an external review of two courses by Dr Duncan Helm, which was presented to the Subcommittee in January 2020 and is included as Appendix 2. This illustrates the positive impact which these courses have had, as well as suggesting areas for improvement which have been taken forward.

4.16 Council colleagues, including elected members can access public protection training through Cecil e-learning. Recommended e-learning courses are

4.16.1 **Public Protection** – this course provides an overview of key child and adult protection legislation and policy

- 4.16.2 **Key Messages for Child Protection: COVID 19** – this course provides an introduction to local referral processes if you are concerned about a child who may be at risk of harm.
- 4.16.3 **Assessment, Outcomes and Language of Child Protection** – this course offers an introductory look at the processes of assessment, as well as considering recommendations made in significant case reviews.
- 4.17 There are several other courses which cover specific topics which may be of interest, including neglect, domestic abuse and online safety.

### **Whistleblowing**

- 4.18 The 2021/22 Internal Audit draft plan includes an audit on Implementation of Historic Whistleblowing Recommendations. This will involve review of a sample of outcomes from concluded whistleblowing recommendations to confirm that they have been effectively implemented and sustained and will include the full population of child protection whistleblowing recommendations.
- 4.19 Any potential findings and recommendations raised in the external whistleblowing review will be reviewed by Internal Audit in future plan years to confirm that they have been effectively implemented and sustained.
- 4.20 The outcomes of both audits will be presented to the Governance Risk and Best Value Committee and then referred to Education, Children and Families Committee. These committees can consider any ward callings, or callings to any other elected members as appropriate.

## **5. Next Steps**

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- 5.1 This report is provided for information and reflects the ongoing work across the city to ensure robust multi-agency child protection procedures are in place. The Child Protection Committee and Chief Officers' Group continue to have oversight and monitor closely any changes in patterns or developments through robust reporting arrangements.
- 5.2 We can confirm that Whistleblowing outcomes regarding any matters relating to child protection will go to Governance Risk and Best Value Committee as normal and then onto the Education Children and Families Committee.

## **6. Financial impact**

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- 6.1 The Child Protection Committee is funded by an inter-agency tripartite budget, with contributions from the City of Edinburgh Council, Police Scotland and NHS Lothian. All work referred to above and in Appendix 2 is resourced from within this budget. As such there is no additional financial impact identified.

## **7. Stakeholder/Community Impact**

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- 7.1 The work of the Child Protection Committee is closely aligned with the Edinburgh Children's Partnership via the priorities within the Children's Services Plan. This ensures there is connectivity between the aspirations for children, young people and their families across these strategic forums.
- 7.2 The views of children, young people and their families are central to the continuous improvement of child protection services. Participation and Engagement, including with stakeholders, is one of the themes within the Child Protection Improvement Plan. The Child Protection Committee will continue to actively consult with stakeholders going forward.
- 7.3 Relevant documents regarding the Child Protection Committee, including the Annual Report and the interagency training calendar, are available on the Council website which is accessible by any member of the public.
- 7.4 There are no health and safety, governance, compliance, or regulatory implications.

## **8. Background reading/external references**

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- 8.1 [Edinburgh Child Protection Annual Report](#)

## **9. Appendices**

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- 9.1 Appendix 1 – Minimum Child Protection Dataset Report to Quarter 1 2020/21
- 9.2 Appendix 2 - Evaluation of the Impact of Edinburgh Child Protection Committee Training

**Minimum Child Protection Dataset Report**  
**to**  
**Quarter 1 2020/21**  
**(end of October 2020)**



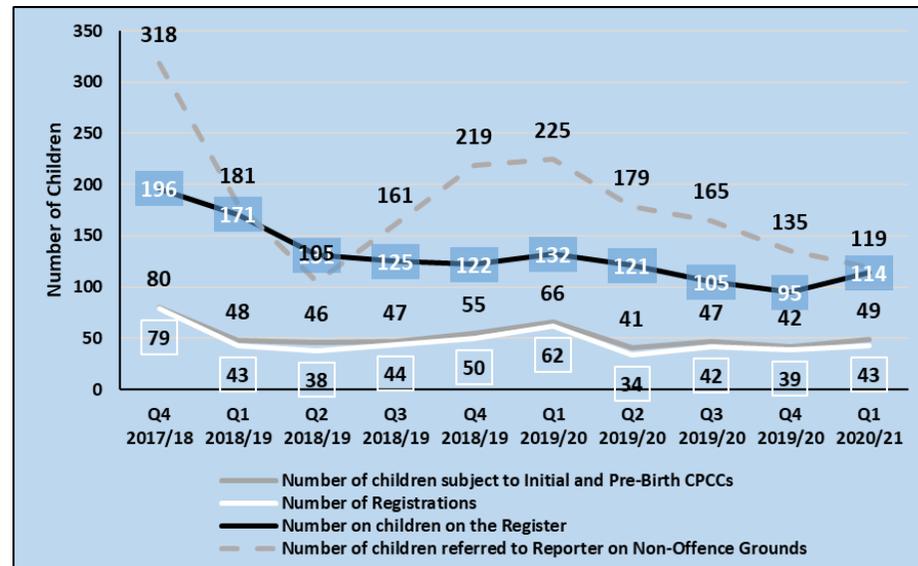
## Edinburgh Child Protection Committee CHILD PROTECTION INDICATORS

### INTRODUCTION

This report contains charts, tables and scrutiny questions to support analysis of the **Minimum Dataset for Child Protection Committees**. Some further local indicators have been included to enhance this set, such as the number of Child Welfare Concerns and the number of eIRDs.

### HEADLINE SUMMARY OF ACTIVITY LEVELS

The selected indicators below (number of children subject to initial/pre-birth Child Protection Case Conferences, newly registered, on the Register, and referred on non-offence grounds) provide an overview of activity levels.



## QUARTERLY REPORT: covering the period Q4 2017/18 to Q1 2020/21

This is the third report produced and covers the period from August 2017 to October 2020.

### HEADLINE MESSAGES

The Committee is aware of the sustained downward trend regarding numbers of children whose names are placed on the Child Protection Register. Nationally, Edinburgh sits below the national average for the rate of children per 1,000 subject to Child Protection Registration. Previous analysis considered by the Child Protection Committee has highlighted that formal child protection processes – for example Case Conferences – are working well to manage and reduce risk. Ongoing engagement with education staff is being carried out to enhance our understanding of trends identified in the previous report.

Over the last two quarters, there have been increased numbers of IRDs, with Child Welfare Concerns stabilising at a higher level than previous years. Further detail is provided on page 2.

It should also be noted that a small increase in Child Protection Register figures is due to a decrease in deregistrations, rather than an increase in registrations. Further detail is provided on page 4.

## CHILD WELFARE CONCERNS AND INTER-AGENCY REFERRAL DISCUSSIONS

### *Number of Child Welfare Concerns received by Social Care Direct and eIRDs initiated for children*

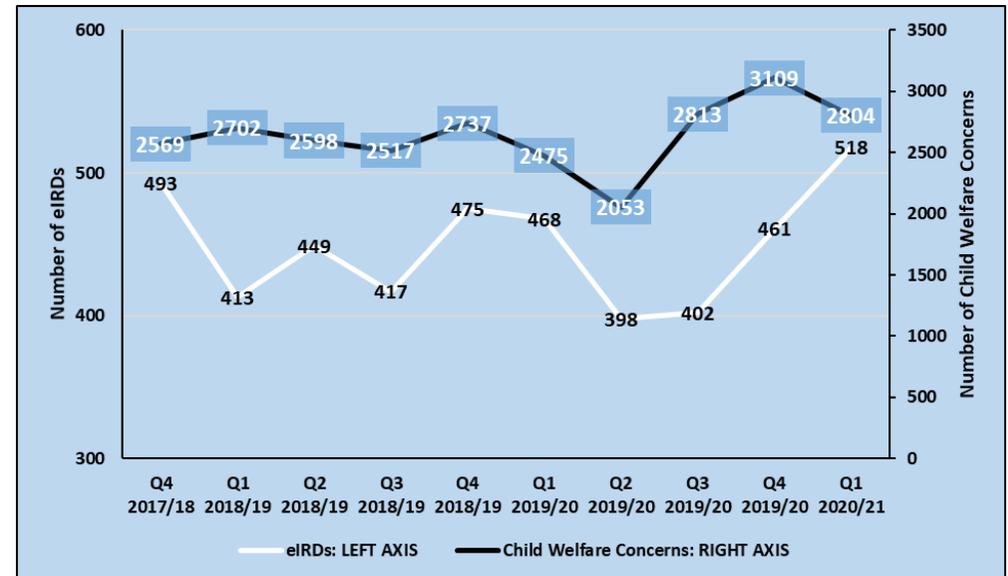
#### Analysis and Commentary

There has been a general reduction in both Child Welfare Concerns (CWCs) and eIRDs across 2017/18 with levels being more stable across 2018/19 to Q1 2019/20. Over the period of the coronavirus pandemic (Q3 2019/20 – Q1 2020/21) we see an increased level of CWCs, which is in line with levels prior to the reporting period.

We previously noted the number of IRDs in Q2 & Q3 2019/20 were at their lowest levels to date. However these figures have since increased, mirroring the increase in CWCs. Any divergence between the levels of CWCs and IRDs has narrowed significantly in the most recent quarter.

#### Implications for the Child Protection Committee

It is requested that the CPC continues to monitor these indicators. The data provided gives some reassurance that, despite the pandemic, there remains a high level of child protection activity in line with numbers of CWC and IRD prior to the reporting period.



Source: Social Work IT System & eIRD multi-agency system

Scrutiny questions to support analysis of the data:

- How do the numbers for these two indicators relate?
- Are there any differences in the changes over time between the two indicators?
- What impact could changes in the levels here have on later stages in the Child Protection process?

## INITIAL AND PRE-BIRTH CHILD PROTECTION CASE CONFERENCES

### *Number of Children Subject to Initial and Pre-Birth Child Protection Case Conference, and Conversion Rate of Children to Registration*

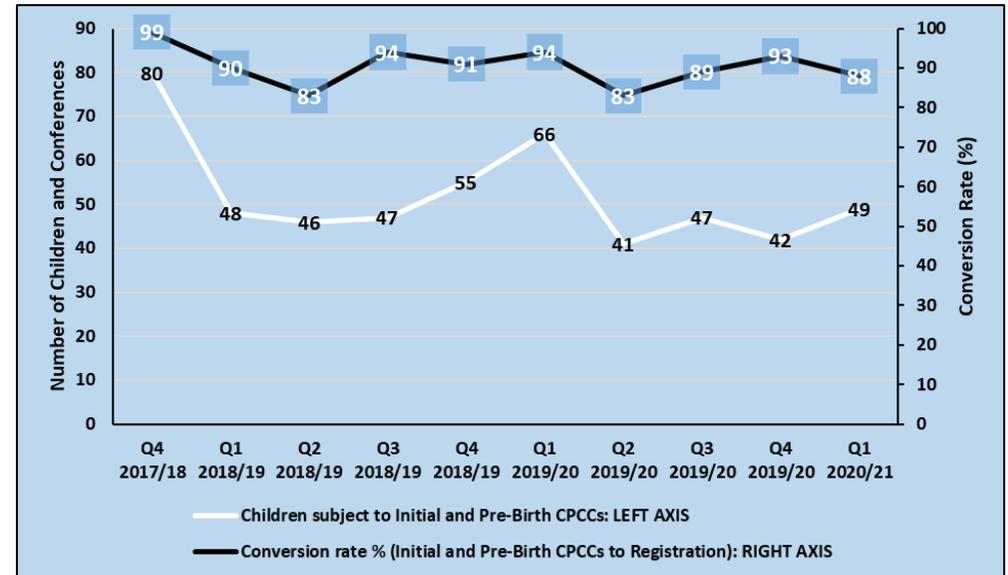
#### Analysis and Commentary

There has been a reduction in the number of children subject to an Initial or Pre-Birth CPCC through 2018/19 and 2019/20. These have settled in the most recent four quarters at a lower level than previous. The fact that the lowest figure of 41 children subject to CPCC predates the coronavirus pandemic suggests that these trends are not related to any impact of restrictions and rather reflect a continuation of the previously established pattern.

The reasonably high and stable conversion rate from CPCC to Registration was previously noted and is maintained. However, with reference to the previous page, where we have seen an increase in IRDs over the previous two quarters, this has not translated into more CPCCs.

#### Implications for the Child Protection Committee

It is requested that the CPC notes the data above and agrees to continue monitoring of these indicators. The CPC should be alert to any change in the conversion rate from number of IRDs to CPCC in the coming months, which may thereafter merit further scrutiny if a trend is evident.



Source: Social Work IT System

#### Scrutiny questions to support analysis of the data:

- How do the number of children subject to conference compare to the number of children subject to earlier stages of the Child Protection process (e.g. number of children subject to concerns received by Social Work, number of children subject to eIRD)?
- What is the conversion rate from Conference to Registration telling us – e.g. about thresholds?
- What are the reasons when children subject to conference are not registered; and are the needs of these children being met?

## CHILD PROTECTION REGISTER, REGISTRATIONS, DE-REGISTRATIONS AND RE-REGISTRATIONS

**Number of Children (including Pre-Birth) on the Child Protection Register, New Registrations, De-Registrations, and (see table) Re-Registrations within 18 months of de-registration**

### Analysis and Commentary

The steady reduction in numbers on the Register reached a low of 95 in Q2 2019/20 before increasing to 114 in Q1 2020/21. This is not due to more registrations but rather a decrease in de-registrations.

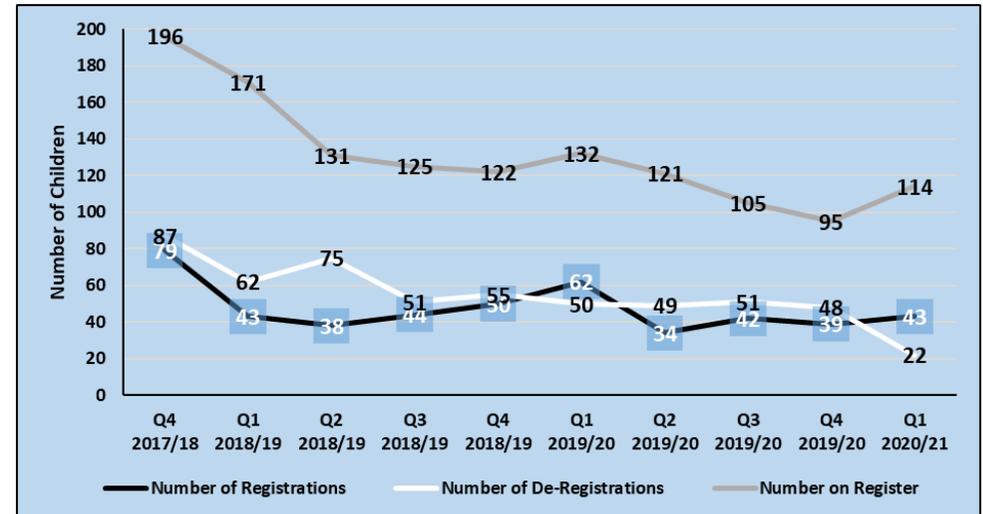
The Quality Assurance Subcommittee have noted that this may reflect a reluctance to remove children’s names from the Child Protection Register over the pandemic. Further input and comment have been sought around this point from the Children and Young People’s Review Team who chair CPCCs.

The number of re-registrations is small and so should be treated with some caution and no trend is evident.

Those children whose names are on the Child Protection Register are monitored and reported at the 18-month point. This is subject to separate reporting, but it should be noted that very few children reach this threshold.

### Implications for the Child Protection Committee

It is requested that the CPC notes the data above and agrees to continue monitoring of these indicators, with particular focus on the level of de-registrations.



Source: Social Work IT System

| Re-Registrations | 2017/18 | 2018/19 |    |    |    | 2019/20 |    |    |    | 2020/21 |
|------------------|---------|---------|----|----|----|---------|----|----|----|---------|
|                  | Q4      | Q1      | Q2 | Q3 | Q4 | Q1      | Q2 | Q3 | Q4 | Q1      |
| <b>18 months</b> | 5       | 4       | 7  | 6  | 4  | 11      | 9  | 2  | 8  | 11      |

Source: Social Work IT System (rolling six-month figure to quarter end)

- Scrutiny questions to support analysis of the data:
- What are the characteristics of the children newly, re- and de-registered – and are they changing over time?
  - For re-registrations, what has changed in their lives since de-registration, and what support(s) did they receive following de-registration?
  - For children currently on the Child Protection Register, how long have they been on the Register?

## CHARACTERISTICS OF OUR VULNERABLE CHILDREN AND YOUNG PEOPLE

### Age of Children and Young People at Registration

#### Analysis and Commentary

The low numbers involved in this chart can show fluctuations so should be borne in mind when analysing.

Q1 2020/21 shows a notable low of seven unborn children registered. One possible factor for this may be a reduction in home visits during the pandemic, resulting in less identification of risk in pregnancy.

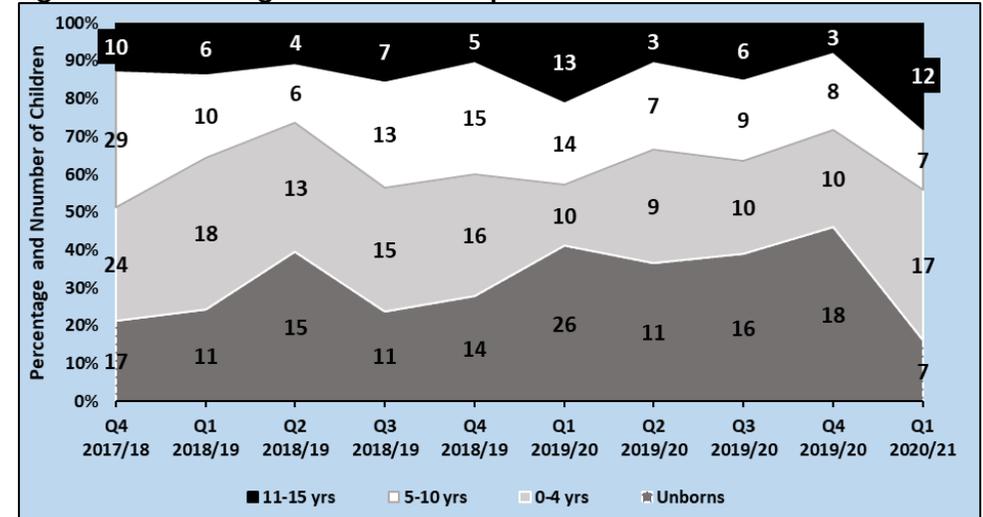
An increase in 11–15 year olds is evident. This may be due to some children in this age group being referred to Royal Hospital for Children and Young People for alcohol related issues where previously they would have been managed via adult hospital services.

Both of these figures only relate to one quarter and thus should not be treated of evidence of an emerging trend as yet.

#### Implications for the Child Protection Committee

It is requested that the CPC notes the data above and agrees to continue monitoring of these indicators.

Age of children registered in each quarter



Source: Social Work IT System (16-17 year olds not presented)

Scrutiny questions to support analysis of the data:

- What factors explain any change(s) in the age profile? For example, improved awareness and identification of concerns among age-specific workforces; impact of a recent Significant Case Review; impact of wider social, economic or service-related factors; etc.?
- Does local service provision reflect the age profile (and development stage needs) of newly registered children?

## **Concerns recorded for Children and Young People at Registration**

### **Analysis and Commentary**

The number of concerns recorded per child and the selection of specific concerns varies across Scotland.

Concerns recorded for domestic abuse have decreased in the last two quarters. In addition, the average level of parental mental health concerns are much lower this year as compared to the average previously.

### **Implications for the Child Protection Committee**

It is requested that the CPC notes the data above and agrees to continue monitoring of these indicators. The Reviewing Officers, who are responsible for the recording of concerns, have been consulted on this point and are satisfied that internal processes for feedback and discussion are in place to support consistent decision making.

|   | 2017/18    |          | 2018/19    |          | Edinburgh  |            |            |
|---|------------|----------|------------|----------|------------|------------|------------|
|   | Edin.      | Scotland | Edin.      | Scotland | Q3 2019/20 | Q4 2019/20 | Q1 2020/21 |
| <b>Child Placing Themselves at Risk</b>     | 1%         | 2%       | 2%         | 5%       | 2%         | 0%         | 0%         |
| <b>CSE</b>                                  | 2%         | 1%       | 2%         | 4%       | 0%         | 0%         | 0%         |
| <b>Domestic Abuse</b>                       | 50%        | 37%      | 40%        | 41%      | 45%        | 31%        | 35%        |
| <b>Emotional Abuse</b>                      | 30%        | 39%      | 26%        | 40%      | 5%         | 31%        | 14%        |
| <b>Neglect</b>                              | 26%        | 39%      | 44%        | 41%      | 33%        | 26%        | 33%        |
| <b>Non-Engaging Family</b>                  | 7%         | 25%      | 8%         | 27%      | 7%         | 8%         | 9%         |
| <b>Parental Alcohol Misuse</b>              | 7%         | 19%      | 18%        | 23%      | 7%         | 18%        | 5%         |
| <b>Parental Drug Misuse</b>                 | 28%        | 26%      | 27%        | 28%      | 14%        | 23%        | 23%        |
| <b>Parental Mental Health Problems</b>      | 26%        | 33%      | 45%        | 34%      | 12%        | 28%        | 28%        |
| <b>Physical Abuse</b>                       | 32%        | 21%      | 29%        | 25%      | 31%        | 18%        | 30%        |
| <b>Sexual Abuse</b>                         | 3%         | 7%       | 1%         | 9%       | 0%         | 26%        | 0%         |
| <b>Other (including Trafficking)</b>        | 4%         | 15%      | 5%         | 17%      | 2%         | 5%         | 5%         |
| <b>Total <u>Number</u> of Registrations</b> | <b>285</b> |          | <b>180</b> |          | <b>42</b>  | <b>39</b>  | <b>43</b>  |

Scrutiny questions to support analysis of the data:

- What factors explain any change(s) in the concerns profile? For example, genuine emergent concerns, training on specific concern(s) leading to increased identification, changes in how concerns are recorded, or impact of a recent Significant Case Review?
- Does local service provision reflect the most prevalent concerns identified?
- To what extent are parental concerns (e.g. domestic abuse; parental drug or alcohol misuse) shared with other Public Protection groupings to inform wider service planning?

**SCOTTISH CHILDREN’S REPORTER ADMINISTRATION DATA**

**Children and Young People in the Children’s Hearing System – Referrals and (see table) Child Protection Orders Granted**

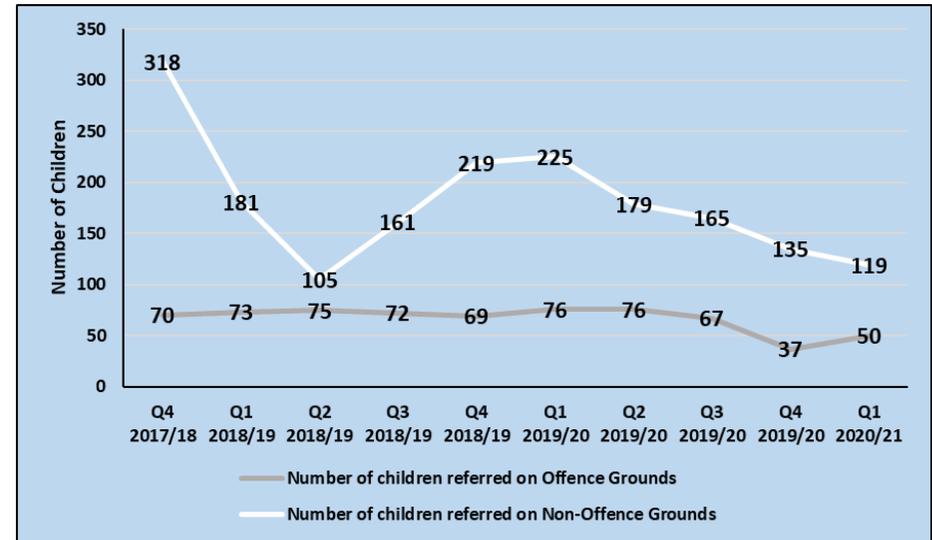
**Analysis and Commentary**

The number of children referred on non-offence grounds has reduced significantly across the reporting period. Offence referrals are relatively stable aside from a reduction in the last two quarters. Edinburgh is in line with national trends.

Referral rates have reduced further in the last two quarters and the impact of COVID19 skews these figures making it hard to identify any trends. Only urgent work was processed by SCRA during this period with non-urgent referrals, that may have led to a hearing, not being progressed. In addition SCRA have recently launched a new IT system which may further contribute to any changes in the figures.

**Implications for the Child Protection Committee**

It is requested that the CPC notes the data above and agrees to continue monitoring of these indicators. Should a further sustained trend be evidenced, the Committee is asked to endorse further evaluation and assurance activity.



Source: SCRA

| CPOs           | 2017/18 | 2018/19 |    |    |    | 2019/20 |    |    |    | 2020/21 |
|----------------|---------|---------|----|----|----|---------|----|----|----|---------|
|                | Q4      | Q1      | Q2 | Q3 | Q4 | Q1      | Q2 | Q3 | Q4 | Q1      |
| <b>Granted</b> | 9       | 14      | 1  | 7  | 11 | 9       | 10 | 12 | 9  | 15      |

Source: SCRA

- Scrutiny questions to support analysis of the data:
- What are the sources of the referrals to the Reporter (including whether from Child Protection Case Conference)?
  - What are the detailed grounds for the referrals?
  - How many and/or what proportion of Child Protection Orders were applied for but not granted? What were the reasons for them not being granted?

## CHILD PROTECTION PROCESSES TIMESCALES IN THE NATIONAL GUIDANCE FOR CHILD PROTECTION IN SCOTLAND

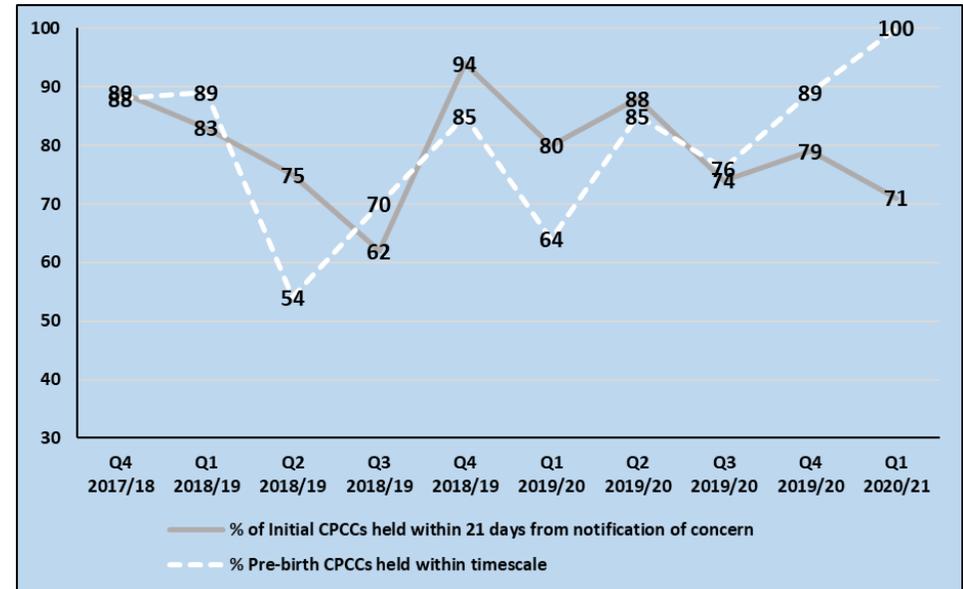
### Analysis and Commentary

There is variance across the reporting period in relation to the percentage of ICPCCs held within timescale. ICPCCs held within timescales have been under 80% for the last three quarters. The CYPRT have been approached for comment and to identify any barriers to achieving this timescale.

Smaller numbers are involved for Pre-birth CPCCs (approximately 50 per year compared to 100 for Initial) and so the percentage can be more variable. Over the last two quarters, timescales for PBCPCC have been achieved at a higher level.

### Implications for the Child Protection Committee

It is requested that the CPC notes the data above and agrees to continue monitoring of these indicators, particularly if there is any decrease in timescales being achieved.



Source: Social Work IT System

Scrutiny questions to support analysis of the data:

- Where timescales are being met and/or are improving, what factors are contributing to this?
- Where timescales are not being met, what are the reasons for this? For example, are they due to delays that are in the child's interests, or due to the availability of resources?
- When are subsequent Core Group meetings and Review Conferences scheduled, and are these being held as planned?
- What is the quality, and impact, of the Child's Plans developed at these meetings?

## REPORTER DECISIONS WITHIN 50 WORKING DAYS OF REFERRAL RECEIPT

### Analysis and Commentary

There was generally a lower level of performance through 2018/19 and 2019/20 compared to 2017/18 where figures were above 90%.

Recent lower figures are impacted by COVID-19 as SCRA moved to business continuity and only urgent working was being progressed during March. This is expected again from January 2021 and so the improvement in Q1 2020/21 is not anticipated to be maintained.

The delayed cases are now being monitored through weekly data reports and are being targeted to reduce any further delay.

### Implications for the Child Protection Committee

It is requested that the CPC notes the data above and agrees to continue monitoring of these indicators.

| 50 days Reporter Decision | 2017/18 | 2018/19 |    |    |    | 2019/20 |    |    |    | 2020/21 |
|---------------------------|---------|---------|----|----|----|---------|----|----|----|---------|
|                           | Q4      | Q1      | Q2 | Q3 | Q4 | Q1      | Q2 | Q3 | Q4 | Q1      |
|                           | 89      | 82      | 78 | 72 | 76 | 83      | 74 | 72 | 66 | 83      |

Source: SCRA (percentage of decisions within 50 working days of referral)

Scrutiny questions to support analysis of the data:

- Given the national target that 78% of decisions are made by the Reporter within 50 working days of referral receipt, how do timescales locally compare?
- Where the target is being met and/or is improving, what factors are contributing to this?
- Where the target is not being met, what are the reasons for this? For example, are they due to delays that are in the child's interests, or due to the availability of resources?

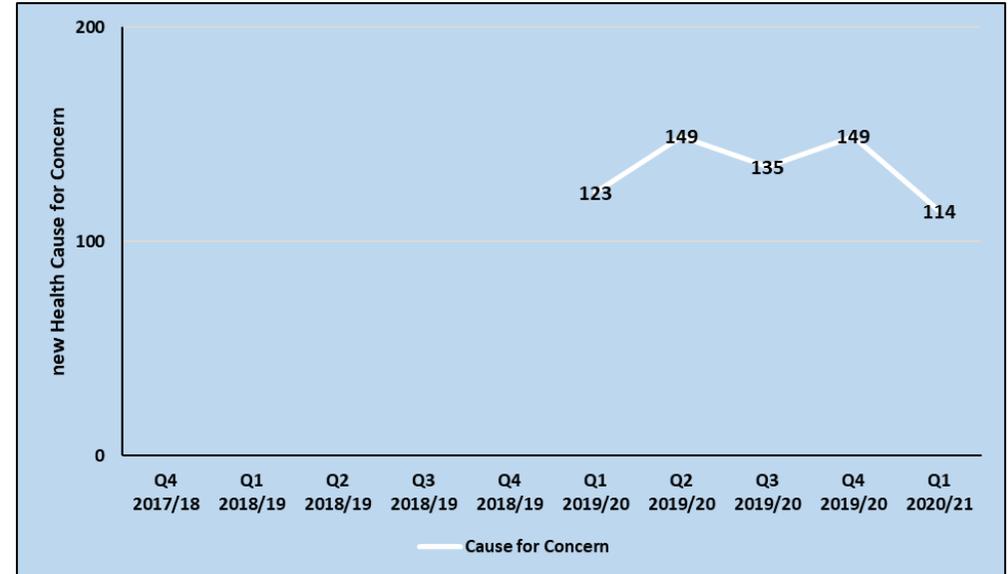
## CAUSE FOR CONCERN RECORDS OPENED – NHS LOTHIAN

### Analysis and Commentary

This is a new element of the dataset – an outline of this process is provided as Appendix 3. Following previous reports of the dataset, we have commenced collation of NHS cause for concern records. This is an attempt to gather additional data around activity which precedes formal child protection processes for pre-school aged children.

### Implications for the Child Protection Committee

The Committee is asked to note the inclusion of this new data and agree to further monitoring.



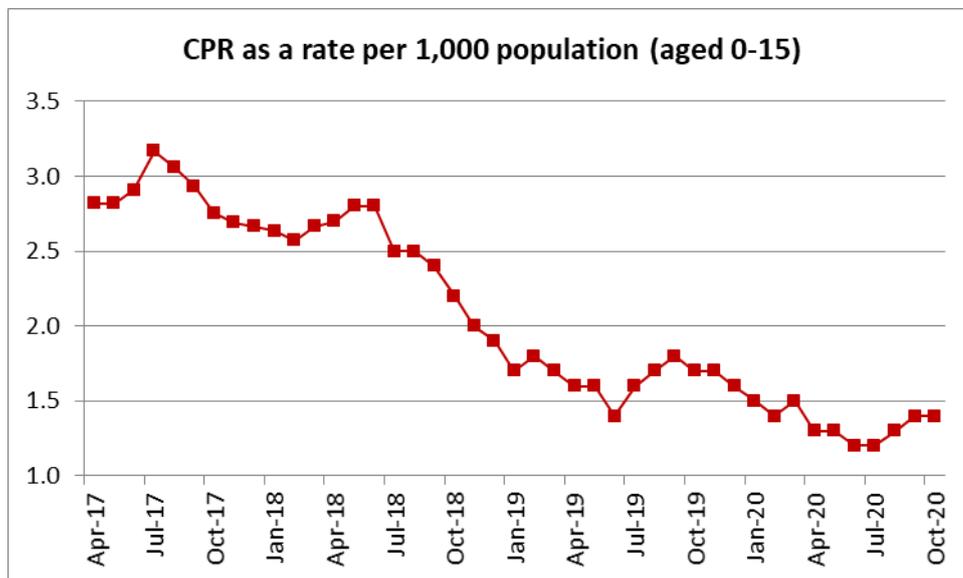
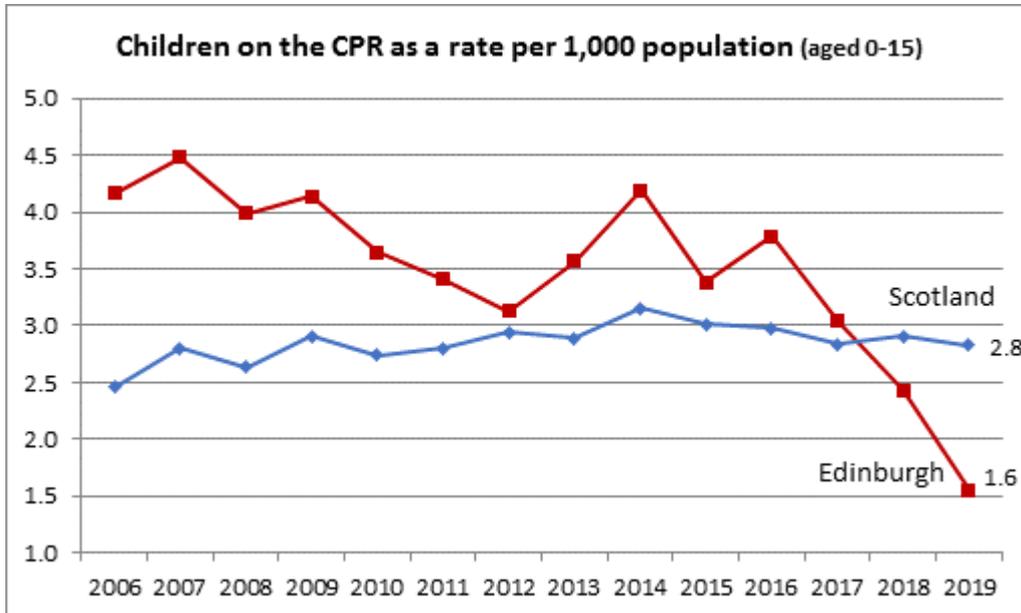
Source: NHS Lothian

Scrutiny questions to support analysis of the data:

- How does the rate of Cause for Concerns relate to IRDs, CP registrations etc?
- What can this data tell us about children's wellbeing prior to formal child protection procedures?

### APPENDIX 1: CHILD PROTECTION RATE

The charts below show the number on the Child Protection Register as a rate per 1000 children aged 0-15.



**APPENDIX 2: CHILD PROTECTION PROCESS**

The diagram below shows the children protection process, noting that many of the Minimum Dataset indicators report on key stages of this process.



### APPENDIX 3: Summary of CFC record process in NHS Lothian

A Cause for Concern (CFC) record for a child in NHS Lothian is a system that identifies pre-school children, including unborn babies, who have been assessed as being at risk. A CFC record should be opened for a child if certain criteria are met or after assessment, one or more factors are impacting on the safety, health or/and development of the child. These could be parental and/or environmental factors. The primary professionals using this system are Health Visitors (HV) and Family Nurses (FN).

All HVs and FNs will undertake case supervision for each child with an open CFC record with a Child Protection Advisor on a minimum of a 6 monthly basis as set out by the NHS Lothian Child Protection Case Supervision Policy.

For example, all pre-school children who are on the CPR, are Looked After, have been to CPCC irrespective of outcome will all have an open CFC record. The majority of children with an open CFC record do not have current child protection processes in place. There are between 2000 and 2400 children in NHS Lothian who have an open CFC record, relating to the time of year. When a child moves onto school, the CFC record is closed automatically even where risk remains as the child is attending school and the balance of care shifts to education as the universal service. Those children will be highlighted to the School Nurses and Education Staff although most will be known to education through ongoing children's plans.

Otherwise, CFC records are closed when risks are removed or mitigated and the child is safe with their needs being met. Supports may still be in place. CFC records are often open before and after a child experiences child protection processes.

HVs will usually have increased contact with the identified child(ren) and their families to offer supports and interventions to reduce risk. Home visiting frequency and patterns will be dependent on need. The health professionals work collaboratively with any other involved health, social, educational and/or 3<sup>rd</sup> sector professionals.

On TRAK, the universal electronic recording system in NHS Lothian, an open CFC record is depicted by an icon that is visible to all TRAK users. This is helpful for example if a child is attending hospital or other appointments. (There is also icon denoting that a child is Looked After and an alert if they are on the Child Protection Register).

# **Evaluation of the impact of Edinburgh Child Protection Committee training**

## **Summary**

This research was commissioned by the Edinburgh Child Protection Committee (ECPC). The Committee is a partnership of organisations including:

- The City of Edinburgh Council
- NHS Lothian
- Police Scotland
- Voluntary sector and partner agencies

The need for child protection training (both at single agency level and inter-agency level) is recognised by ECPC (ECPC 2018). The ECPC Learning and Development Sub-committee has responsibility for commissioning and assuring the quality and delivery of interagency training and, as part of their annual report (ECPC 2018) the Committee noted its plans to commission an independent evaluation of inter-agency child protection training to help provide insight into the impact and effectiveness of that training on practice.

This is the report of the evaluation of two Edinburgh Child Protection Committee training courses delivered between September 2018 and June 2019:

### **Course 1: Interagency Risk Assessment and Child Protection Processes**

### **Course 2: Child Sexual Exploitation Awareness Raising**

The study was carried out by an independent researcher from the University of Stirling between July and December 2019. The key question which the research sought to answer was "What is the impact of these child protection courses on practice?" To address the question, data were collected from participants through individual course evaluation forms and through semi-structured interviews with a representative sample of attendees. Through completion of an online survey, data were also gathered from managers whose staff attend these courses. Thematic analysis of the data was carried out to identify common themes and patterns with regard to the impact of the courses. Findings were reviewed using an adaptation (Carpenter 2005) of Kirkpatrick's (1967) framework for the evaluation of professional education.

### **Key findings are as follows:**

Participants' reactions to both courses were overwhelmingly positive and they found the courses to be interesting and informative. Delivery was very effective and content was felt to be appropriate to most. Some data suggested that the Interagency Risk Assessment and Child Protection Processes Course could be developed further to meet the learning needs of professionals working in the third sector even more effectively.

The courses were designed to support critical reflection on practice and participants reported development in their understanding of children, young people and adults who had experienced adversity and maltreatment. The stated learning outcomes of the courses may

benefit from revision to more accurately reflect the strengths apparent in supporting integration of knowledge in practice.

Participants and managers of those who had attended the courses felt that both courses have had a positive impact on practice. A common theme was that participants felt more confident in engaging in child welfare and protection processes as a result of their learning. Participants are likely to have enhanced awareness of the context for practice, and fuller understanding of child welfare and protection systems and processes. Accounts of the benefits included the acquisition of new subject knowledge and additional benefits of meeting colleagues from different agencies and geographic areas as a consequence of the inter-agency mix of participants. The courses may impact positively on practice through more confident and assertive reporting of concerns and improved communication between professionals and with service users.

Limitations in the data available and the scope of the research design mean that it is not possible to say with any level of confidence what impact either course has had directly on outcomes for service users. Although practitioners were able to report on course content and recall of key learning, further research will be required to establish the ultimate value of the courses in terms of their capacity to improve the lives of children and families affected by adversity.

Recommendations are tentative, given the limitations of the study, but suggest that both courses continue in their current formats with consideration given to:

- pre-course selection and preparation systems to ensure that attendees benefit from learning opportunities at an appropriate time for their professional development
- reviewing the stated learning outcomes for both courses to ensure that they are effectively focused on the skills required to put knowledge into practice
- suggested developments in pedagogy in the Interagency Risk Assessment and Child Protection Processes course
- strengthening learning opportunities for participants from the voluntary sector
- further developing mechanisms to support the embedding and ongoing review of learning in practice
- reviewing course evaluation sheets to gather optimal data course developments and future evaluations

# Main Report

## Introduction

In 2018 Edinburgh Child Protection Committee (ECPC) commissioned the University of Stirling to carry out an evaluation of two of its training programmes. Dr Duncan Helm of the University's Faculty of Social Sciences carried out this research in 2019 with support from the ECPC Lead Officer and administrative colleagues. The two courses being evaluated are delivered to a range of professionals working with children, young people and their families who may be subject to concerns for child wellbeing and protection. They are:

- **Interagency Risk Assessment and Child Protection Processes**
- **Child Sexual Exploitation Awareness Raising**

The **Interagency Risk Assessment and Child Protection Processes** course has been provided across the City of Edinburgh since 2005. It is a Level 2 course designed to meet the needs of professionals who have regular, direct involvement with children, young people and their families and who are likely to be contributing to assessment of needs and risk, child's planning meetings, child protection case conferences and core groups. The aim of the course is to promote a clearer understanding of agency roles and responsibilities within the context of child protection. It is delivered locally over two days by tutors from a range of settings:

- Employee Development Officer - Child Protection, Children & Families Service
- Child Protection Learning & Development Lead, NHS Lothian
- Police Officer, Edinburgh Public Protection Unit
- Reviewing Officer, Children & Young Persons Reviewing Team, Children & Families Service

Learning outcomes are statements that describe the knowledge and skills that a 'typical' student should acquire through participation in a course. They should make it clear what a person will be able to know and do on completion of the course. The learning outcomes published for the Interagency Risk Assessment and Child Protection Processes course are as follows:

- Define national and local context for child protection
- Describe roles of agencies involved in child protection
- Know the child protection processes and procedures
- Explain concepts of risk assessment and implications for planning
- Apply key principles for the appropriate sharing of information.

The Interagency Risk Assessment and Child Protection Processes course was last evaluated in 2010. The 2010 evaluation was carried out by members of the ECPC Training sub-committee and an independent consultant with a remit to,

“evaluate the learning outcomes of the training and to investigate the extent the training is put into practice by participants” (City of Edinburgh CPC 2010, p3).

The 2010 evaluation included a literature review and data from interviews with workers who attended the training and a focus group of managers whose staff members had attended the training. The main recommendation of the report was

"...that the inter-agency training continues in its present format and that consideration is given to further and more in-depth analysis of the benefits for practitioners and the impact on outcomes for children." (ECPCP 2010 p14).

The **Child Sexual Exploitation Awareness Raising** course is delivered over 1 day by trainers from Barnardos and NHS Learning and Development. It is a level 1 (awareness raising) course and has been delivered in Edinburgh since 2016 and has not previously been subject to formal external evaluation. Learning outcomes for this course are stated as follows:

- Explain the key terminology and definitions in relation to CSE
- Identify and describe the key vulnerability factors, risk indicators and spectrum of experiences in relation to CSE
- Recognise the importance of information sharing and multi-agency partnership in responding to children and young people

### **Research question**

Previous evaluations and reviews of both courses had indicated that content and delivery were appropriate and satisfactory. What remained unknown was what effect the courses would have on the practice behaviour of participants as a consequence of their learning. Do these courses result in participants having higher levels of skills and knowledge, and do participants practice differently as a consequence? Therefore, the key question which this current evaluation sought to answer was:

"What is the impact of these two courses on the practice of participants?"

To help address the overall research question, sub-questions were developed:

- what do participants remember and value most from the courses?
- To what extent do participants think that they have achieved the stated course learning objectives?
- What evidence can be found that may indicate the impact of the courses on practice behaviour?
- What evidence can be found that may indicate the impact of the courses on outcomes for service users?

A research project was therefore designed to gather data so that relevant evidence of impact could be examined in answer to these questions. Full details of the methods, findings and conclusions are presented in the body of the report.

## **Structure of Report**

This report is presented in three sections.

**Part 1** provides details of the research design, including methods used for data collection, coding, data analysis and strengths and limitations of the chosen design.

**Part 2** considers the course-specific findings for each course separately, identifying key themes and messages emerging from the data in relation to the unique learning objectives and learner experiences on each course.

**Part 3** of the report identifies cross-cutting themes before offering an analysis of the overall findings and their implications for Edinburgh Child Protection Committee and future course development and provision

## Part 1 - Research Design

The aim of this research was to evaluate the effectiveness of two courses of professional education and impact of learning on participants and on their practice. A range of different research designs may be employed to evaluate the impact of professional education and all have different strengths and weaknesses. The key designs and their relative merits and drawbacks are summarised below:

| Design                              | Strengths and Weaknesses   |
|-------------------------------------|--|
| Follow-up (post test): single group | Useful as formative feedback to the trainers but cannot inform outcomes  |
| 'Before and after': single group    | Quite commonly used but outcomes cannot be ascribed exclusively to the training intervention   |
| Post-test: two groups               | Requires random allocation of students to different conditions.  |
| Pre-test, post-test: two groups     | Natural comparison groups can be used.<br>Random allocation preferable.  |
| Repeated measures, two groups       | Students can be randomly assigned to two groups, both of which get the intervention at different times. But requires three measurements. |
| Times series: one group             | Requires multiple, unobtrusive observations rather than formal tests.  |
| Single-subject experiments          | Requires repeated measures of the same person before, during and after the intervention. Small samples.                                  |

*Adapted from Carpenter 2005*

The most common way to evaluate training is through the single group follow-up design; usually through completion of an individual participant's evaluation sheet. While it can help to inform course developments, it is very limited as a tool to evaluate the impact of courses as there is no information available about the level of participants' skills and knowledge prior to the course and it does not provide direct evidence of the outcomes of learning. More robust designs, such as those using two test groups to afford comparison, or those measuring levels of skills and knowledge before and after training, are recommended but also require more planning and are more resource-intensive for research.

More strongly experimental designs, including single-group tests and multi-group tests, were not feasible in this evaluation, both in terms of the resource implications and available

sources of data. As the main aim of the research was to evaluate the impact of the courses on practice, additional data was sought which could establish what difference, if any, the courses made to professional practice. Kirkpatrick's initial work (1967) and subsequent studies (e.g. Barr 2000, Freeth *et al.* 2002, Carpenter 2005) have informed a taxonomy of outcomes of educational programmes which helps to clarify what kind of outcomes are to be measured in evaluation:

|  |
|--|
| Level 1: <b>Learners' Reaction</b> – These outcomes relate to the participants' views of their learning experience and satisfaction with the training.   |
| Level 2a: <b>Modification in Attitudes and Perceptions</b> –<br>Outcomes here relate to changes in attitudes or perceptions towards service users and carers, their problems and needs, circumstances, care and treatment.   |
| Level 2b: <b>Acquisition of Knowledge and Skills</b> – This relates to the concepts, procedures and principles of working with service users and carers. For skills this relates to the acquisition of thinking/problem solving, assessment and intervention skills. |
| Level 3: <b>Changes in Behaviour</b> - This level covers the implementation of learning from an educational programme in the workplace, prompted by modifications in attitudes or perceptions, or the application of newly acquired knowledge and skills             |
| Level 4a: <b>Changes in Organisational Practice</b> – This relates to wider changes in the organisation/delivery of care, attributable to an education programme.  |
| Level 4b: <b>Benefits to Users and Carers</b> – This final level covers any improvements in the well-being and quality of life of people who are using services, and their carers, which may be attributed to an education programme.                                |

The approach taken in this evaluation was, by necessity, limited to a post-test only design and this, in turn, limits the extent to which higher-level learning outcomes (such as changes in practice behaviour) can be assessed. The courses to be evaluated had been delivered previously and evaluation data had been collected from all attendees on completion of the teaching input. While this data may be of limited use in itself, the researcher combined the data from evaluation forms with two further data sources to allow a level of triangulation between self-reporting on learning and accounts of impact from attendees' managers. This design also facilitated consideration of the impact of training over time as participants and managers could reflect on changes in behaviour since the course that may be a consequence of learning.

Course evaluations, completed by individual attendees, can provide data at level 1 of Carpenter's taxonomy but, to go beyond the immediate reaction and to begin to understand the impact of training on skills, knowledge and values as enacted in practice, further sources of data are required. In addition to course evaluations, data were gathered at follow-up interviews with a representative sample of course participants. In these semi-structured interviews, respondents were asked to evaluate the impact that the course had on them in

relation to the stated and specific learning outcomes of the course. As self-reporting can be unreliable and subject to self-confirming bias (Tversky and Kahneman 1974) respondents were asked to consider how others may have experienced changes in their practice behaviour attributable to their learning. Finally, managers of staff who have taken the two courses were asked for their views on the impact of training. Taken together, these three sources of data offer some protection against self-reporting bias and may provide insight into changes in practice behaviour beyond declarative knowledge i.e. someone may be able to name a relevant theory of research finding but this does not mean that this declared knowledge will make a difference to their actual practice.

### Data collection

Three sources of data were selected for inclusion in this evaluation

1. individual participants' course evaluations
2. interviews with a representative sample of participants
3. an online survey completed by managers of participants

**Individual participant evaluations** - these are completed at the end of each course and provide basic data on the professional role of the attendee and their comments in response to questions about the quality of the course and their learning. (see appendix 1 for template). For the period of review (September 2018 to June 2019) **28** evaluations were provided for the course on Child Sexual Exploitation Awareness Raising and **139** evaluations for the course on Interagency Risk Assessment and Child protection Processes. Because almost all attendees complete this evaluation sheet the data provided can be considered representative of the larger group of people who have attended these courses in their current form. Copies of ECPC evaluation forms are held by the CPC administrator and relevant evaluations for these courses (within the stated time period) were collated by the CPC administrator for the researcher.

**Semi-structured interviews** - People who had taken the courses in the previous round of delivery (September 2018 to June 2019) were contacted via the CPC administrator and invited to take part in individual semi-structured interviews. They were provided with information about the research (see appendix 2) and consent form (see appendix 3) to be signed and returned before taking part in the research. Those who agreed to take part were then contacted by the researcher, through the CPC administrator, and invited to select a time/date for interview. The following numbers of participants from each course delivery agreed to take part in the research:

| Sector      | Child Sexual Exploitation Awareness Raising | Interagency Risk Assessment and Child Protection Processes |
|-------------|---|--|
| Health      | 6   | 15   |
| Social Work | 4   | 0  |

|                                  |           |           |
|----------------------------------|-----------|-----------|
| Education                        | 3         | 1         |
| Voluntary Organisations and Army | 1         | 19        |
| Police                           | 1         | 0         |
| Housing                          | 0         | 1         |
| <b>Total</b>                     | <b>15</b> | <b>36</b> |

Interview times were arranged using Doodle Poll and a choice of 4 different venues was given to minimise any difficulties which participation may cause. Uptake of the poll was slow initially, prompting the need for further emails from the CPC encouraging responses.

Ultimately, 6 people were interviewed. Of those who had taken the **Child Sexual Exploitation Awareness Raising** course, interviews were carried out with:

- 1 Health Visitor
- 1 Child and Family Social Worker
- 1 Deputy Head Teacher

From the **Inter-agency Risk Assessment and Child Protection Processes** course, interviews were carried out with:

- 1 Senior Coordinator for volunteers at a third sector organisation
- 1 Housing Support Worker
- 1 Mental Health (Addictions) Nurse

Interviews lasted between 45 - 60 minutes and, with the consent of participants, were audio recorded.

**Online managers' questionnaire** - Managers who had staff attending the two courses during the period September 2018 to June 2019 were invited to take part in the research by completing an online questionnaire. Information about the research project (see appendix 4) an online consent form (appendix 3) were provided and consent gained before managers completed the questionnaire. The questionnaire was administered using JISC Online Surveys. This particular platform is GDPR compliant and ensures that data management on this project continued to meet the ethical standards set out in the University of Stirling ethical approval process.

### **Data analysis**

Data from previous evaluations and managers' questionnaires included some quantitative data from Lickert scales and some qualitative data. Data from Lickert scales was reduced for presentation in chart form and qualitative data was subject to thematic analysis to identify common themes and patterns of meaning emerging from across responses (Bryman 2016). Interviews were recorded and these recordings were then transcribed in full for thematic

data analysis. In addition to providing an accurate account of responses, full transcription allows for the direct reproduction of raw data (participants' own words) within this research report to illustrate and clarify points raised in analysis. Because of the low number of responses, data collected in the online survey has been replicated in full in this report and coded by the researcher alongside data from evaluations and interviews.

### **Limitations**

Within the confines of the existing data and costs of research, it was not possible to carry out a "before and after" evaluation so it is not possible to say with significant reliability whether the outcomes identified in the data can be directly attributed to the courses. It was also not possible to speak to service users to better understand the ultimate benefit of the training in terms of outcomes for children, young people and families.

The numbers of people who agreed to take part in interviews and who completed the managers' questionnaire were ultimately too low to allow broader generalisations to be drawn from the findings. However, the spread of roles and professions represented in the interviews has ensured that data collected were representative in respect of the impact of the courses across a broad range of professional perspectives.

Self-reporting is considered to be a relatively low-reliability indicator of impact of training on practice. Attendees' declarative knowledge (e.g. their ability to recall course content) may or may not be matched with consequential changes in practice behaviour. This weakness was countered by questions in the interview designed to elicit data on how others (e.g. colleagues, managers and clients) may have perceived changes in practice from the course. However, this is highly dependent on the attendee receiving such feedback in the first instance and is still a form of self-reporting.

The managers' questionnaire was completed anonymously and it was not possible to link their comments to a specific agency or profession. This was not particularly problematic for subsequent data analysis as the overall response rate was too low for conclusions to be drawn from this data set about learning outcomes for specific groups.

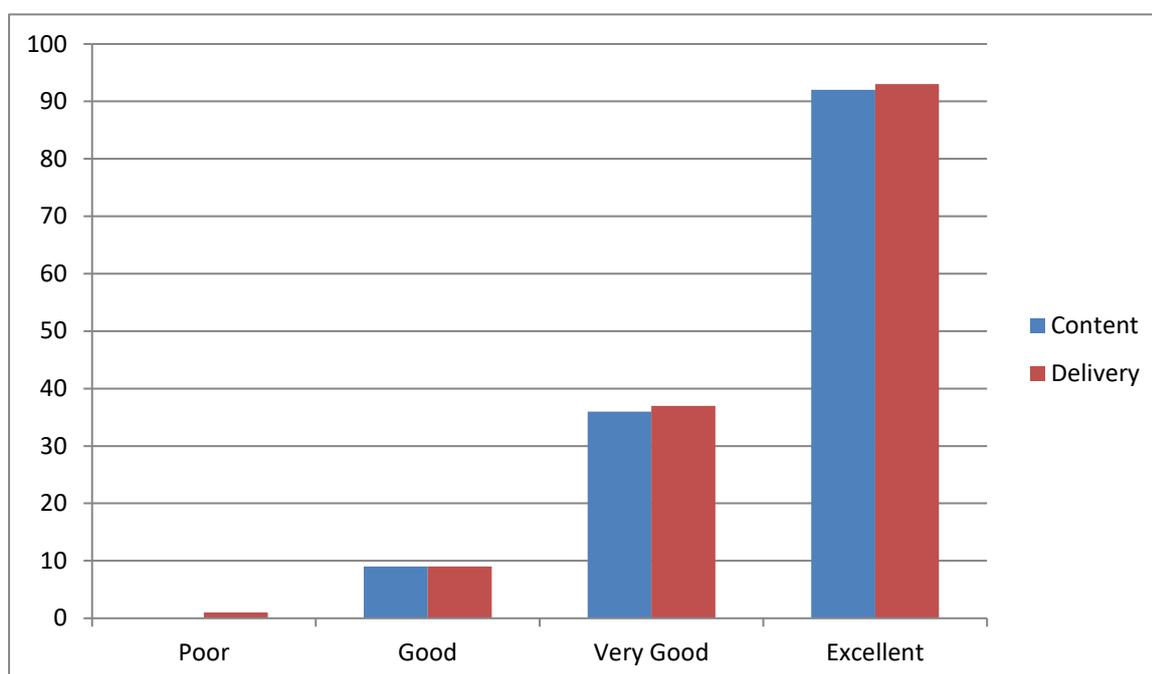
## Part 2- Findings

In this section of the report, findings will be considered for both courses separately. Findings will be structured so that data from individual evaluations are considered first, followed by data from the interviews and then data from manager's questionnaires. Key findings are analysed for each course and cross-cutting themes are identified for fuller consideration and conclusions in Part 3 of the report.

### 2.1 - Interagency Risk Assessment and Child Protection Processes

#### 2.1.1 - Findings - individual evaluations

##### 1. Attendees were asked to rate the course for content and delivery



These individual evaluations consistently indicated that attendees had found the course to be a good learning experience. Although the evaluation form gave no place for qualitative comment on these scales, many attendees gave specific comment elsewhere on the form about the teaching skills and level of knowledge that the presenters had displayed.

##### 2. Attendees were asked to list three things that they had learned from the course.

Across the evaluations, there was great variety in the points of learning which individuals prioritised in their responses. However, the responses which were most prevalent were as follows:

**Learning about processes and systems** - most respondents listed key learning in relation to child welfare and protection processes and systems to support identification, assessment and intervention in child abuse and neglect. Highest levels of response here were in learning about referral processes and about Child Protection Case Conferences and Children's Hearings (and the differences and connections between the two systems). Responses also

indicated significant learning in relation to the working details of these processes and systems such as expectations of attendees, functions of core group meetings and meaning of terms such as "grounds of referral" to the Children's Reporter.

**Interagency communication and collaboration** - most prevalent here by a considerable degree was learning about different roles in child protection. There was frequent specific comment on having a raised awareness of the role of Police and appreciation of the scale and complexity of the social work task in child protection. Next most prevalent was learning about recording and communicating effectively when concerns are raised about a child or young person. Significant numbers of attendees reported learning in relation to thresholds and effective practice in raising and evidencing concerns.

**Tools** - Here, the highest recorded levels of response were in relation to learning about the risk assessment matrix and (more generally) comment about tools for assessment and identifying significant harm. After this, the most commonly reported area of learning was in relation to the SHANARRI wellbeing indicators, chronologies and other resources for assessment.

**Policy and practice approaches** - comments here were specifically in relation to the Safe and Together approach and the Getting It Right approach. Within the second topic, some more specific mention was made of learning about the Named Person.

**Specific topics and issues** - a number of attendees noted key learning in relation to distinct subjects like coercive control or particular websites. Some also listed key learning in a broader sense such as the significance of their reflections on practice for their future practice.

### **3. Attendees were asked to list topics they felt were missing from the course that could be included in the future?**

Most responses were "nothing" or "don't know". The most significant specific topic deemed to be missing was the perceived failure of the course to address the needs of attendees from voluntary organisations. A number of people felt that the course was geared to professionals in Health or Children's Services settings and that more information was needed on what happens (and what expectations are) after a referral is made to Social Care Direct. A number of responses indicated that more content relating to toolkits and further resources would be beneficial.

### **4. Attendees were asked to say in what way the course was appropriate or inappropriate to their work**

The common response construction here was to say that the course was/was not relevant because the attendee's job did/did not, involve them working with children and young people. For example, one responded

“Most info just not relevant to me as a don't work in Health”

and one noted that the course was

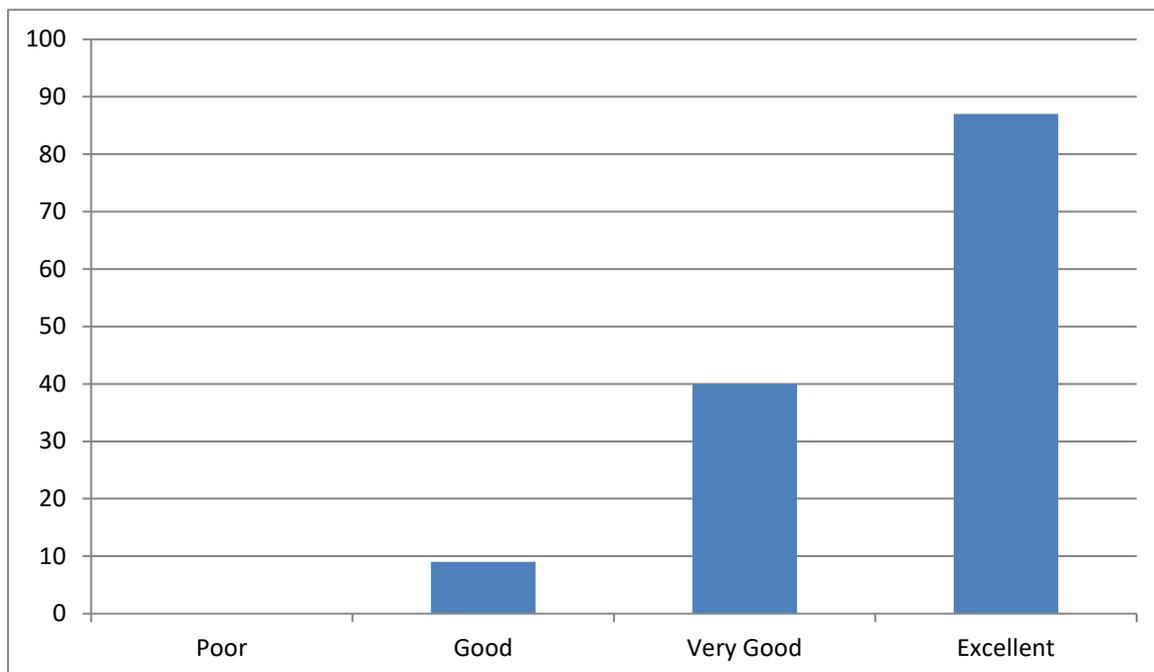
## "Highly appropriate for HV" (Health Visiting)

Some people who were not working directly with children and young people felt that the course gave them helpful contextual knowledge for potential future involvement in child protection processes and for working with adults who had childhoods likely to have been affected by adversity.

### **5 Attendees were asked what further learning needs they had identified for themselves as a result of attending the course**

Responses were commonly linked to the attendee's role. e.g. "I'm a support worker so..." and commonly reflected a desire to learn more about specific topics or to gain confidence in working with child protection systems. The list of topics for desired future learning was very broad and it was not clear how these were linked to attendance at the course (e.g. Talking Mats, adult protection, gender-based violence). A number of responses indicated planned attendance at future training events.

### **6 Attendees were asked to rate how they would rate the session overall**



Overall course ratings were slightly less enthusiastic than the initial comments on Content and Delivery but were still overwhelmingly positive. Although there was no space in the evaluation form for qualitative feedback, many attendees used the margins to offer thanks to the presenters and to indicate how much they had enjoyed the course ("The training has been fantastic" "Really enjoyed it" "great course"). One presenter was named in person on several occasions when attendees commented on the quality of the course delivery ("fantastic presenting – you're very engaging", "Inspiring!", "Made the two days really interesting and easy to engage with").

## **Analysis of individual evaluation data**

**Delivery** - Positive comments about delivery were directed at specific presenters who were valued for their ability to engage with attendees and present effectively. Developmental feedback was directed mainly at the input from Police Scotland. This input clearly did contribute to learning as many commented specifically on learning about the role of Police in CP. However, several attendees noted that the input was perhaps over-long and less engaging than others. "Bit death by PowerPoint" Please give Police a time limit". Having knowledgeable professionals involved in delivery is important for content but there can be challenges in matching this expertise to equally high standards of teaching. Consideration may be given to developing the Police input to vary the style of delivery and promote deeper levels of learning. This might be achieved through approaches already used in other sections such as case studies, use of video and practice-based reflective exercises. Consideration should be given to how best to secure, maintain and develop the level of pedagogical skill required in combination with professional knowledge to be able to deliver this kind of course effectively.

**Content** - Delivery was by varied materials that supported a range of different learning styles. This is a strength that should be built on. Case studies are effective tools for promoting critical reflection on action (Schön 1991) and can support dialogue across professional boundaries that can, in turn, support effective inter-professional working. There is perhaps an opportunity here to develop these exercises so that the voluntary sector is more strongly represented, both in terms of referral and ongoing role in support and protection. The level of complexity appears to be appropriate to attendees as there were very few negative comments about ability to engage with materials. Some commented that, because of their role and experience, the course was a reminder rather than a provider of knowledge. Selection processes can ensure that participants' learning needs are accurately mapped to level and continual updating of the content ensures that it remains relevant to practitioners, even when being taken as a repeat or "refresher".

**Learning** - Attendees mainly reported learning about organisational processes, risk assessment practice/tools and roles in working together. This matches with the 4 stated learning outcomes for the course, with more reporting learning about roles and processes and fewer reporting learning on local context and risk assessment. Attendees reported learning about the functions and differences between the child protection system and Children's Hearings System, and their learning about the legal and policy basis underpinning them (e.g. grounds of referral and timescales)

**Impact** - While most comments reflected the acquisition of procedural knowledge (the "how to" of things like timescales and attendance at meetings) a significant minority reflected at a deeper level on the importance of these structures and the significance of learning to their own role now and in the future. Different levels of critical engagement with course content is to be expected in a mixed cohort of learners but the Committee may wish to consider the mix of surface and deep learning (Cooper 2005) in the course so that opportunities are built into the delivery for participants to consider the "why" of practice as well as the "how". Reflective exercises, already part of the course design, are opportunities to explore values and tensions in practice from different professional perspectives. Attendees reflected learning about process and this included important structures for inter-professional

gathering and sharing information. There was a significant level of comment in evaluations on the issue of language and communication. For example, one comment was about "learning more about lingo" and others commented on learning what is needed to make an effective "case" or referral to Social Care Direct. We are reminded that communication in child protection is not just about transferring data but is about transferring meaning (White and Featherstone 2005) and participants appear to have been able to use the shared learning environment to consider this from their professional perspectives.

**Missing topics** - Few participants made comments on missing topics but a significant minority reported concerns that course does not address the needs of the voluntary (or "third") sector sufficiently. Some felt that the course was variously too focused on Health or Social Work but none commented on how this manifested or what could be done to improve it. Consideration may be given to consultation with voluntary sector representatives in reviewing the course materials so that this concern may be addressed in terms of focus and content.

**Appropriateness or inappropriateness of course to participants' work** - Most responses were structured to match "appropriate"/"inappropriate" to their role rather than content to task e.g. "Most info just not relevant to me as a don't work in Health" or "No contact with children in my work so only helpful in own volunteering work". "very relevant to me as I work with vulnerable families". Some reflected at a technical level i.e. it was appropriate because they needed this knowledge in their role. To support deeper reflection, the question could ask how learning from the course will *inform* their work.

**Further learning needs** - There was significant variation in responses to this question. Responses included child development, trauma, talking mats, writing reports, COEP, Safer families, Adult Protection, gender-based violence, emotional abuse, and neglect. It was not clear what the links were between these identified learning needs and the course content. It is possible that the question could be refined to gain more helpful data but some responses appeared to more connected to individuals than the impact of the course. A number of attendees commented on the motivation that the course had given them to study further (either alone or via further courses) and they appear to have appreciated and benefitted from the opportunity to identify further resources and learning opportunities during the course.

### **Key findings for consideration**

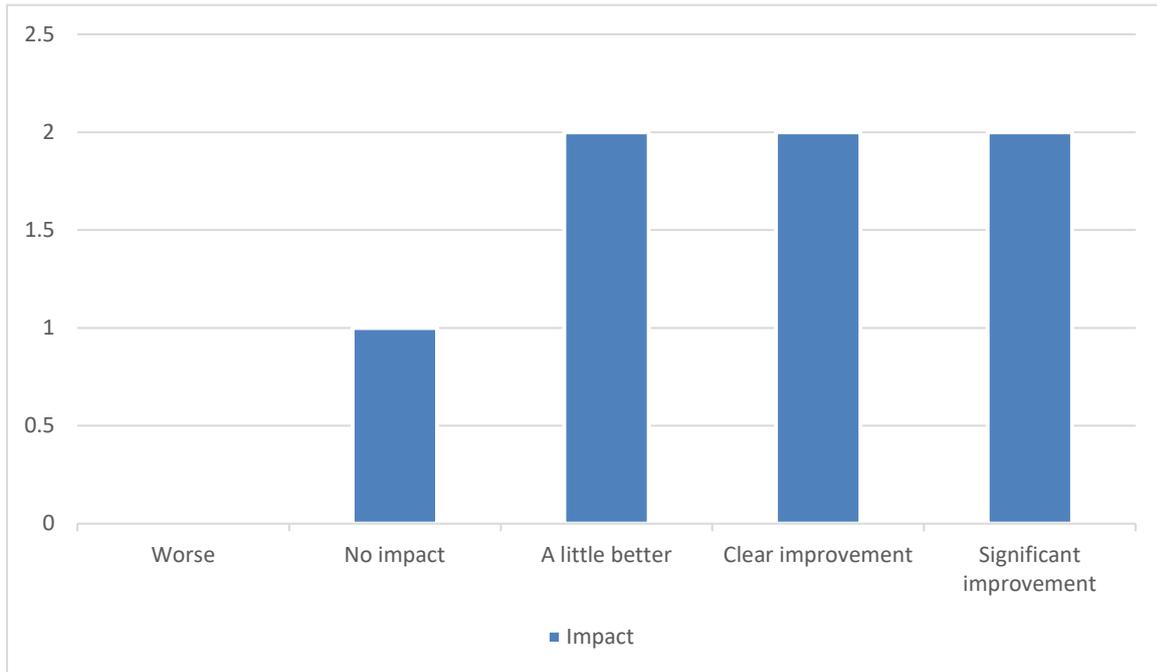
- delivery was of a very high standard and improved pedagogy in the Police section of the course may further enhance attendee's learning
- attendees' evaluations reflected learning outcomes effectively matched to the learning objectives and course content.
- course design included opportunities for critical reflection on the implications of course content for practice
- Stronger inclusion of voluntary sector perspectives in course content may enhance the impact of learning for attendees outside of Health and Social Care.
- Evaluation sheets may benefit from review to ensure most helpful data are being collected

### 2.1.2 - Findings - Managers Evaluations

7 responses were received from managers to questions about the impact of the Interagency Risk Assessment and Child Protection Processes course on their staff.

#### Q1. Understanding the national and local context for child protection

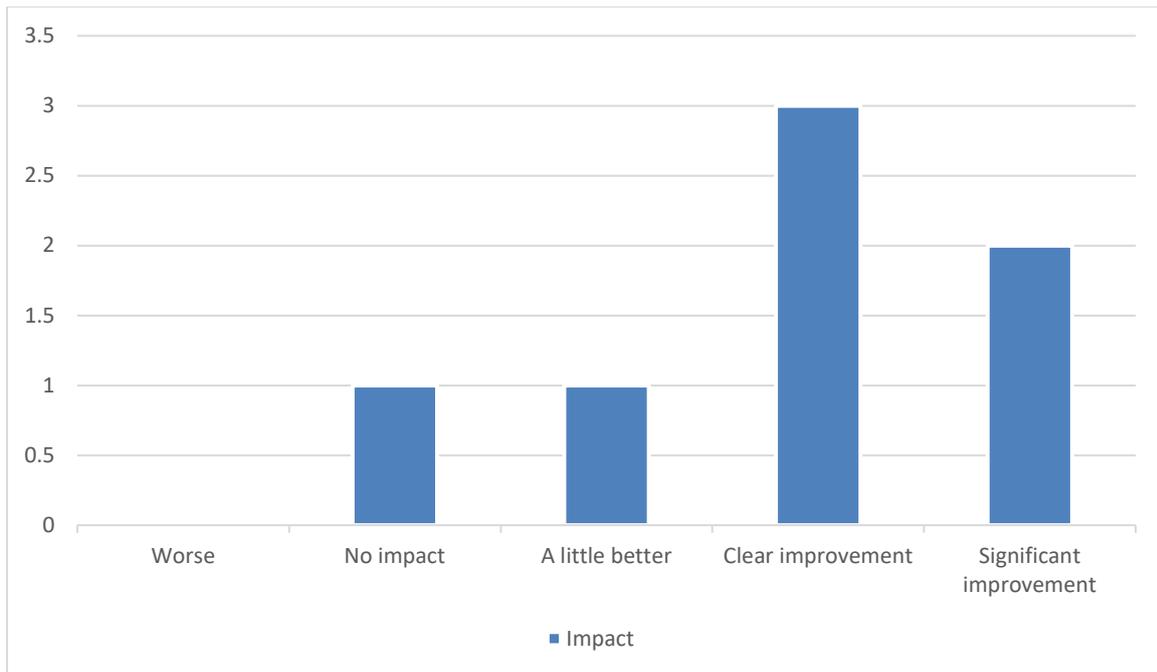
What impact has the course had in this area of your staff's practice?



This is quite a broad spread in relation to overall impact. Comments from managers suggested that their perception of impact was linked to how experienced or inexperienced the person attending the course was. For example, whether the course was "a refresher" or "Staff new to role so very useful".

#### Q2. Understanding the roles of agencies involved in child protection

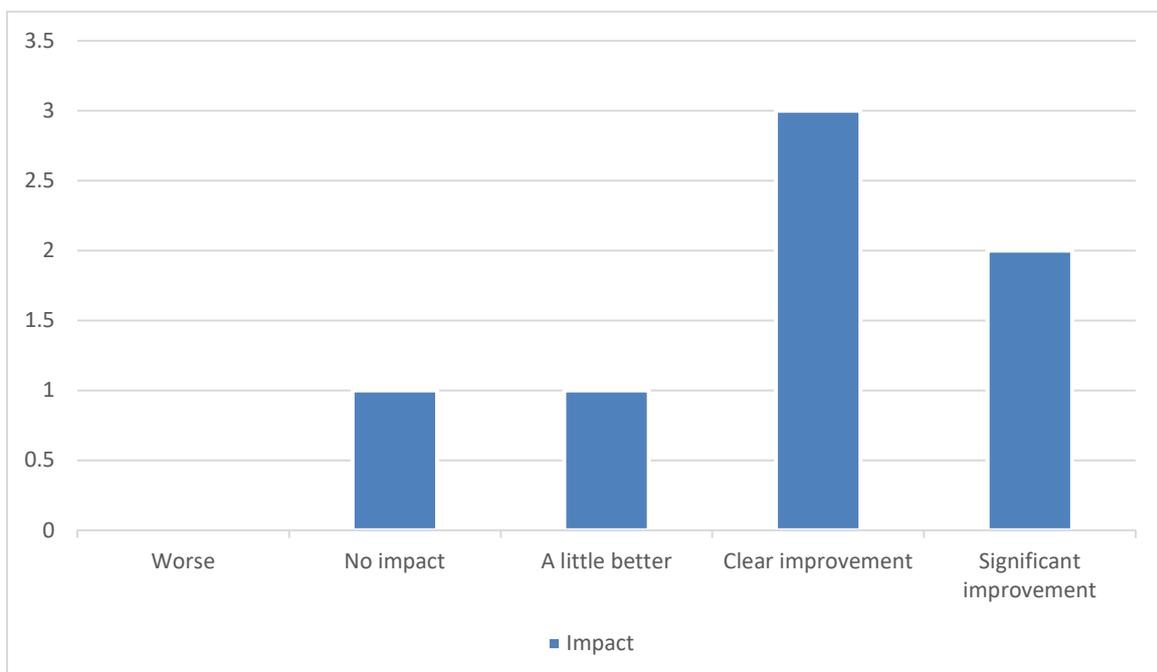
What impact has the course had in this area of their practice?



Managers were more united in their responses here on "clear impact" of improvement. Comments highlighted the perceived benefits of opportunities for networking and getting to know colleagues across agencies.

### Q3. Awareness of local child protection processes and procedures

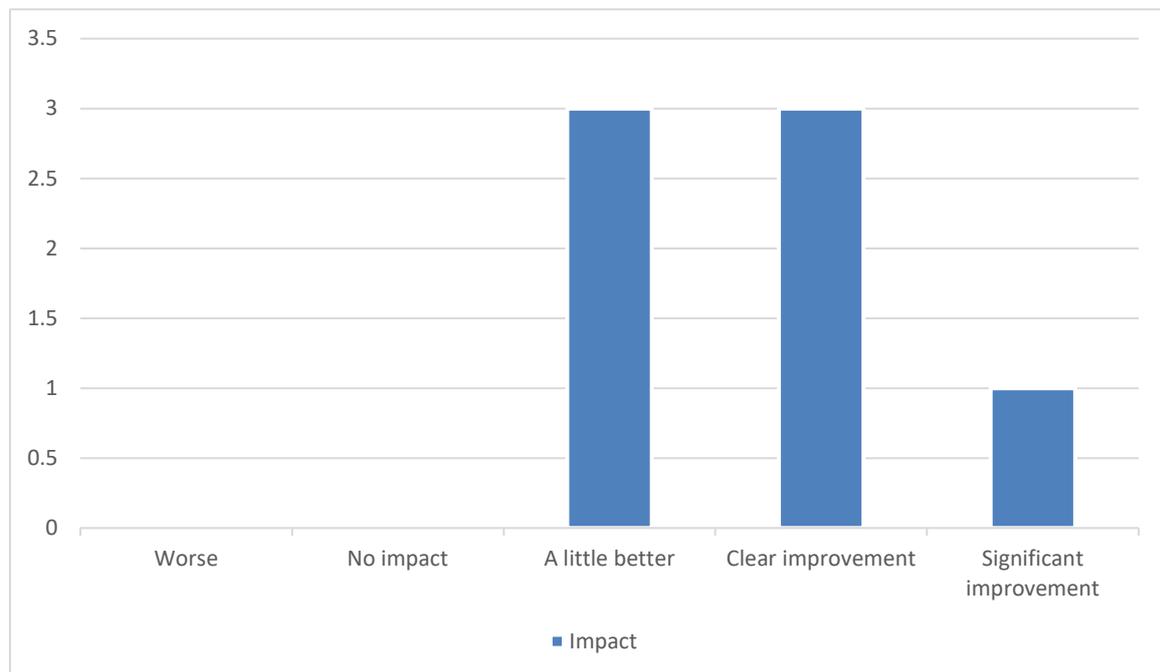
What impact has the course had in this area of their practice?



Managers were again positive about the impact of this course but no new qualitative comment was offered.

#### Q4. Understanding concepts of risk assessment and implications for planning

What impact has the course had on this aspect of their practice?



Responses here were positive but slightly less so than in previous questions and this mirrors the individual evaluations where staff were less clear about their learning with most focusing on the referral and “escalation” process and fewer on their contribution to assessment and planning in child protection.

#### Analysis of Managers' evaluations

Data gathered from this element of the research were limited due to the very low response rate so only very tentative inferences can be drawn from them. Managers were of the view that the course had a positive impact on their staff in terms of the stated learning objectives. No new qualitative comment was offered in relation to impact of learning about local child protection procedures and processes, despite this being a highly significant learning outcomes for the course. However, comments elsewhere on the impact of both courses clearly indicated perceived improvements in practice in relation to confidence and assertiveness when working within these systems. Comments highlighted the need for timely access to the course so that learning could be obtained when of highest value to individuals. Managers also noted the important networking opportunities which the course provided.

#### 2.1.3 - Findings - Interviews

Respondents were asked to comment on their recall of key learning from the course. They were invited to consider the impact of the course on them in relation to the stated learning outcomes. They were also asked to comment on how they perceived the impact of the training on their practice and if colleagues and managers had noticed any impact (see appendix 5 for topic guide). Respondents were also asked to comment on any ways in which

they think the course could be improved. As these were semi-structured interviews, there was flexibility within the discussion to follow themes and concerns specific to individual respondents.

When asked about the extent to which the course had helped them to address the stated learning outcomes, the respondents tended to focus on information sharing and the importance of not holding onto concerns individually. Respondents identified useful learning about differing thresholds and how this can be linked to professional role:

" I think people that probably work in this sort of context on an everyday basis have a better understanding of what real risks are but that maybe possibly you also get kind of used to situations like that?"

They all felt that the course had been a positive influence on them. Those with less experience in the role felt that they had learned the most and this included developments in a range of areas such as better understanding of the impact of maltreatment and backgrounds of trauma that many adult service users have. Some more experienced practitioners had done the course before and could see how the content had evolved to reflect new knowledge and match this to professional learning needs (e.g. in understanding impact of neglect).

Respondents were modest in their estimation of the impact of the course on their practice and there was recognition that a short course may only have limited impact, particularly where the practitioner's role only required them to have a background knowledge and they did not have significant or frequent involvement in child protection work.

"not sure it's made a huge amount of difference"

Within their interviews, respondents did demonstrate raised levels of knowledge and awareness of the impact of maltreatment on children and young people and of child protection structures and processes in Edinburgh. It cannot be known how the learning from the course contributed to this knowledge but respondents perceived the impact themselves.

Comments on the impact of the course on practice included a lot of reference to self-guided embedding activity such as talking to people who've done the course before to prepare for learning and talking to colleagues afterwards and sharing their learning. One person with line management responsibility noted how positive feedback from attendees informed her decision to ensure more people attended in future, and noted that this could be enhanced further if there was some kind of pre-course reading to check base levels of knowledge.

Learning opportunities which appear to have been impactful include the provision of a course resource for participants' ongoing learning (used by some but not all) and opportunities for discussion and sharing in group-work within the course. Case studies were found to be particularly useful for understanding other people's thinking and exposing participants to a range of professional perspectives.

" there's far too much stuff done in silos of this profession"

Mixed cohorts of attendees from different roles and settings were found to be very useful but some commented that learning groups need to be big enough for some within the group to speak openly.

Networking appears to be a shared benefit of attendance but the impact of this may depend on the role and setting of the learner. For example, a Mental Health Nurse found it helpful to put faces to names that she knew through email and phone contact but had not met directly before the course. Those with less experience also appear to have had an affective/attitudinal element to their learning with strong memories of being exposed to materials which gave them a fuller and more empathic understanding of the lived experiences of maltreated children and young people.

"...suddenly awakened to what is going on for a lot of people."

"...a very direct way of putting you into the reality of some of the children."

Respondents were also more appreciative of the challenges faced by social workers and less likely to attribute difficulties within the child protection system to individual practitioner characteristics.

### **Analysis of interview data**

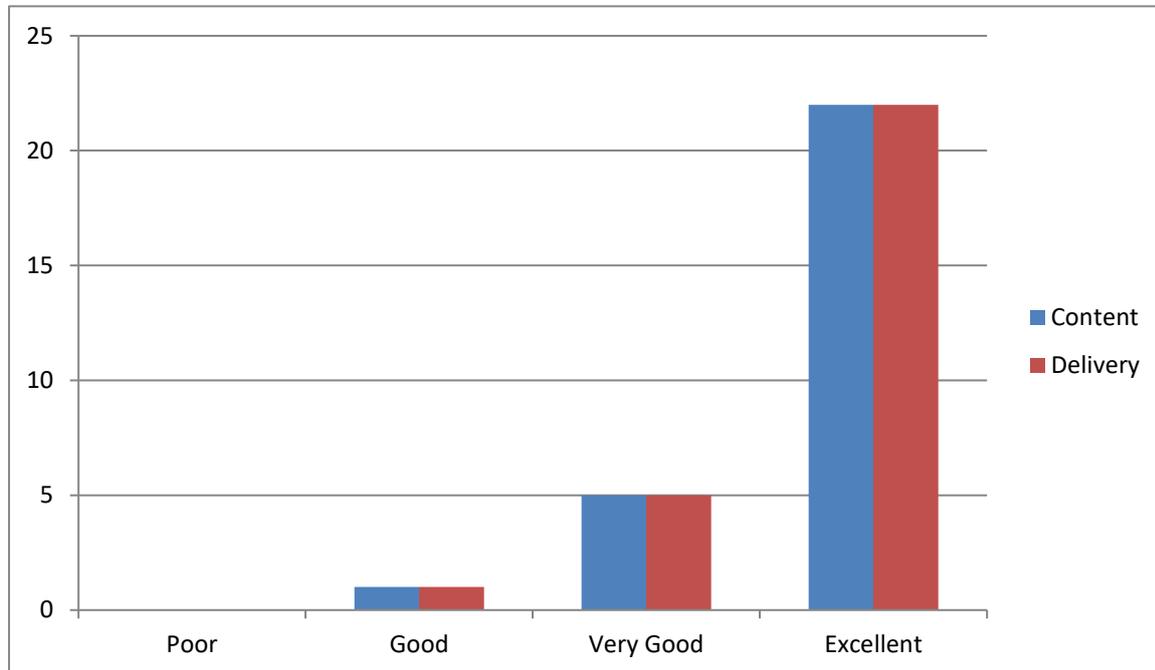
Interviews reflected strong recall of learning about thresholds and mechanisms for sharing information when there are concerns about children and young people. While relatively little detail was given of tools or skills for assessment, participants were aware of the main frameworks and the ethos underpinning practice. Learning alongside professionals from a range of different settings and roles was an important element of much learning. In particular, participants whose role makes them a relative "outsider" to child protection processes valued opportunities for developing their understanding of "insider" perspectives through discussion and reflective case study work with those more experienced in child protection work.

Reports from interviews indicated that participants believed that the course had impacted positively on their practice. This was mainly described in terms of increased confidence and levels of knowledge. It is not clear from this data-set alone whether the course has resulted in measurable changes in practice *behaviour* but students who engaged in pre- and post course activity to maximise learning may have more effectively retained knowledge over time and integrated this into their practice.

## 2.2 - Child Sexual Exploitation Awareness Raising

### 2.2.1 Findings - Individual Evaluations

#### 1. Attendees were asked to rate the content and delivery of the course



Respondents were overwhelmingly positive in their ratings and no distinction was raised between content and delivery in responses.

#### 2. Attendees were asked to record three things they learned from the course:

Learning from course was predominantly subject-specific product knowledge. This was in contrast to the broader process knowledge that respondents reported from the interagency training. Most prevalent in responses was learning about early signs or indicators of possible child sexual exploitation. This was matched by responses indicating learning about the impact of grooming and its impact on children and young people's ability to access support and protection. The next two highly rated responses were in relation to learning about social media and resources and tools for practitioners. A significant number of respondents also reported key learning in relation to legislation and policy.

#### 3. Attendees were asked if there were any topics missing that they would suggest could be included in the future

There were relatively few responses here and the only one which was repeated was a desire to see more in the course about referral options and what action to take when concerns become raised.

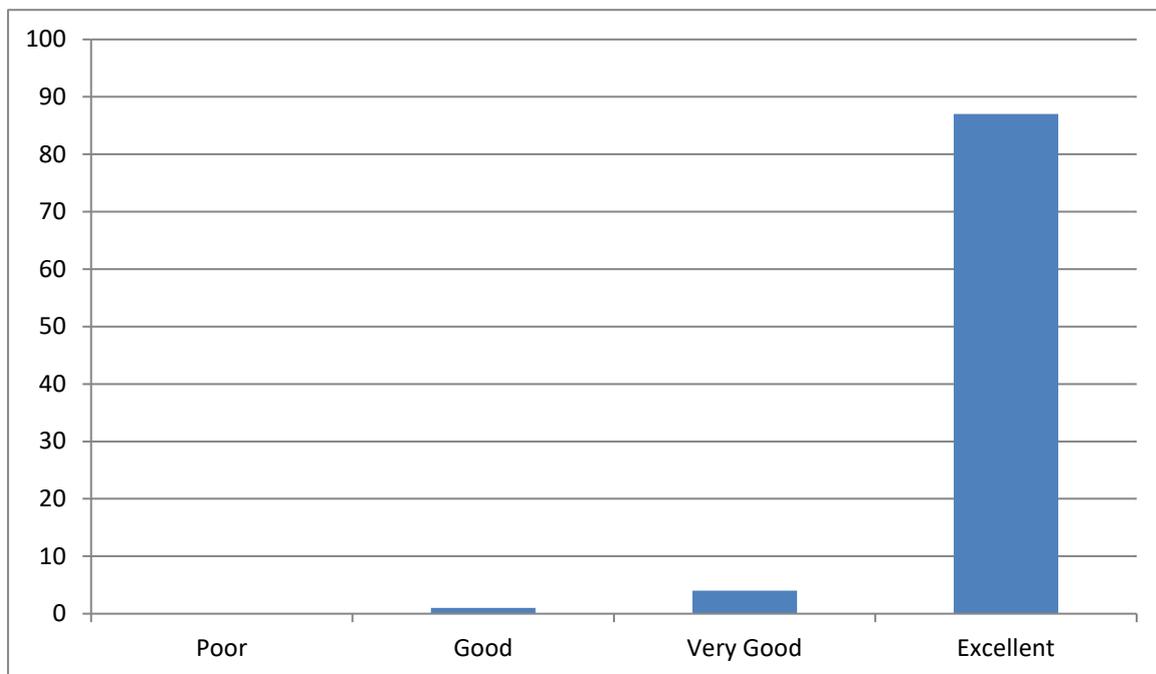
#### 4. Attendees were asked in what way the training was appropriate / inappropriate to their work

The overwhelming majority found the course to be "very" or "extremely" appropriate. For some, this was about "where there are suspicions of CSE - how we recognise and pull together" or gaining resources to use with clients. Some found the course a good opportunity to reflect on their previous practice and the possibility that they may have "missed" possible indicators of exploitation or opportunities to offer support and protection.

### **5. Attendees were asked what further learning needs they have identified for themselves as a result of attending this course**

Some respondents commented on now going onto "read the guidance" and others noted that they would follow-up on suggested reading from the course/presenter. Other responses indicated existing commitments to similar training in the future and a commitment to embed learning in future practice (such as challenging some of "the language used by professionals")

### **6. Attendees were asked how they would rate the session overall**



There was no space for qualitative comments on the evaluation form but respondents used the margins to indicate how much they had appreciated the Barnardos presenter's practice knowledge. Many alluded to technical problems in delivery but this does not appear to have affected their views on quality of delivery.

### **Analysis of individual evaluation data**

Participant evaluations indicated strongly that the content and delivery of this course is highly engaging and informative. Data indicated that the course has succeeded in its aim of raising awareness of the nature and impact of child sexual exploitation. Most responses highlighted learning about possible signs or indicators of child sexual abuse and how social media apps may be used to groom children and young people.

## **2.2.2 - Interviews**

There were considerable differences between the interviewees in relation to the strength of their memories of the course. The most frequently recalled area of learning was the social media content of the course (e.g. apps) and how these could be used in grooming children and young people for sexual exploitation. Learning from the course was influenced by the role and experience of participants. Those with experience in this area were able to connect the materials to past practice and use the course as an opportunity to reflect critically on current and future practice.

...you think back and it's 'oh my goodness!' You know we talked about that child and what didn't put it down to sexual exploitation. Now, you think 'could possibly have been'.

Making connections to practice appeared to be important for seeing the significance of the materials to individual and organisational responses.

Those with direct practice experience of working with children and young people who had been sexually exploited reported gaining little new knowledge. Those with low base knowledge reported gaining a lot from the course. Some queried the impact which any short course can make over time and one interviewee noted the significant difference in the depth and quantity of learning from a one-day non-accredited course and an accredited course taken part-time over a year.

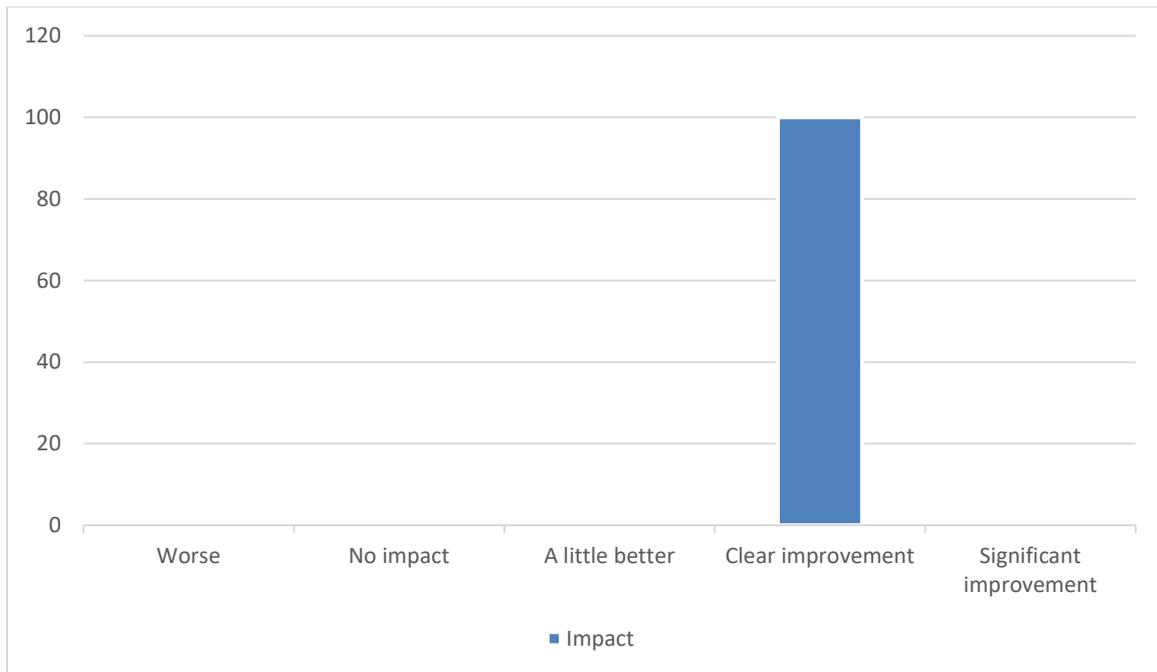
Impact of the course on participants' learning varied a lot and was seen to be dependent on pre-existing knowledge and practice experiences. Interviewees with strongest recall of course content and its significance to their practice were those who also spoke about sharing their learning from the course with other people after the course. Speaking to students and colleagues may have helped these participants to consolidate or cement their own learning. One interviewee was of the view that that this course is more likely to have a lasting impact on practice if attendance is combined with supervision informed by similar content.

## **2.2.3 - Managers' Responses**

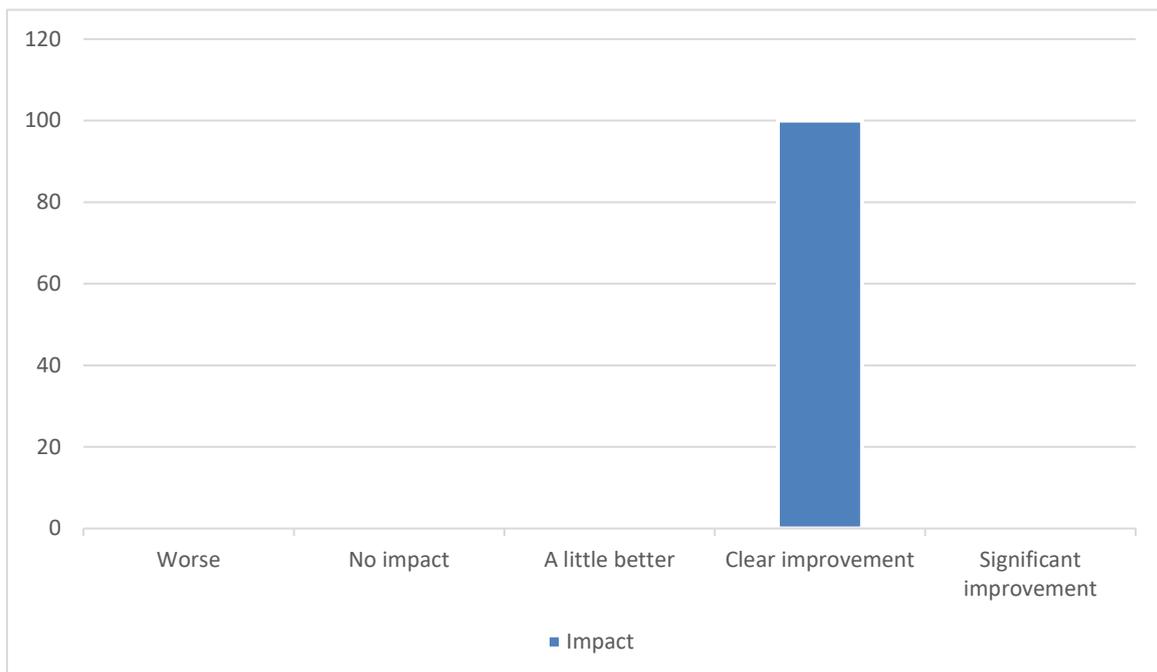
3 out of the 7 managers who took the survey responded to questions specifically about this course. As the number of people taking this course overall was lower than the numbers taking the Interagency Risk Assessment and Child Protection Processes course, this is as expected.

### **Q1. Understanding key terminology and definitions in relation to CSE**

What impact has the course had in this area of their practice?

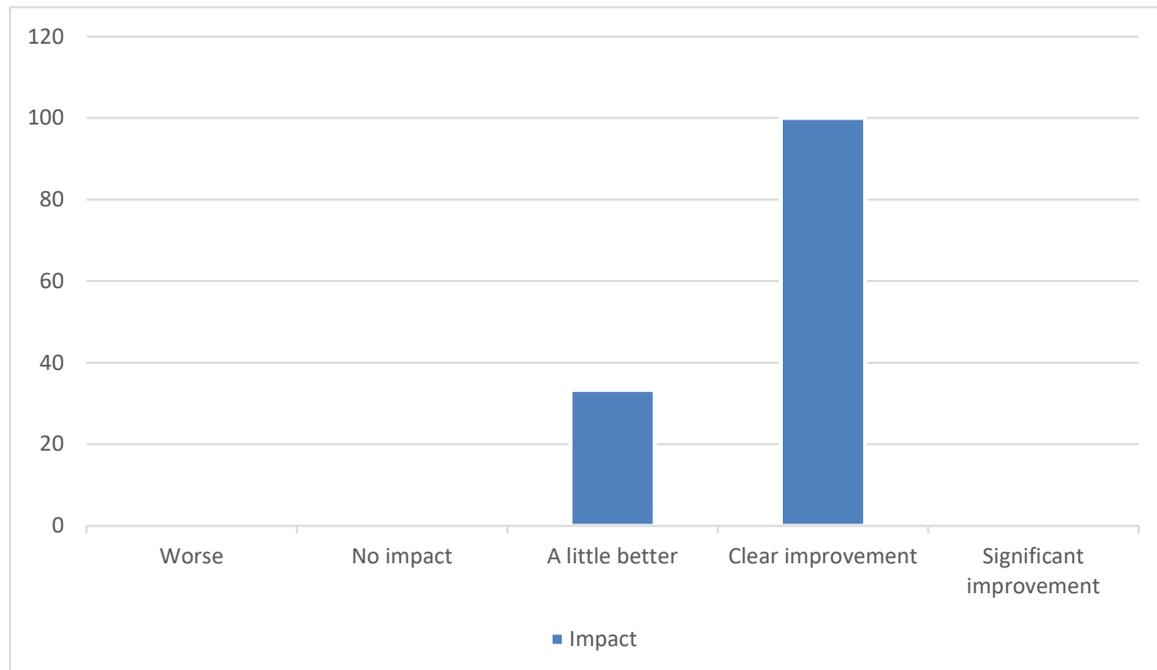


Q2. To what extent has the course helped your staff to Identify and describe the key vulnerability factors, risk indicators and spectrum of experiences in relation to CSE?



### Q3. Recognising the importance of information sharing and multi-agency partnership in responding to children and young people

What impact has the course had in this area of their practice?



#### Analysis of Managers' responses

Numbers of Responses here were very low and therefore little inference can be drawn from either the qualitative or quantitative data. All three managers reported an improvement in their staff members' knowledge, albeit one was slightly less positive about the impact in relation to awareness of the importance of information sharing. One manager commented "not attended unaware course was available third sector staff". When commenting on the wider impact of training, managers did report that training had improved their staff's confidence and awareness in practice with examples given of more assertive inquiries and reporting of concerns, and benefits to communicating and working directly with children, young people and families.

#### Key findings for consideration

- delivery was of a very high standard and attendees benefitted from a knowledgeable and skilled presenter
- participants' evaluations reflected learning outcomes effectively matched to the learning objectives and course content.
- course design appeared to promote learning about issues and phenomena for all participants, and deeper levels of reflection for some on the lived experiences of children and the implications of learning for practice
- further research will be required to explore the impact of training in relation to changes in practice behaviour

### **2.3. - Overall Evaluation of Impact: Managers' Responses**

In addition to inviting comment directly on the impact of the specific courses, managers were also asked to comment on how they thought both courses generally had impacted upon their staff's practice. Using the categories from Kirkpatrick's evaluation framework, the following responses were given. Because the number of responses was so low, all comments received are included below.

#### **Impact of learning on cognitive ability (e.g. knowledge, planning, judgement)**

- Mainly confirmed good practice
- Excellent overall knowledge and local knowledge, there is an understanding of the role that everyone else plays in safeguarding children
- Staff have more knowledge in particular around CSE
- New staff have now have local understanding and context
- very useful new staff and experienced staff as a refresher good opportunity to network with wider agencies
- clarity of processes to be followed, allows for improved risk assessment and clear understanding of the importance of sharing information
- Much greater knowledge of CP procedures

#### **Impact of learning on practice skills (communication, assessment, observation)**

- Mainly confirmed good practice
- It assists in every day practice and conversations
- Staff have more confidence when communicating to others around CSE in particular
- New staff so hard to say however staff have recorded that they see CP as a more positive intervention and something they can discuss with families in a positive way i.e. it's about getting the right help.
- more confident greater awareness
- More training specific to substance use in adults and how this impacts on parenting and additional supports for families impacted by addiction
- Positive difference, improved risk assessment
- More observant and aware of the process

#### **Impact of learning on affective domains (beliefs, attitudes, confidence)**

- Mainly confirmed good practice
- With knowledge and understanding, there is greater confidence, particularly when communicating with other people
- more confidence
- See above - CP is not necessarily something to be feared

- most difference around confidence in knowledge and awareness of duty to act and what to do
- Improved confidence in reporting any concerns
- Increased confidence when working directly with children

#### **Impact of learning on practice behaviour?**

- Mainly confirmed good practice
- The knowledge can be applied in every day practice
- As before - it is important to encourage families to get help and not fear help
- greater awareness more active enquiry led to concerns identified and reported
- as above, staff more likely to report any concerns and understand their role in this
- Integration of knowledge into practice especially when working directly with young people and families

#### **Impact of learning on service users?**

- Mainly confirmed good practice
- It builds credibility and professionalism
- More confident to talk with service users around concerns of CP and CSE
- Unsure
- more assertive action in some cases
- no real impact - service users are always made aware that we will share any child protection concerns that we have, this is nothing new

#### **What was most valuable about the impact of the courses?**

- Discussions / case studies
- The roles and responsibilities that everyone else plays
- Staff have confidence to deal with these concerns and are clear on procedures
- Networking, gaining local context and understanding and viewing CP positively
- knowledge and awareness greater confidence

#### **What would you like to see improved?**

- n/a
- More external speakers involved, like the Police
- Would be helpful to have refresher/shorter version for existing staff.
- more availability of training and more specific training around working with children and families affected by addiction

- n/a

**Do you have any other thoughts or comments on the courses not covered above?**

- n/a
- The trainer was excellent and had so much relevant knowledge and experience to share. There was also someone from the Police attended and that insight was excellent
- Although GIRFEC and local practice was discussed there seems to be a disconnect with the GIRFEC training and materials found here [http://www.edinburgh.gov.uk/downloads/download/273/child\\_planning\\_documents](http://www.edinburgh.gov.uk/downloads/download/273/child_planning_documents) eg see info sharing flowchart
- too much competition for spaces on training and a shorter refresher training needed
- no

## **Part 3 - Discussion and conclusions**

### **Impact of learning**

Positive outcomes were identified for both courses at Level 1 of Kirkpatrick's evaluation framework: *Learners' Reaction*. All three data sets consistently indicated that participants had a good experience of learning. Key to this outcome was the combination of excellent teaching skills and practice knowledge in the presenters. Materials in both courses demonstrated principles of adult learning in their design in that they recognised the experience and motivation of attendees and were focused on applying learning to practice (Merriam and Bierma 2013). Individual evaluations and interviews indicated that participants had acquired knowledge that was effectively matched to the learning objectives set out in course design. The curriculum for each course was contemporary and appropriate and it is important that regular reviews and updates of materials are carried out to maintain this strength. There were indications that some sections of the Interagency Risk Assessment and Child Protection Processes course could be improved by further attention to pedagogy.

There was evidence that knowledge from the courses had been acquired and maintained by participants at Level 2: *Acquisition of Knowledge and Skills*. Although some participants had stronger recall than others, they were all able to remember specific facts and concepts from the courses. This type of learning is considered by some to be a relatively low level of cognitive outcome but data in this study suggests that higher-level outcomes were attained by some participants. In particular, some participants were able to demonstrate affective responses (such as increased recognition of the child's lived experience) and critical application of knowledge to practice (such as considering how they would practice differently as a result of learning). It is not possible to say whether these higher-order learning outcomes are directly attributable to the courses or whether other influences (such as individual cognitive flexibility or team cultures) played a part. It is important that the courses continue to provide participants with opportunities for discussion and critical engagement with learning in relation to their individual professional roles and settings. To this end, it may be helpful to review how the course can effectively support those working in the third sector (particularly those with minimal or infrequent engagement with child protection processes) to integrate and apply their learning in practice.

### **Embedding learning in practice**

Findings from this study suggest that learning may be enhanced through some development of pre- and post-course links to ongoing professional development. There were indications that pre-course preparation can enhance levels of motivation to attend and readiness for learning. Attendees indicated high levels of satisfaction with the courses but felt that the course had not been "sold" effectively to them. To counter the notion of the training being a mandatory "tick-box" there may be benefit in capturing participant testimony for use in course promotion. Some of the comments from the evaluation sheets are already available and additional audio/visual "talking heads" clips may also be considered if such material can be supported on available platforms.

There were also some suggestions that individuals' learning needs were not always ideally matched to course provision. While this is a perennial problem and one already addressed

through individual agencies' staff development policies, it may help to consider how individual needs analysis can best be supported in preparation for course attendance. A brief selection exercise has the potential to support critical reflection on learning needs and provide motivation at the same time as those needs are identified. For example, a relatively simple pre-course scaling exercise (e.g. on a 1-10 Lickert scale "how confident are you about..., how knowledgeable ...?") may help to make learning needs explicit and could also be repeated after the training to encourage reflection on the impact of learning. Such exercises may also provide valuable data for the ongoing evaluation of training as they would provide a level of "before and after" testing not possible in this particular study.

Some evaluations and interviews elicited data about how learning may be effectively embedded in practice. When interviewees were asked to consider who may have noticed changes in their practice as a result of their learning, this appeared to provoke reflection on how relatively little attention was paid to the learning outcomes of these courses in practice. Participants reported talking to their colleagues and sharing their learning with colleagues and students. Although managers reported seeing changes in practice behaviour, respondents themselves did not report discussing their learning with their manager. One third sector respondent noted that they did talk about training with their manager at their annual review but this was only about *which* courses they had done and not about the *learning or impact* of the course on their practice. Another suggested,

"it should be back to the service that sends you to have to have a responsibility to work through with you, what you've learned and how important it was"

These comments reflect a challenge in how to encourage and support the embedding the learning from ECPC courses within ongoing professional development processes across the wide variety of organisations who send candidates on the courses. Both courses currently provide participants with course materials and resources that can be kept for reference and revision. Participants were motivated to read more following the courses and recommended reading was appreciated. Some participants and some managers suggested benefits in developing further opportunities for short "refresher" courses and consideration may be given to post-training exercises or events that support critical reflection on how learning has impacted on practice. Such "refreshers" could potentially draw on material in the resource packs to support critical reflection on how learning has been integrated into practice.

Due to the limitations of the research design and data available, it is hard to draw any strong conclusions about learning outcomes beyond Level 3: *Changes in Behaviour*. However, some data did indicate a positive impact of the courses on a range of practice domains. Participants could recall course content and spoke of increased confidence. A significant proportion of those interviewed said that they had not been actively involved in either child protection processes or working with child sexual exploitation since the training and therefore could not point to anything they had yet done differently in practice, other than have higher levels of understanding and awareness. Managers of staff who had attended the courses indicated noticeable improvements in participants' knowledge and understanding as well as enhanced awareness and confidence in practice. In relation to the Interagency Risk Assessment and Child Protection Processes course, there was evidence of managers seeing improvements in participants' practice in taking assertive action when abuse and neglect was a concern. Knowledge was also seen to be integrated into practice in

participants' direct work and communication with service users. While these findings are limited in terms of the sample size, they are encouraging and may indicate the benefits of further involvement of managers in evaluating outcomes and supporting the embedding of learning in practice.

More extensive research will be required if the impact of professional learning on higher-level developments, such as changes in organisational practice and outcomes for service users, is to be considered. Research designed to investigate these higher-level outcomes will need to include features such as pre- and post-training evaluation, comparison between one group who received the training and one that did not, and interviews with service users to gather data on the ultimate impact of training in relation to improved outcomes for children, young people and families. Such research design would require more extensive resource and planning to ensure that outcomes measures were clearly defined and data collection plans were in place in advance of the next delivery.

### **Learning outcomes**

Learning outcomes are stated for both the courses.

#### **Interagency Risk Assessment and Child Protection Processes**

- Define national and local context for child protection
- Describe roles of agencies involved in child protection
- Know the child protection processes and procedures
- Explain concepts of risk assessment and implications for planning
- Apply key principles for the appropriate sharing of information.<sup>1</sup>

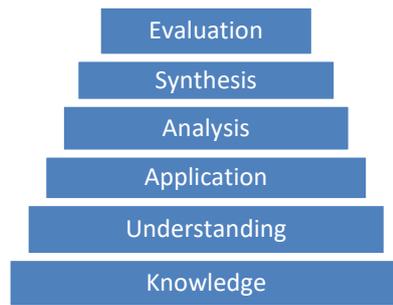
#### **Child Sexual Exploitation Awareness Raising**

- Explain the key terminology and definitions in relation to CSE
- Identify and describe the key vulnerability factors, risk indicators and spectrum of experiences in relation to CSE
- Recognise the importance of information sharing and multi-agency partnership in responding to children and young people

These learning outcomes specify the essential learning for the courses. They are written in clear language and are measurable, although there are currently no summative assessment tasks attached to either course. They begin with an active verb, followed by the object of the verb and a phrase that gives the context. This kind construction is understood to be an effective support for learning (Kennedy 2006) and is an important element of provision for tutors and participants. Attention may be paid to the verb forms used though. Currently, the verbs are indicative of learning at a relatively low cognitive level. Bloom (1956) proposed that knowing is composed of six successive levels arranged in a hierarchy and that thinking can be divided into six increasingly complex levels from the simple recall of facts at the lowest level to evaluation at the highest level.

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<sup>1</sup> This learning outcome is noted in marketing but not in the PowerPoint teaching slides



Outcomes of learning (such as being able to describe or explain) constitute "knowledge" but not necessarily "understanding" and do not clearly inform how such knowledge will impact practice. To raise the level of learning to that of critical reflection and application in practice, consideration may be given to revising the learning outcomes for both courses to use verbs more indicative of higher-level thinking and desired impact on practice (e.g. demonstrate, apply, practice, use...). It should be noted that the learning outcomes published in the marketing flyer for the Interagency Risk Assessment and Child Protection Processes course include "Apply key principles for the appropriate sharing of information". This is more practice-oriented but it is not included in the PowerPoint slides for the course and this should be checked (and corrected if necessary) before next delivery.

The National Framework for Child Protection Learning and Development (Scottish Government 2012) uses verbs that are more active and practice-oriented (such as recognise, engage, distinguish and apply) and consideration may be given to the effectiveness of the teaching and learning design in supporting participants to attain these learning outcomes. Currently, many of the exercises involve practice-near discussions and reflection on action that do support higher-level learning but this is not really mirrored in the current learning outcomes. Biggs (2003) refers to this type of process as involving constructive alignment. The curriculum is designed so that the teaching and learning activities (and assessment where relevant) are co-ordinated with the learning outcomes. Aligning the language of the learning outcomes so that they more accurately reflect the practice-oriented pedagogy in the courses may support participants to embed their learning in the specific context of their role and setting. Formative assessment opportunities in the courses (such as guided discussion or case study vignettes) already support context-specific learning and may include specific reference to the course learning outcomes so that this alignment is explicit for participants.

Course learning outcomes for the Child Sexual Exploitation Awareness Raising Course use the verbs "explain, identify and recognise". It is recommended that these descriptors are also reviewed to ensure that the learning outcomes are focused on the appropriate skills required of attendees in their professional practice. For example, rather than "recognise the importance of information sharing..." a more applied outcome such as "ability to share information in line with legislation and policy..." Formative assessment opportunities already embedded in the course (such as guided discussion or case study vignettes) can be explicitly linked to these learning outcomes to help participants consider how they may employ their learning in their practice.

## **Evaluation criteria**

The evaluation sheets which participants complete at the end of these courses were used as a data source for this study and some of the limitations in the data that they provide may be worth further consideration. It was noticeable that participants wanted to provide more detailed feedback about the quality of course content and delivery but there was no space here for qualitative comments. For example, interviews found that participants really appreciated the courses' level of connection to real situations and the case study approach but the evaluation sheet did not make it easy to give this kind of feedback. Inclusion of a comments box here would be an easy revision and may provide richer feedback for future course developments. Where delivery is over more than one day or there are multiple presenters, it may be helpful to create space in the evaluation sheet to allow participants to comment in more detail on specifics.

Participants are invited to record three things they learned from the course. This provides valuable data on the extent to which participants are able to recall key course content but does not indicate how participants have understood the materials or how they have considered the implications of their learning for their professional practice. Consideration may be given to changing the language from the rote-oriented "learn" to something more oriented to critical reflection and application (such as "taken away from the course" or what has it made you think about". Equally, shifting the focus of question 3 from "topics missing" to something more supportive of reflection (e.g. "how might the course be improved") might also be beneficial.

The question about the appropriateness/inappropriateness of the course to participants' roles tended to garner a binary response (yes/no) and then justification according to role. While this will be helpful in evaluating the overall match between courses and learning needs, it did not provide data in this study which could help to establish the impact of learning in and on practice.

## **Further research**

This study has drawn on rich descriptions of learning and practice from course participants and their managers. This has identified a number of key points which can be used to further enhance current provision and maximise opportunities for practice improvement. The study was necessarily limited in its design and this means that only very tentative conclusions may be drawn about the impact of learning on practice behaviour and outcomes for organisations and service users. If future research is to provide further insight into the practice outcomes of professional education, consideration should be given to research designs that can focus on clearly identified learning outcomes with the potential for measurements to be taken before and after the course. Involvement of children, young people and families in research is advised to gain meaningful data on the impact of training on outcomes for service users. Such elements of research benefit from early discussion so that data collection parameters and methods can be defined and developed in advance of the specific course and period of delivery being evaluated.

**Researcher - Dr Duncan Helm**

**Senior Lecturer (Child Welfare and Protection)**

**Faculty of Social Sciences - University of Stirling**

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**Appendix 1 - Individual participant evaluation template**

**Child Protection Inter-agency Training - Evaluation Form**



Course:

Date:

Job Title / Profession:

**1. Please rate the following:**

**Content:** Poor                      Good                      Very Good                      Excellent

**Delivery:** Poor                      Good                      Very Good                      Excellent

**2. Please record three things you learned from the course:**

**3. Are there any topics missing that you would suggest could be included in the future?**

**4. In what way was the training appropriate / inappropriate to your work?**

**5. What further learning needs have you identified for yourself as a result of attending this course?**

**6. How would you rate the session overall?**

Poor

Good

Very Good

Excellent

**Thank you**

## **Appendix 2 - Research participant information sheet**

### **Participant Information Sheet**

**Research Project Title: Evaluation of Edinburgh Child Protection Committee Training**

#### **1. Background, aims of project**

We would like to invite you to take part in an independent evaluation of two training courses for professionals involved in child welfare and protection practice delivered by Edinburgh Child Protection Committee to a range of multi-agency partners.

- risk assessment & child protection processes
- child sexual exploitation awareness

#### **2. Why have I been invited to take part?**

You have been invited because you took one of these courses between autumn 2018 and summer 2019.

#### **3. Do I have to take part?**

No. You do not have to take part.

If you do decide to take part, you can withdraw your participation at any time without needing to explain and without penalty by advising the researcher of this decision.

If you withdraw we will not collect any more data from you. However, any data collected up until the point that you withdraw will be kept and used in the data analysis.

You will be given this information sheet to keep and be asked to complete an electronic consent form.

#### **4. What will happen if I take part?**

Data from the evaluation form that you completed at the end of the course will be analysed. You may also be invited to attend one interview with the researcher. If you accept the invitation, the interview will take approximately 30 minutes and will be carried out in a locality office near your workplace. You will be asked questions about the training and any impact that it has had on practice for you.

#### **5. Are there any potential risks in taking part?**

There are no foreseeable risks in taking part.

#### **6. Are there any benefits in taking part?**

The benefits of taking part are: an opportunity to reflect on your learning and its application to practice; a direct contribution to the improvement of future training.

#### **7. What happens to the data I provide?**

The research data (audio recordings and researcher notes) will be kept anonymous using alphanumeric codes to represent respondents in any direct quotes.

Personal/confidential information will be stored anonymously using the University of Stirling's secure servers. Your personal data will be kept for 2 years on the Research Drive – a secure data centre on the Stirling campus - and then will be securely lodged in DataSTORRE for a minimum of 10 years as per University policy.

Your permission is sought to use direct quotes. Your details will not be made publicly available but you should be aware that it is possible that colleagues may identify your quotes due to a close and shared knowledge of your role, setting, work, etc.

The researcher has an obligation to disclose should data indicate offences in relation to child protection, the physical abuse of vulnerable adults, money laundering and crimes covered by the prevention of terrorism legislation.

## **8. Recorded media**

Interviews will be subject to audio recording and the recordings transcribed (written out in full). These transcriptions will then be analysed to identify patterns and themes emerging. Key findings resulting from this analysis will be presented in a research report and pieces of raw data (in the form of direct quotes from interviewees) may be reproduced within the report and subsequent publications. The recordings themselves will not be broadcast or shared

## **9. Will the research be published?**

The research may be published in relevant journals such as Social Work Education, Child Abuse Review and/or Practice. You will/will not be identifiable in any report/publication.

The University of Stirling is committed to making the outputs of research publically accessible and supports this commitment through our online open access repository STORRE. Unless funder/publisher requirements prevent us this research will be publicly disseminated through our open access repository. In addition, the researcher is committed to providing Edinburgh Child Protection Committee with a knowledge exchange event where key findings will be presented for review and discussion with key stakeholders.

## **10. Who is organising and funding the research?**

Edinburgh Child Protection Committee is funding this research and it is being carried out by Dr Duncan Helm from the University of Stirling.

## **11. Who has reviewed this research project?**

The ethical approaches of this project have been approved via The University of Stirling General University Ethics Panel

## **12. Your rights**

You have the right to request to see a copy of the information we hold about you and to request corrections or deletions of the information that is no longer required.

You have the right to withdraw from this project at any time without giving reasons and without consequences to you. You also have the right to object to us processing relevant personal data however, please note that once the data are being analysed and/or results published it may not be possible to remove your data from the study.

## **13. Who do I contact if I have concerns about this study or I wish to complain?**

If you would like to discuss the research with someone you may contact me (Dr Duncan Helm) at [duncan.helm@stir.ac.uk](mailto:duncan.helm@stir.ac.uk) or 01786 466 302. You may also contact my Head of Subject Group (Associate Professor Ruth Emond) at [h.r.emond@stir.ac.uk](mailto:h.r.emond@stir.ac.uk) or my Head of Research Group (Professor Jane Callaghan) at [jane.callaghan@stir.ac.uk](mailto:jane.callaghan@stir.ac.uk) : Faculty of Social Sciences, University of Stirling

You have the right to lodge a complaint against the University regarding data protection issues with the Information Commissioner's Office (<https://ico.org.uk/concerns/>).

The University's Data Protection Officer is Joanna Morrow, Deputy Secretary. If you have any questions relating to data protection these can be addressed to [data.protection@stir.ac.uk](mailto:data.protection@stir.ac.uk) in the first instance.

You will be given a copy of this information sheet to keep.

**Thank you for your participation.**

**Appendix 3 - Participant consent form**

**Consent Form**

**Research Project Title: Evaluation of Edinburgh Child Protection Committee Training**

GUEP Approval Number 669

|   |                 |
|---|-----------------|
| Name:   | Please tick box |
| I confirm that I have read and understood the information sheet explaining the research project and I have had the opportunity to ask questions about the project.  |                 |
| I understand that my participation is voluntary and that I am free to withdraw at any time during the study without giving a reason, and without any penalty. I understand that if I withdraw no more data will be collected from me. However, any data collected up until the point that I withdraw may be kept and used in the data analysis. |                 |
| I have been given a unique identifying number and know whom to contact should I wish to withdraw my data.   |                 |
| I understand that my responses will be kept anonymous and I give permission for members of the research team to have access to my anonymised responses.   |                 |
| I consent to data gathered from my participation being stored securely at the University of Stirling in line with the University's Research Data Management Policy."  |                 |
| I agree to take part in this study  |                 |

|  |  |
|--|--|
|  |  |
|--|--|

## **Participant Information Sheet**

**Research Project Title: Evaluation of Edinburgh Child Protection Committee Training**

### **14. Background, aims of project**

We would like to invite you to take part in an independent evaluation of two training courses for professionals involved in child welfare and protection practice delivered by Edinburgh Child Protection Committee to a range of multi-agency partners.

- risk assessment & child protection processes
- child sexual exploitation awareness

### **15. Why have I been invited to take part?**

You have been invited because members of staff in your team attended one of these courses between autumn 2018 and summer 2019.

### **16. Do I have to take part?**

No. You do not have to take part.

If you do decide to take part, you can withdraw your participation at any time without needing to explain and without penalty by advising the researcher of this decision.

If you withdraw we will not collect any more data from you. However, any data collected up until the point that you withdraw will be kept and used in the data analysis.

You will be given this information sheet to keep and be asked to complete an electronic consent form.

### **17. What will happen if I take part?**

You will be invited to complete a brief online questionnaire about the impact that these courses have had on your staff's practice.

### **18. Are there any potential risks in taking part?**

There are no foreseeable risks in taking part.

### **19. Are there any benefits in taking part?**

The benefits of taking part are: an opportunity to reflect on learning and its application to practice; a direct contribution to the improvement of future training.

### **20. What happens to the data I provide?**

The research data (your answers) will be kept anonymous using alphanumeric codes to represent respondents in any direct quotes.

Personal/confidential information will be stored anonymously using the University of Stirling's secure servers. Your personal data will be kept for 2 years on the Research Drive – a secure data centre on the Stirling campus - and then will be securely lodged in DataSTORRE for a minimum of 10 years as per University policy.

Your permission is sought to use direct quotes. Your details will not be made publicly available but you should be aware that it is possible that colleagues may identify your quotes due to a close and shared knowledge of your role, setting, work, etc.

The researcher has an obligation to disclose should data indicate offences in relation to child protection, the physical abuse of vulnerable adults, money laundering and crimes covered by the prevention of terrorism legislation.

### **21. Will the research be published?**

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You have the right to lodge a complaint against the University regarding data protection issues with the Information Commissioner's Office (<https://ico.org.uk/concerns/>).

The University's Data Protection Officer is Joanna Morrow, Deputy Secretary. If you have any questions relating to data protection these can be addressed to [data.protection@stir.ac.uk](mailto:data.protection@stir.ac.uk) in the first instance.

You will be given a copy of this information sheet to keep.

**Thank you for your participation.**

*Appendix 5 - Topic guide for semi-structured interviews*

**ECPCP/UoS 20-19 Participant interview schedule**

Welcome, introductions – length of interview about 30 mins but no more than 45 mins (check OK). Preferred names/pronouns to be discussed.

Recap of aims of research and ethical standards being adhered to. Check for participant info and consent. Note recording.

*Total interview time will not exceed 45 minutes. This is a semi-structured interview and the researcher may rephrase questions or ask follow-up questions to gain further data on significant themes emerging.*

- Which agency/organisation do you work for?
- What is your role there?
- Which course did you take and when did you take it?

*Explain - separate questions relating to stated learning outcomes on each course, depending on which course they took:*

**Interagency Child Protection course**

To what extent has the course improved your ability to...?

- Define national and local context for child protection
- Describe roles of agencies involved in child protection
- Know the child protection processes and procedures
- Explain concepts of risk assessment and implications for planning

**Child Sexual Exploitation course**

To what extent has the course improved your ability to...?

- Explain the key terminology and definitions in relation to CSE
- Identify and describe the key vulnerability factors, risk indicators and spectrum of experiences in relation to CSE

- Recognise the importance of information sharing and multi-agency partnership in responding to children and young people

### **For all participants**

- What do you recall most strongly from the course?
- Was there a “lightbulb” moment for you at any point in the course?
- What (if any) difference do you think the course has made in terms of professional practice?

*(Explain next question is about how others may see the impact and feed this back to you)*

- What kind of difference do you think others (such as your service users, colleagues or manager) might see in your practice as a consequence of the course?
- Do you have any suggestions for how to improve the course?
- Any further comments?

Following these questions, the researcher will stop the recording, thank the participant for their time and ensure that they have the information sheet and know how to make contact if they have any concerns or wish to withdraw in the future.