



Internal Audit Report
Education & Children's Services
A21-01 Child Protections
April 2022

Final Report

(Report No 22/154)

Legal and Governance
Corporate and Democratic Services
Perth & Kinross Council
Council Offices
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1. Introduction

- 1.1 The audit of Child Protection was undertaken as part of the Internal Audit Plan for 2021/22, which was approved by the Audit Committee on 30 June 2021.
- 1.2 The indicative scope for the audit was to map assurances from internal and partner agencies for the protection of children.
- 1.3 This audit is linked to the following Strategic Risk:
SR01: Protection of Vulnerable Children & Adults – vulnerable children and adults are not adequately protected, and the Council fails to meet its statutory duty.

2. Audit Background Information

- 2.1 The focus of this audit was to ensure that the Council was working together with partners and receiving relevant assurances that there are adequate arrangements in place throughout the process to protect children and young people from harm.
- 2.2 The Child Protection Committee is a vehicle for the provision of assurance to the Council regarding the multi-agency approach, which provides assurance to Councillors that arrangements are operating effectively. The CPC works with the CYPFP (Children, Young People and Families' Partnership) to ensure appropriate services are delivered to provide improved outcomes for the young and vulnerable in their care.
- 2.3 As a result of the restrictions that were put in place during the COVID-19 pandemic, arrangements for protecting children had to be adapted. This review has also included a review of these revised/interim arrangements and the self-evaluation of the effectiveness

3. Scope and Limitations

- 3.1 The scope of the audit is as detailed in the control objectives below. This review did not include a detailed review of individual child protection cases. It reviewed the high-level arrangements for the management of Child Protection risks.

4. Assessment of the Control Environment

- 4.1 The table below contains a summary of the findings against each control objective and Internal Audit's assessment of the adequacy and effectiveness of the controls in place to meet each of the objectives agreed for this audit. Further details, including any improvement actions, are set out in the Management Action Plan.

No.	Control Objective	Action Rating					Control Objective Assessment
		5	4	3	2	1	
1	To ensure that arrangements are in place for ensuring that appropriate assurances are received for the protection of Children					1	Substantial
2	To ensure the adequacy of arrangements established during the response to the COVID-19 pandemic						Substantial

- 4.2 The auditor has assessed that substantial assurance can be placed on controls overall in relation to arrangements established during the COVID-19 pandemic from the audit. This meaning that there are appropriate controls and assurances in place to protect children.
- 4.3 A summary of the key findings and actions are provided in section 5, please note however, the following areas of good practice which have been highlighted during the audit:
- 4.4 Experienced and knowledgeable council officers are involved in the process for ensuring that children are protected from harm and that the arrangements in place are effectively managing risk in this area.
- 4.5 A positive culture and good relationships with multi-agency partners support effective communication and enhances productivity in this area of business. The transparency displayed between partners helps to strengthen the CP Committee and ensures effective delivery of services in the community.
- 4.6 Documentation connected with the governance arrangements for managing Child Protection risks are well maintained and easily accessible.
- 4.7 The ability to adapt during COVID-19 to ensure the wellbeing and safety of children was strengthened by a willingness of all officers to develop and embrace new and innovative approaches in relation to the professional practice, systems and processes. This has been recorded through self-assessments and appraisals of effectiveness, both internally and externally resulting in positive assessments and identified areas of good practice.

5. Summary of Findings

- 5.1 Below is a summary of key findings and actions, which are reflected in the Management Action Plan, detailed in section 9.
- 5.2 The Service has demonstrated a strong culture of openness and transparency throughout the audit process, with a desire for continuous improvement.
- 5.3 The Child Protection Committee is well established and functions effectively, undertaking routine assessments of standards and governance. The leadership of the independent Chair who has significant experience and knowledge in this field brings added value to the committee enabling it to respond quickly and with authority to issues raised and operational needs.
- 5.4 There is evidence to provide assurance that the quality of work is of a constantly high standard. All previous external reviews from scrutiny bodies, such as the Care Inspectorate, have recorded extremely high praise, with Perth & Kinross being considered as setting the standard for other local authorities to achieve. Additionally, there is an acknowledgement by the Multi-Agency Public Protection Arrangements (MAPPA) of Perth & Kinross setting a high standard within the UK. This is supported by frequent communication with associates for other sectors in this area e.g., NHS, Police Scotland, and places of learning.
- 5.5 It is noted at this time that Police Scotland are reviewing their protocols on sharing information through MAPPA in relation to violent offenders and the sex offender register. Whilst it is unlikely that this will impact on our ability to protect children from harm, the Council is engaging with Police Scotland to ensure that this remains the case.
- 5.6 It was noted that there was consistency in representation from most partners at CPC however it was noted that this was not the case for NHS. It is appreciated that this may have proved to be more problematic for the NHS as a result of its response to the COVID-19 pandemic.
- Action Point 1
- 5.7 The Service responded quickly to revised working arrangements to protect children by developing new ways of working together to ensure that children were safe and protected. This included home evaluations taking place outside and socially distanced consultations with children and their parents in addition to virtual and telephone communication.

6. Conclusion

- 6.1 The Internal Audit review can place substantial assurance on the overall control environment for the arrangements in place for Child Protection. The agreed actions, once implemented, should continue to enable Internal Audit to place substantial assurance on these.

7. Acknowledgements

- 7.1 Internal Audit would like to thank all officers who were involved in this audit, particularly officers within the Children & Families Services team in Education & Children's Services and the independent Chair of the Child Protection Committee.

8. Action Implementation & Follow up

- 8.1 Responsibility for the maintenance of adequate and effective controls rests with management. Where the audit has identified areas for management action, these are identified in the Management Action Plan. Where a decision is taken by management not to act in response to finding from this review, it is the responsibility of management to assess and accept the risk arising from non-implementation.
- 8.2 Achievement of the agreed actions is monitored through Internal Audit's 'follow up' arrangements.

9. Management Action Plan

Action Point	Para. No	Finding	Risk Rating	Agreed Action & Evidence	Action Owner	Target Completion Date
1	5.5	It was noted that there was consistency in representation from most partners at the CPC however it was noted that this was not the case for NHS representatives. It is appreciated that this may have proved to be more problematic for the NHS as a result of its response to the COVID-19 pandemic.	2 - Low	<p>The Service monitors attendance at the CPC and has confirmed that all partners now have appropriate and consistent representation.</p> <p>Agreed evidence:</p> <p>Outcome from the review</p>	H Robertson, Head of Children & Families Services	Completed

10. Authorisation

- 10.1 The auditor for this assignment was C Carena. The supervising auditor was J Clark.
This report is authorised for issue.

11. Distribution

- 11.1 This report has been distributed to:

T Glenn, Chief Executive
S Devlin, Executive Director, Education & Children's Services
H Robertson, Head of Children & Families Services
J Pepper, Chief Social Work Officer
B Atkinson, Chair, Child Protection Committee
L Simpson, Head of Legal & Governance Services
External Audit
Committee Services

12. Assessment Definitions

- 12.1 The following table contains the definitions of the control objective assessment.

Control Objective Assessment	
Level of assurance	Definition
Substantial Assurance	A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.
Reasonable Assurance	There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.
Limited Assurance	Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.
No Assurance	Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.

12.2 The following table contains the definitions applied by Internal Audit in rating audit findings/actions.

Risk Rating for Individual Findings		
Rating	Rating description	Definition
5	Critical	Significant observations / major concerns which require immediate action. Management will need to add these to the appropriate Service risk register <i>Issue represents a control weakness which could cause, or is causing, severe disruption of the process or severe adverse effect on the ability to achieve process objectives</i>
4	High	Significant observations regarding the absence / failure of key controls requiring urgent action. Management should consider adding these to the appropriate Service / divisional risk register <i>Issue represents a control weakness which could have, or is having, major adverse effect on the ability to achieve process objectives</i>
3	Medium	Observations regarding the effectiveness of key controls requiring reasonably urgent action. Management should consider these when updating any divisional / team risk registers <i>Issue represents a control weakness which could have, or is having, significant adverse effect on the ability to achieve process objectives</i>
2	Low	Minor observations regarding the adequacy of controls which require action to improve the efficiency, effectiveness, or economy of operations or which otherwise require to be brought to the attention of Senior Management <i>Issue represents a minor control weakness with minimal but reportable impact on the ability to achieve process objectives</i>
1	Trivial / Minor	Very minor observations which will be raised during the audit and may not be included within the final report <i>Issue represents a very minor control weakness with negligible impact on the ability to achieve process objectives. The issue will be raised during the audit and may not be included within the final report.</i>