



19.06.2020 With the launch of the new Public Protection Services in Scottish Borders, and in particular the vital role that the Adult Protection Officers (APOs) are playing, there is an amendment to how we conduct Inter-Agency Referral Discussions (IRDs) for Vulnerable Young People. The procedure will be changed at a later date but meantime, with immediate effect, any young person who meets the criteria for the VYP protocol where Adult services are the lead, the IRDs will be conducted by the duty APO. The APOs will also chair any VYP Case Conferences in these circumstances. The APO will request the support of Children and Families staff where appropriate.

Scottish Borders Inter-Agency Vulnerable Young Person's Protocol

**For people under the age of 21 years who are at
risk of causing significant harm to themselves or others**

1.0 BACKGROUND

- 1.1 It is recognised that within the Scottish Borders there is a small number of young people at risk of causing significant harm to themselves or others. This risk may be as a consequence of their own behaviour or a consequence of others behaviour towards them. The protocol is intended to give guidance for the assessment, decision making and co-ordination of a multi-agency response to the needs of this group of young people.
- 1.2 Work with young people involved in high risk activity/behaviours should be co-ordinated as part of a multiagency protection system. The protocol is necessary to ensure:
 - Key agencies are alerted to vulnerable and dangerous situations for young people, or for others.
 - Care, support, protection and risk management for young people, and others.
 - Monitoring of a young person's progress and the effectiveness of the Vulnerable Young Person's (VYP) Plan with risks and management included
- 1.3 This protocol will assist agencies and professionals to plan and work together to help reduce risk to the young person or others affected by their behaviour.
- 1.4 Concerns about confidentiality must not obstruct the exchange of information between agencies/organisations which may be essential to the protection of young persons at risk of significant harm to themselves or others.
- 1.5 This protocol is intended to complement the existing Child Protection, Adult Protection and MAPPAs Procedures. If there is any debate whether a case falls within this protocol or within the Child Protection, Adult Protection or MAPPAs procedures the Child Protection, Adult Protection and MAPPAs Procedures will always take precedence.
- 1.6 The examples given are not an exhaustive list of what can be considered under VYP protocol, professional judgement is required to be used to decide whether it will assist the young person.
- 1.7 **The Child protection procedures apply to children and young people for whom the perceived risk involves the action or inaction of the parent or guardian.**

2.0 AIMS AND OBJECTIVES

- 2.1 To identify young people who are placing themselves or others at risk of significant harm
- 2.2 To reduce the risk of harm to young persons and others
- 2.3 To undertake a multi-agency integrated risk assessment
- 2.4 To produce and review an outcome based VYP plan

3.0 SCOPE OF PROTOCOL

- 3.1 This inter-agency protocol is for all staff (including voluntary workers) working with young people under the age of 21 years in the Scottish Borders area.

- 3.2 These procedures should be implemented when agencies consider a young person's behaviour to be of a level of concern which could lead to serious physical and/or emotional difficulties to themselves or others. In some instances the level of risk may be life threatening.

4.0 CRITERIA FOR REFERRAL

- 4.1 Two conditions need to be met when someone is considering making a vulnerable young person referral:

4.11 There is no existing multi-agency plan and support in place for the Vulnerable Young Person or the referrer considers that the current multi agency support and plan is insufficient to manage the risk that the vulnerable young person poses to themselves or others

4.12 The situation meets one or more of the following criteria:

- a) He/she regularly goes missing from home or their care placement and where concern has been expressed about their safety and well being (Consider regularity of absconding, pattern, possible destinations, absconding with others/alone, level of risk – See Inter Agency Protocol Re Missing Children/Young People Practice notes.)
- b) He/she is involved in chaotic and/or dependent drug, alcohol or volatile substance misuse. (A clear deterioration in the overall situation characterised by an increase in substance misuse, evidence of dependency, evidence of beginning to inject, mixing different drugs and alcohol ie polydrug use, poor level of self-awareness, loss of control, health related problems.)
- c) He/she is sexually exploitative or exploited. Exploitative sexual behaviours are when individual(s) have power over a young person by virtue of one or more of the following – age, emotional maturity, gender, physical strength or intellect. This could be through an emerging pattern of concerning behaviours examples of which could include:
 - The exchange of money or other forms of coercion (a young person may become involved in prostitution and may find themselves having sex in order that they have a bed for the night, food, cigarettes etc. Some young people become involved in abusive relationships which can result in serious emotional difficulties or violence).
 - A young person is groomed or targeted through technology (social networking sites, mobile phones, web sites, message boards etc).
- d) He/she is involved in serious incidents of self-harm. (Consideration needs to be given to the nature of the incident, pattern of behaviour/seriousness of incident/level of self-awareness/ likelihood of repeated action.)
- e) His/her offending behaviour places themselves or others in danger. (Any young person who is likely to meet the grounds for being placed in prison / secure accommodation/intensive support and monitoring may have their needs considered by this protocol.)

- f) His/her violent or abusive behaviour places themselves or others in danger. (Consideration to be given to level of verbal, emotional, physical and sexual aggression, their risk to themselves and others in their homes or in the community)
- g) He/she has a mental health, learning difficulty or learning disability which places themselves or others at significant risk
- h) He/she is involved in an abusive relationship which places themselves or others in danger (Consideration to be given to level of verbal, emotional, physical and sexual aggression)

5.0 REFERRAL PROCESS

- 5.1 Any worker from an agency or organisation who is concerned about the high risk behaviours of a young person should contact the relevant Locality Duty Social Worker:-
 - ICS Locality Duty Social Worker - for young people aged under 16 years
 - Adult Services Locality Duty Social Worker (unless the young person is still known to ICS) - for young people aged 16 years and over
- 5.2 It is good practice to inform the young person unless it is impossible to do so.
- 5.3 Decisions regarding involvement of parents / carers should take account of the views of the young person.
- 5.4 The worker/referrer should complete a VYP confirmation of referral form (appendix A) as soon as possible after contacting the appropriate Child or Adult Locality Duty Social Worker.
- 5.5 If, following discussion, the referrer and the Child or Adult Duty Social Worker agree the criteria for a Vulnerable Young Person has not been met the matter will be managed through existing processes e.g. a meeting around the child (for children) or case management (for adults).
- 5.6 If either the referrer or the duty social worker (or both) believe that the young person meets the criteria then a VYP referral will be made to:
 - the Child Protection and Reviewing Officer (CPRO) - for young people aged under 16 years
 - the Adult Services Locality Team Leader for young people aged 16 years and over
- 5.7 On receipt of a referral / concern the CPRO or Adult Services Locality Team Leader will instigate an Inter-Agency Referral Discussion (IRD), following the same IRD process as for Child or Adult Protection.

6.0 CONDUCTING AN INTER-AGENCY REFERRAL DISCUSSION (IRD)

- 6.1 As with child protection or adult protection the IRD is not a one off event and should adapt to the needs of the situation. It can be used to gather further information to inform the decision making process.
- 6.2 The IRD should involve appropriate inter-agency staff including a professional who knows the young person and a specialist in the area of concern.

- 6.3 If the IRD decides to take time to gather further information a safety plan should be agreed during this period.
- 6.4 If the IRD decides a VYP meeting is to be held it will agree who is required to attend and the urgency of the meeting.
- 6.5 If the meeting is not considered to be more urgent it will be held within 10 working days of the conclusion of the IRD.
- 6.6 The IRD will agree what format the assessment should take and the paperwork required.
- 6.7 The IRD will consider what support should be offered to the young person to attend the VYP meeting.
- 6.8 The IRD will notify participants invited to the VYP meeting what report format is required. The minimum will be a report which clearly identifies key information and concerns regarding the young person. It is good practice to share this with the young person prior to the meeting (if possible).

7.0 VULNERABLE YOUNG PERSON'S MEETING

- 7.1 The meeting will be chaired by a CPRO, APO or Locality Team Leader Social Care and Health, or some other professional identified by the IRD, and all relevant agencies will be expected to attend.
- 7.2 The young person will be encouraged to attend. If they choose not to attend their views must be sought.
- 7.3 The initial VYP meeting will:
 - Share all relevant information
 - Consider the information in respect of risk and need
 - Agree what further assessment is required for the review meeting considering any relevant risk assessment tool available, any specialist who can contribute etc
 - Agree an interim plan with clear action allocated to professionals.
 - Give the young person's rights full consideration.
- 7.4 The minutes of the meeting will be approved and distributed by the Chair within ten working days.
- 7.5 For young people and/or parents/carers who are difficult to engage professionals need to assess all available information and assess the implications for the failure to receive appropriate support/services. Professionals should take steps to ensure that young people and/or parents are able to make informed choices and be flexible in negotiating alternative means of offering support/services
- 7.6 If a young person has come under the VYP protocol before the age of 21 years they will remain under the protocol until the group working with the young person agrees they should come off.

8.0 VULNERABLE YOUNG PERSON'S (VYP) PLAN

- 8.1 The Interim VYP Plan with risks and management included will be circulated within three working days of the initial VYP Meeting.

- 8.2 A lead professional will be identified and core/review group membership established. (Please note that the lead professional may be from any agency and is most likely to be the professional/agency which has the majority input with the young person)
- 8.3 The Interim VYP Plan will identify who is responsible for providing feedback and getting the views of the young person if they did not attend.
- 8.4 The identified lead professional must further develop the Interim VYP Plan to a full outcome based VYP plan/VYP action plan (Adult Services) for the first core/review group meeting.

9.0 CORE GROUP

- 9.1 The initial core/review group will be held within 21 days of the initial VYP meeting and will be chaired by the CPRO/APO/ Locality Team Leader Social Care and Health.
- 9.2 Core/Review groups thereafter will be held 4-6 weekly and will be chaired by the lead professional.
- 9.3 All core/review groups must review the current level of risk to the young person.
- 9.4 The core/review group will oversee the implementation of the VYP Plan. They can make amendments to the VYP Plan as agreed. Any significant change must be discussed with CPRO/APO/ Locality Team Leader Social Care and Health.
- 9.5 The core/review group can at any time request a review VYP meeting.
- 9.6 All core/review group meetings must be minuted and the minute distributed within ten working days.

10.0 REVIEW

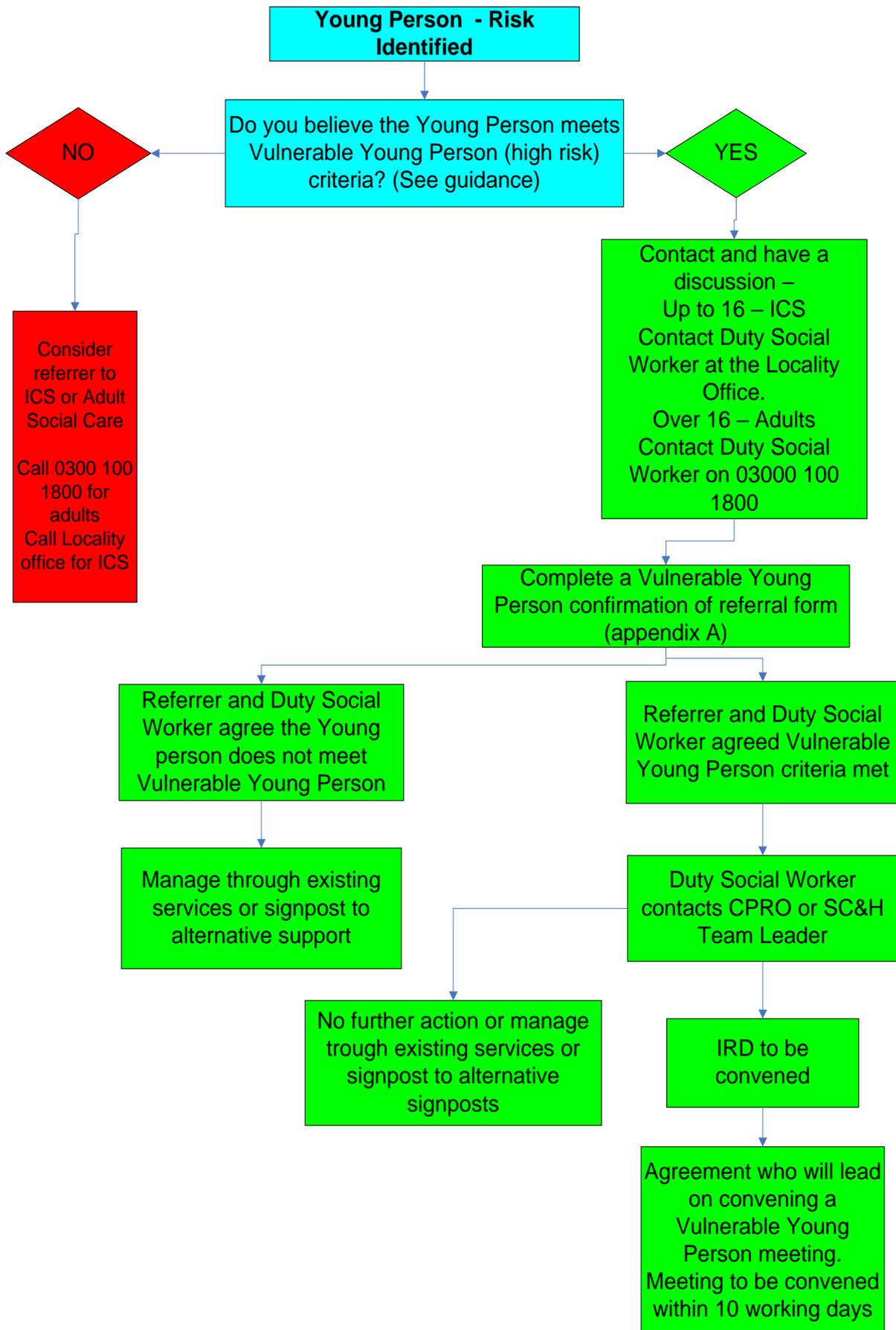
- 10.1 The first VYP Review Meeting will take place within three months and subsequent reviews will be held at six monthly intervals thereafter.
- 10.2 It will be chaired by the same Chair as the Initial meeting, wherever possible.
- 10.3 If required, a comprehensive risk assessment will be completed for the first review VYP meeting
- 10.4 If all are in agreement that the risks have significantly reduced and the child/young person is no longer considered to meet the risk criteria a decision should be made that the child/young person should no longer be subject to a VYP plan. If this is the decision a minimum of one final core/review group must take place following the Review VYP meeting. No agency will end their involvement prior to this core group without full discussion with the other agencies involved.

NB. It is recognised that there are situations where a professional wishes to disagree with a decision.

- For cases involving children please refer to the Dispute Resolution Protocol contained within the [Child Protection Procedures](#).

- For adult services please refer to the Dispute Resolution Protocol located on the [Scottish Borders Council website](#).

Vulnerable Young Persons (VYP) Referral Flowchart - Outlines the pathway of care in relation to young people (under the age of 21 years) who are at risk of causing significant harm to themselves or others.



Contact Details

Adult Services – Social Care and Health

Social Care and Health 0300 100 1800
Out of hours (social work) – 01896 752111

Integrated Children’s Services (ICS) Locality Teams:

Berwickshire - Duns 01361 886115
Eildon - Galashiels 01896 664158
Teviot and Liddesdale - Hawick 01450 364777
Cheviot - Kelso 01573 227421
Tweeddale - Innerleithen 01721 726310
Out of hours (social work) – 01896 752111

Child/Adult Protection Unit

Langlee Complex
Marigold Drive
Galashiels
TD1 2LP
Phone: 01896 664519

Public Protection Unit/Police Scotland

Langlee Complex
Marigold Drive
Galashiels
TD1 2LP
Phone: 01896 664588
Police out of hours: 0131 311 3131

Child Protection Reviewing Officer

Langlee Complex
Marigold Drive
Galashiels
TD1 2LP
Phone: 01896 664519

Adult Protection Officer

Langlee Complex
Marigold Drive
Galashiels
TD1 2LP
Phone: 01896 664519

Child Protection Adviser – NHS Borders

Langlee Complex
Marigold Drive
Galashiels
TD1 2LP
Phone: 01896 664580

Child Protection Officer – Education and Lifelong Learning

Langlee Complex
Marigold Drive
Galashiels
TD1 2LP
Phone 01896 664519

Scottish Borders Child Protection Committee Website

The child protection procedures are available via
the [Scottish Borders Child Protection Committee
website](#).

APPENDIX A**Confirmation Details of Vulnerable Young Persons Protocol Referral made to Scottish Borders Integrated Children's Services (ICS) or Social Care and Health Locality team**

Referrals should be made in the first instance by phone to an Integrated Children's Services, the Duty Hub or Social Care and Health Locality Team (if known), but always confirm referrals in writing using this form.

Date of phone referral Time of phone referral _____ am pm

Is the person (and parents if appropriate) aware of the referral? YES NO

Name of Referrer _____

Designation and base _____

Your Agency _____ Contact Number _____

Name and Locality of Worker spoken to _____

GIRFEC Named Person _____ Contact Details _____

Person/Family Details

Surname: _____

Address: _____

Name of young person referred: _____

DOB: _____

Others in Household:

Name	DOB	Male/Female	School/Occupation

Summary of concerns as discussed with Duty Social Worker in your phone call

a) Situation (information about current situation shared):

b) Background (relevant background shared):

c) Assessment (What you have found/think is going on):

d) Recommendation (What you agreed would be done):

For all referrals, this form **must** be completed and sent to the Worker you spoke to and the duty CPRO/APO at the Public Protection Unit as soon as possible after the phone call. A copy must also be added to the young person's case notes and:-

- If you are from Education - a copy must go to the Child Protection Officer, E and LL, Child Protection Unit
- If you are from Health - a copy must go to the Senior Nurse, Child Protection, NHS Borders, Child Protection Unit

You will be contacted with feedback when action is complete. If you require information about progress prior to this please contact the worker you referred to.

If you disagree with the action you have a responsibility to use either the Child Protection Escalation Policy (located in the Child Protection Procedures via the [Child Protection Committee website](#)) or the Adult Services Dispute Resolution Protocol (located on the [Scottish Borders Council Website](#)) whichever is appropriate.

This form is a record of your conversation it should not be used to provide additional information. If you have additional information you should pass it by phone to the relevant Worker.

20 February 2014

Signed: _____ Print Name: _____ Date: _____