

# Managing individual cases: the Framework for the Assessment of Children in Need and their Families

## Preface

1.1 A consistent message from cases involving harm to children is the importance of identifying problems early and taking rapid action to address them before they get worse. We know that no single professional can have a full picture of a child's needs and circumstances. If children and families are to receive the right help, everyone who comes in contact with them – midwives, health visitors, GPs, early years' professionals, teachers, youth workers, police, voluntary and social workers – has to play a role by identifying concerns, sharing information and taking prompt action.

1.2 Concerns about a child's welfare may arise in many different contexts and the nature of these concerns will vary greatly from case to case. What is important is that action is taken quickly so that a problem does not escalate.

1.3 Understanding families and the experiences of children within them can be complex and signs of low level abuse and neglect may be misleading. Professionals working in universal services – health, education, police and early years – have a responsibility to identify the early signs of abuse and neglect, to share that information and work together to provide children with the help they need.

1.4 This guidance sets out a framework for managing cases when there are concerns about a child's safety, and where an individual is so concerned that they have referred the case to local authority children's social care. When professionals refer a child, they must include any information they have on the child's developmental needs and the capacity of their parents to meet these needs. This information may be included in any assessment which may have been carried out prior to a referral into children's social care. An assessment should be a continuous process, which has the needs of the child at the centre.

## The purpose of assessment

1.5 The purpose of an assessment is to gather information and evidence about a child and their family and to identify whether a child has unmet needs. An assessment is not an end in itself but the means of informing the delivery of effective services for children and families.

1.6 An assessment must be carried out by a qualified social worker. The assessment must be based on a sound knowledge of child development and be seen in the context of the child's family and their environment. The social worker leads the assessment, which must be informed by the child and their

family members and by other professionals who know them, including teachers, health visitors and the police.

1.7 No system can fully eliminate risk. Understanding risk involves judgment and balance. To manage risks, social workers and other professionals must make decisions with the best interests of the child in mind and within a timescale which has the child's safety as its paramount concern.

### **Policy context**

1.8 This guidance supersedes nationally prescribed timescales and focuses instead on the core principles which underpin good assessment. The emphasis is on face to face contact with children so that their needs can be properly understood. That in turn will allow professionals' decisions to be better informed so that the right action can be taken.

1.9 With greater autonomy comes responsibility. Drift and delay prevent children getting the help they need. Children deserve to have an assessment tailored to their individual needs, within a timeframe appropriate for them.

### **Status of the guidance**

1.10 This guidance is issued under section 7 of the Local Authority Social Services Act 1970, which requires local authorities in their social services functions to act under the general guidance of the Secretary of State. As such this document does not have the full force of statute, but should be complied with by local authorities, unless exceptional circumstances arise.

1.11 Professionals in organisations covered by the duty to safeguard and promote the welfare of children under section 11 of the Children Act 2004 should follow this guidance in conjunction with the guidance on section 11 duties.

1.12 The following professionals also have duties to safeguard and promote the welfare of children:

- Teachers and other professionals working in educational institutions (Education Act 2002);
- Early years providers (Childcare Act 2006);
- Children and Family Court Advisory and Support Service (Cafcass) (Criminal Justice and Court Services Act 2000); and
- The UK Border Agency (Borders, Citizen and Immigration Act 2009).

### **Who is the guidance for?**

1.13 This guidance is for all those who work with children and with adults with parenting responsibilities. Social workers and the range of professionals from health including adult services, the police, education, schools and the voluntary and community sector must work together to understand and respond to children's needs.

## What does the guidance cover?

1.14 The guidance covers:

- **Assessment**, its purpose, principles for assessing children in need and a conceptual model. It includes the key aims of assessment and how local areas should set up local frameworks to achieve the best outcomes for children.
- **Assessment checkpoints** for taking or reviewing action as part of the assessment process.
- **The processes for managing individual cases, where a child may be in need or suffering, or likely to suffer, significant harm** to help social workers, their managers and other professionals understand the process as a whole and how they must contribute to it.

## Statutory assessments under the Children Act 1989

1.15 A good assessment will analyse not only the developmental needs of the child but also the nature and level of both the risks and protective factors in the child's life. An assessment must be proportionate to the needs and the nature of any harm faced by the child. The assessment will inform decisions about whether a child is a child in need or is suffering, or likely to suffer, significant harm as defined in section 31 of the Children Act 1989.

1.16 **A child in need** is defined under the Children Act 1989 as a child who is unlikely to reach or maintain a satisfactory level of health or development, or their health and development will be significantly impaired, without the provision of services, or children who are disabled. In these cases, assessments by a social worker are carried out under **section 17 of the Children Act 1989**. The purpose of these assessments is to gather evidence about a child's developmental needs and the parents' capacity to meet these needs within the context of their wider family and community. This information must be used to inform decisions about the help needed by the child.

1.17 If the social worker believes that the child is suffering or likely to suffer significant harm, then the local authority under **section 47 of the Children Act 1989** is required to make enquires to decide what action must be taken, with partners, to safeguard and promote the welfare of the child. There may be a need for immediate protection whilst the assessment is carried out.

1.18 **Following an application under section 31A**, where a child is the subject of a care order, the local authority, as a corporate parent, must assess the child's needs and draw up a care plan which sets out the services which will be provided to meet the child's identified needs.

1.19 **Where a child is accommodated under section 20**, the local authority has a statutory responsibility to assess the child's needs and draw

up a care plan which sets out the services to be provided to meet the child's identified needs.

1.20 Whatever legislation the child is assessed under, the purpose of the assessment is always to understand the needs, nature and level of any risk and harm being suffered by the child; and to provide help and support to address those needs and make the child safe.

1.21 Where a child becomes looked after, the assessment will be the baseline for work with the family while the child is away. Any needs which have been identified must be addressed before decisions are made about the child's return home. An assessment by a social worker is required before the child returns home under the *Care Planning, Placement and Case Review England Regulations 2010*. This will provide evidence of whether the necessary changes and improvements have been made to ensure the child's safety when they return home.

### **Framework for Assessment – local determination**

1.22 Local authorities with their partners must develop and publish their own local frameworks for assessment.

1.23 By local framework for assessment, we mean there should be clear, transparent arrangements for how cases will be managed once a child is referred into children's social care. The detail of each framework will be developed locally and must be based on timeliness, transparency and be proportionate to the needs of the child and their family.

1.24 The local authority is publicly accountable for this framework and all organisations and agencies have a responsibility to understand their local framework for assessment.

### **Assessment - timely, transparent and proportionate to need**

1.25 How quickly an assessment is carried out after a child's case has been referred into children's social care, will be determined by the needs of the child and the level of any harm being suffered. This will require judgments to be made by the social worker in discussion with their manager on every case. Some complex cases will need longer to complete but social workers must not wait until the assessment reaches a conclusion before putting in services to support the child and their family.

1.26 Local authorities should include indicative checkpoints in their frameworks, such as how soon a child should be visited after a referral. Urgent cases must be prioritised but delay must not be a feature in any case that requires a statutory assessment under the Children Act 1989. Delay in providing services, or initiating care proceedings when this is required, has a detrimental impact on a child's development. It is vitally important for their development that children have their needs met at the right time throughout their lives.

1.27 The social worker must discuss the child's case with other professionals – teachers, health and early years staff, police - and agree how quickly meetings should be convened so that children are kept safe and help is provided which meets the needs of them and their family.

1.28 It is the responsibility of the social worker to make clear to children and families how the assessment will be carried out and when they can expect a decision to be made on next steps.

### **The local framework for assessment**

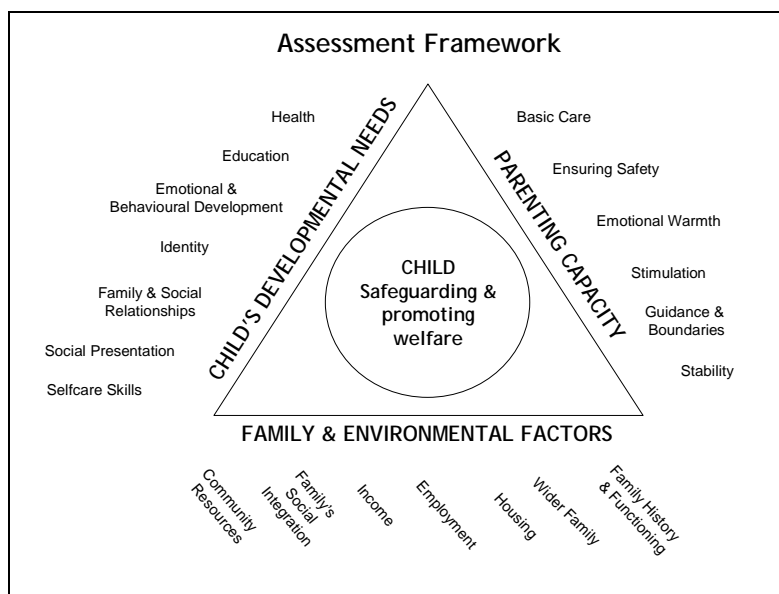
1.29 The local framework for assessment must:

- ensure that assessments are timely, proportionate to the needs of individual children and their families and are transparent;
- take a systematic approach, drawing on the most up to date research, to support professionals to assess whether a child is in need and if the child is suffering harm. This evidence will also inform decisions on what types of help should be offered to the child and family;
- use a conceptual framework to gather information, analyse it systematically and understand the;
  1. child's developmental needs, including whether they are suffering harm;
  2. parents' or carers' capacity to respond to these needs; and
  3. impact and influence of wider family, community and environmental circumstances.
- provide clarity on the contributions of all agencies and professionals that will be undertaking assessments and providing services;
- be informed by other specialist assessments such as the assessment for children with special educational needs and disabled children; and ensure that any specialist assessments are coordinated so that the child and family experience a single assessment and planning process;
- regard assessment as an ongoing process which should be built upon in order to inform future plans such as the care plan for a child who is looked after and, where appropriate, a care plan prepared for the purposes of family court proceedings;
- seek to ensure that each child and family understand the type of help offered and their own responsibilities for being involved in the assessment and the help being provided – so as to improve the child's outcomes;
- require decisions to be recorded in accordance with locally agreed procedures. Recording should include information on the child's development so that progress can be monitored against baseline information to ensure their outcomes are improving. This will reduce the need for repeat assessments during care proceedings, which can be a major source of delay.

### **Principles underpinning work with children in need**

1.30 The detail of a local framework for assessment must be developed with

reference to the following principles and a conceptual framework, an example of which is set out below.



1.31 Work with children and families should:

- be child centred - where there is a conflict of interest, decisions must be made in the child's best interests;
- be rooted in child development;
- be focused on outcomes for children;
- be holistic in approach – addressing the child's needs within their family and wider community;
- ensure equality of opportunity;
- involve children and families;
- build on strengths as well as identifying difficulties;
- be integrated in approach;
- be a continuing process not an event;
- provide and review services;
- be informed by evidence; and
- be transparent and open to challenge.

### Professional supervision

1.32 Assessments that ensure help gets to the child at the right time require regular supervision by managers. Supervision must support professionals to make good quality decisions. These decisions will be based on analysis, judgment and balance, drawing on professional knowledge. Supervision is a professional conversation which should promote learning and reflective practice. Any professional should always be able to have access to a manager to talk through their concerns and judgments affecting the welfare of the child.

## **Managing individual cases**

2.1 This section sets out the process for the assessment and decision making relating to individual cases of children in need and those suffering harm. It sets out:

- the responsibilities that different professionals have in relation to vulnerable children;
- the requirement for local areas to determine a framework for managing cases, based around key checkpoints; and
- the key procedures, necessary for effective joint working, that are to be followed by professionals when managing individual cases.

### **Referral into children's social care**

2.2 Anyone who has concerns about a child's welfare can make a referral to local authority children's social care. Referrals will come from the child themselves, professionals such as teachers, the police and health visitors as well as family members and members of the public. Local authority children's social care has the responsibility to clarify with the referrer the nature of the concerns and how and why they have arisen.

2.3 When professionals refer into children's social care, they must include any information they have on the child's developmental needs and the capacity of their parents to meet these within the context of their wider family and environment.

2.4 The referrer must always have the opportunity to discuss their concerns with a qualified social worker. Local authority children's social care should make clear how this should happen. Within **one working day** of a referral being received, a social worker must make a decision about the course of action to be taken. The social worker will need to make a professional judgment as to what type and level of help and support is needed, record this and feed back to the referrer and the child and their family.

## **RESPONSE TO A REFERRAL**

When a person contacts local authority children's social care with concerns about a child's welfare, it is the local authority's responsibility to determine the most appropriate response. This response must be proportionate and timely depending on the child's needs.

### **Local authority social workers are responsible for determining whether:**

- the child may be in need, and should be assessed under section 17 of the Children Act 1989;
- the child requires immediate protection;
- there is reasonable cause to suspect that the child is suffering, or likely to suffer, significant harm, and must be assessed under section 47 of the Children Act 1989;
- any services are required by the child and family, and what types of services;
- further specialist assessments are required in order to help the local authority to decide what further action to take.

### **In addition to children's social care, professionals from other parts of the local authority such as in housing, and those in health organisations have a duty to:**

- cooperate under section 27 of the Children Act 1989 by assisting the local authority in carrying out its children's social care functions.

**The police have a responsibility to** carry out investigations into allegations of crimes.

Where a section 47 enquiry is being undertaken, the police should work jointly with the local authority.



## Assessment checkpoints

2.5 Local frameworks for assessing a child who may be in need must be built around the following checkpoints. **They must be adhered to other than in exceptional circumstances, when the reasons must be recorded.**

2.6 Specifically, in cases where the local authority decides it must convene a child protection conference, a further check is needed to make sure this happens in a timely manner.

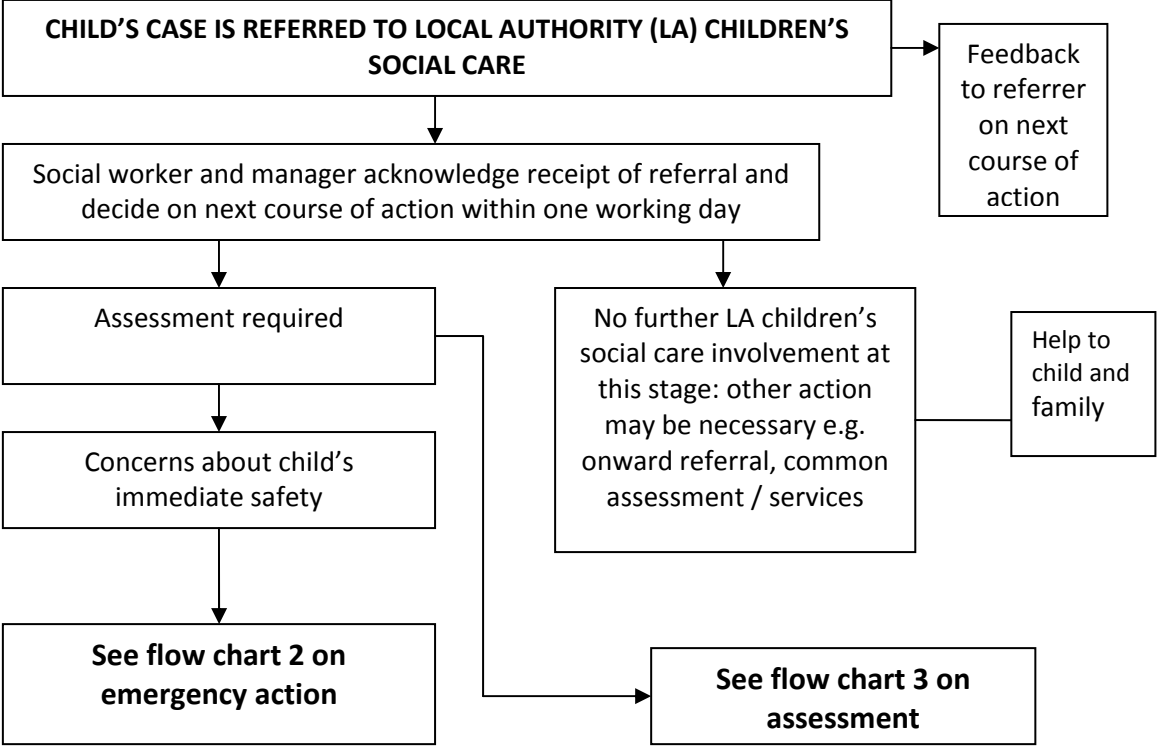
1	<p><b>Within one working day</b> of a referral being received, a local authority social worker must make a decision about the type of response that is required.</p> <p>Where a case is referred that may constitute a criminal offence, the local authority must discuss it with the police at the earliest opportunity.</p> <p>Where there are also allegations of a crime, the police have a duty to carry out a criminal investigation.</p> <p>Feedback must be given to the referrer on decisions made and action being taken. The child and family must be informed of the action to be taken.</p>
2	<p>The child must be seen by a qualified social worker as soon as possible following a referral. Professionals involved with the child and family must make a decision on the timing of this meeting, based on their assessment of the child's needs. The child's wishes and feelings must be taken into account when deciding what services to provide.</p>
3	<p>The local framework for assessment must have an internal review point set at the outset for completing assessments. This must be shared by the lead social worker with all relevant partners – cases must be reviewed by managers regularly to monitor whether assessments are being completed by this date.</p>

## Processes for managing individual cases

2.7 The following flow charts and descriptors set out the precise steps that professionals should take when working together to assess and provide services for children who may be in need, including those suffering harm. The flow charts cover:

- the referral process into local authority children's social care;
- the process for determining next steps for a child who has been assessed as being 'in need';
- the processes for a child where there are concerns about harm; and
- the essential processes for children where there is reasonable cause to suspect that the child is suffering, or likely to suffer, significant harm (this includes immediate protection for children at serious risk of harm).

**Flow chart 1: Action taken when a child is referred to children's social care services**



## ASSESSMENT OF A CHILD IN NEED UNDER SECTION 17 OF THE CHILDREN ACT 1989

Following acceptance of a referral to children's social care, a social worker must lead a multi-agency assessment under section 17 to determine whether the child is in need; the nature of any services required; and whether any specialist assessments should be undertaken to assist the local authority in its decision making.

Assessments must be carried out as set out on pages 3-9 of this guidance.

Children's social care must develop a multi-agency child in need plan which sets out which agencies will provide which services to the child and family.

Where information gathered during an assessment (which may be very brief) results in the social worker suspecting that the child is suffering or likely to suffer significant harm, the local authority should initiate a strategy discussion. This will enable it to decide, together with other agencies, whether to initiate enquiries under section 47 of the Children Act 1989.

<b>Social workers should:</b>	<p>Lead on an assessment and complete it within the locally agreed timescale.</p> <p>See the child within a timescale that is appropriate to the nature of the concerns expressed at referral.</p> <p>Ascertain the child's wishes and feelings and take account of them when planning the provision of services.</p> <p>Conduct interviews with the child and family members, separately and together as appropriate. It will not necessarily be clear whether a criminal offence has been committed, so even initial discussions with the child should be conducted in a way that minimises distress to them and maximises the likelihood that they will provide accurate and complete information.</p> <p>Involve relevant agencies who are working with/or known to the child and family in gathering and providing information.</p> <p>Decide on further action with their manager and all other relevant agencies;</p> <p>Involve the child and parents unless this may place a child at risk of significant harm.</p> <p>Record the assessment findings and decisions and next steps following the assessment.</p> <p>Inform, in writing, all the relevant agencies and the family of their decisions and, if the child is a child in need, of the plan for providing support.</p>
<b>The police should:</b>	<p>Assist other agencies to carry out their responsibilities, where there are concerns about the child's welfare, whether or not a crime has been committed.</p>
<b>All involved professionals should:</b>	<p>Be involved in the assessment and provide further information about the child and family; agree further action including what services would help the child and family; discuss outcomes with the child and family.</p>

## **IMMEDIATE PROTECTION**

Where there is a risk to the life of a child or a likelihood of serious immediate harm, local authority social workers, the police or the NSPCC should use their statutory child protection powers to **act quickly to secure the immediate safety of the child.**

If it is necessary to remove a child from their home, a local authority should wherever possible – and unless a child's safety is otherwise at immediate risk – apply for an **Emergency Protection Order (EPO)**. Police powers to remove a child in an emergency should be used only in exceptional circumstances where there is insufficient time to seek an EPO or for reasons relating to the immediate safety of the child.

An **Emergency Protection Order**, made by the court gives authority to remove a child and places them under the protection of the applicant.

When considering whether emergency action is necessary, always consider the needs of other children in the same household or in the household of an alleged perpetrator.

**The local authority** in whose area a child is found in circumstances that require emergency action (the first authority) is responsible for taking emergency action.

If the child is looked after by, or the subject of a child protection plan in another authority, the first authority should consult the authority responsible for the child. Only when the second local authority explicitly accepts responsibility (to be followed up in writing) is the first authority relieved of its responsibility to take emergency action.

### **Multi-agency working**

Planned emergency action will normally take place following a strategy discussion. Social workers, the police or NSPCC should:

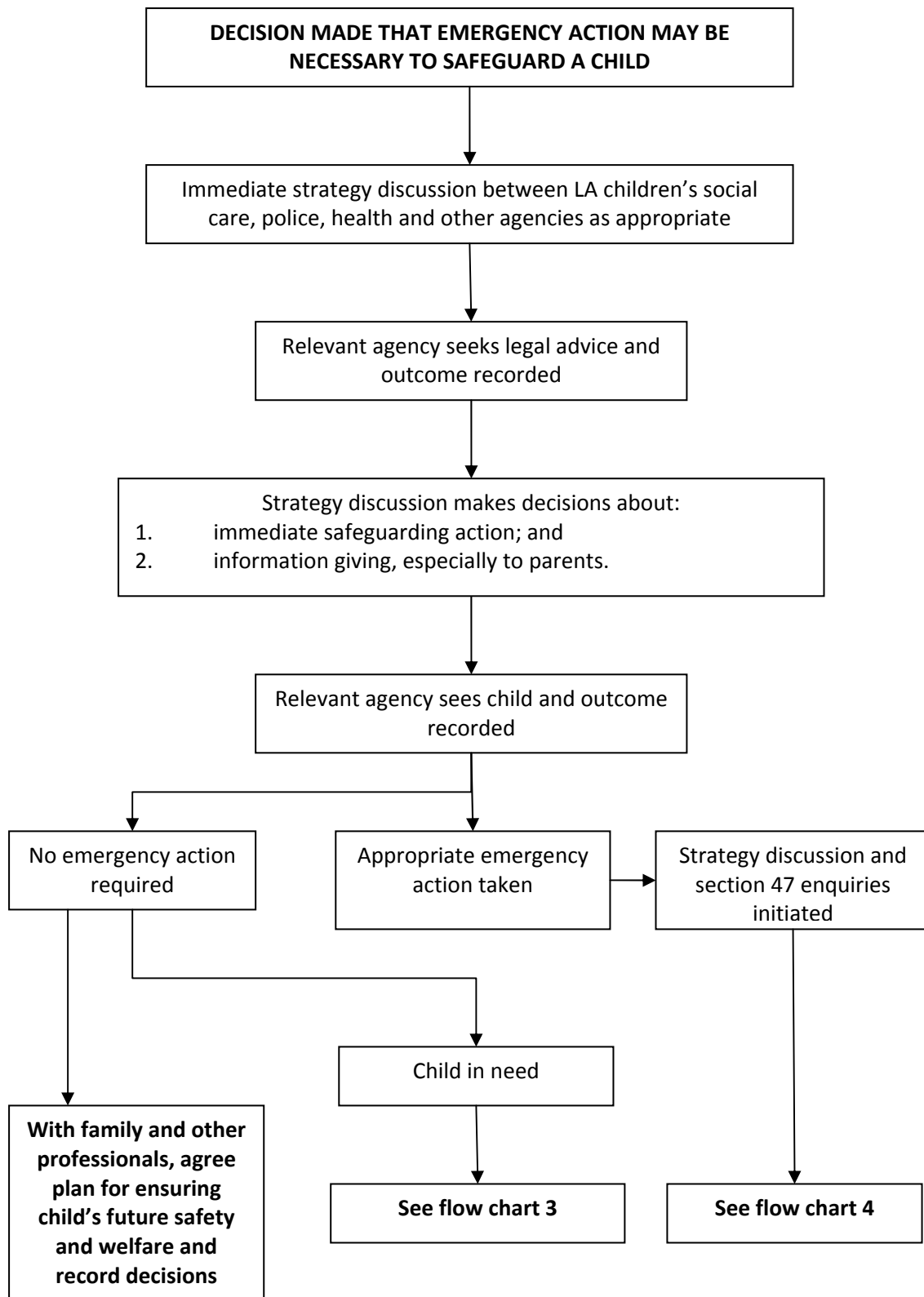
- initiate a strategy discussion to discuss planned emergency action - where a single agency has to act immediately, a strategy discussion should take place as soon as possible;
- see the child (this should be done by a practitioner from the agency taking the emergency action) to decide how best to protect them and whether to seek an EPO; and
- wherever possible, obtain legal advice before initiating legal action, in particular when an EPO is being sought.

### Related information:

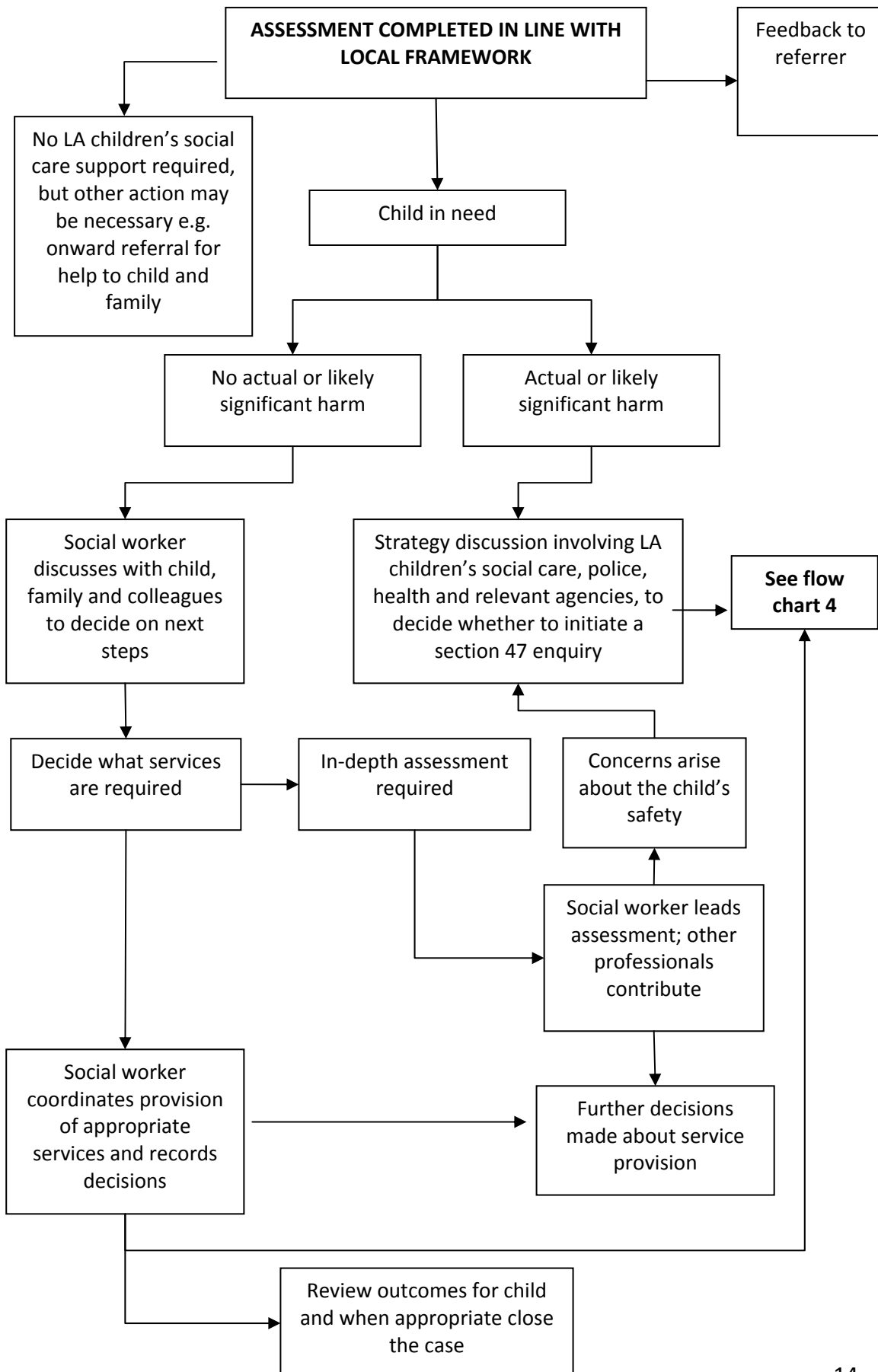
*For further guidance on EPOs see pages 55-65 of Volume 1 of the Children Act Guidance and Regulations, Court Orders.*

*For further guidance on the Strategy Discussion, see page 15.*

## Flow chart 2: Immediate Action



**Flow chart 3: Action taken following an assessment of whether a child is in need**

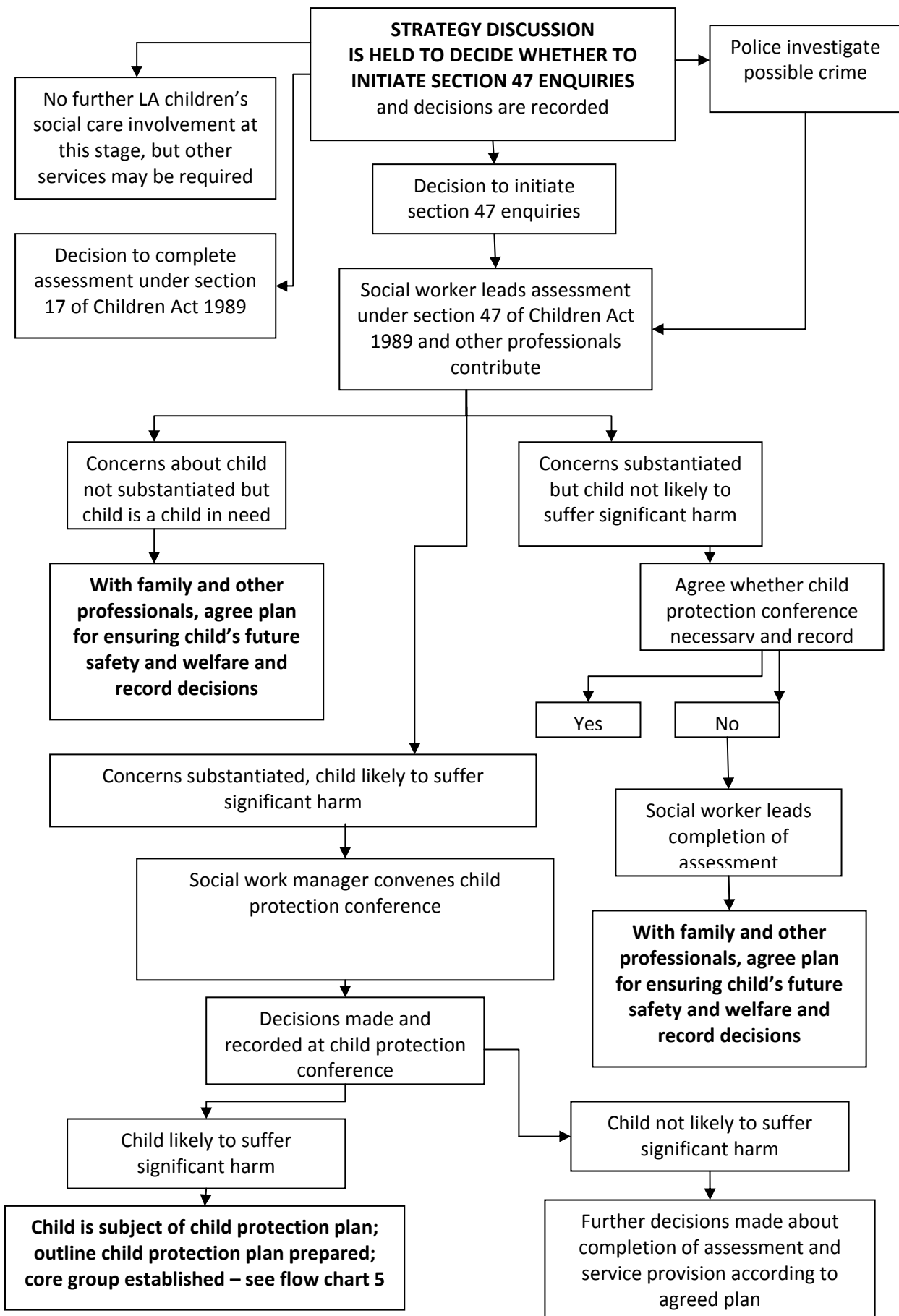


## STRATEGY DISCUSSION

**If there is reasonable cause to suspect the child is suffering, or is likely to suffer significant harm, children's social care should convene a strategy meeting to discuss the child's welfare and plan future action. This might take the form of a multi-agency meeting or phone calls and more than one discussion may be necessary.**

<b>Strategy discussion attendees:</b>	<p>A local authority social worker and their manager, health professionals and a police representative should, as a minimum, be involved in the strategy discussion. Other relevant professionals will depend on the nature of the individual case but may include:</p> <ul style="list-style-type: none"><li>- the professional / agency who made the referral;</li><li>- the child's school / nursery;</li><li>- any health services the child or family members are receiving.</li></ul> <p>All attendees should be sufficiently senior to make decisions on behalf of their agencies.</p>
<b>Strategy discussion tasks:</b>	<p>The discussion should be used to:</p> <ul style="list-style-type: none"><li>- share available information;</li><li>- agree the conduct and timing of any criminal investigation; and</li><li>- decide whether an assessment under section 47 of the Children Act 1989 should be undertaken.</li></ul> <p>Where there are grounds to initiate a section 47 enquiry, decisions should be made about:</p> <ul style="list-style-type: none"><li>- how it will be carried out, what further information is needed and how it will be obtained and recorded;</li><li>- what immediate and short term action is required to support the child; and</li><li>- whether legal action is required.</li></ul>
<b>Social workers and their managers should:</b>	<p>Make sure the strategy discussion takes place and that it considers:</p> <ul style="list-style-type: none"><li>- the child's welfare and future plans;</li><li>- what information should be shared with the child and family (on the basis that information is not shared if this may jeopardise a police investigation or place the child at risk of significant harm);</li><li>- what further action is required where an EPO is in place or the child is the subject of police powers of protection; and</li><li>- record agreed decisions in accordance with local recording procedures.</li></ul>
<b>The police should:</b>	<p>Discuss the basis for any criminal investigation and any relevant processes that other agencies might need to know about, including the timing and methods of evidence gathering.</p>

**Flow chart 4: Action following a strategy discussion**





## INITIATING SECTION 47 ENQUIRIES

A section 47 enquiry is initiated to decide whether and what type of action is required to safeguard and promote the welfare of the child who is suspected of, or likely to be suffering significant harm.

The enquiry is carried out by undertaking an assessment, which analyses the needs of a child and the capacity of the child's parents or caregivers to respond to these needs within the context of their wider family and community. Assessments must be carried out as set out on pages 3-9 of this guidance.

Local authority social workers have a statutory duty to lead assessments under section 47, Children Act 1989. The police, health professionals, teachers and other relevant professionals must help the local authority in undertaking its enquiries.

<b>Social workers and managers should:</b>	Lead the assessment, in accordance with guidance on pages 3-9. See the child who is the subject of concern to ascertain their wishes and feelings, assess their understanding of their situation, their relationships and circumstances more broadly. Interview parents and/or caregivers and determine the wider social and environmental factors that might impact on them and their child. Systematically gather information about the child and family's history. Analyse the findings of the assessment with other relevant professionals to inform what help should be provided. Carry out enquiries in a way that minimises distress for the child and family. Follow the guidance set out in <i>Achieving Best Evidence in Criminal Proceedings: Guidance for Vulnerable or intimidated witnesses, including children</i> where a decision has been made to undertake a joint interview of the child as part of any criminal investigation.
<b>The police should:</b>	Help other agencies understand the reasons for the concerns about the child's safety and welfare. Decide whether or not police investigations reveal grounds for instigating criminal proceedings. Make available, to other professionals, any evidence gathered, to inform discussions about the child's welfare. Where a decision had been made to undertake a joint interview of the child as part of the criminal investigations, follow the guidance set out in <i>Achieving Best Evidence in Criminal Proceedings: Guidance for Vulnerable or intimidated witnesses, including children</i> .
<b>Health professionals should:</b>	Undertake medical tests, examinations or observations depending on the evidence available about how the child's health or development may be being impaired. The lead health practitioner (probably a consultant paediatrician, or possibly the child's GP) may also need to commission any of a range of specialist assessments. For example, physiotherapists, occupational therapists, speech and language therapists and child psychologists may be involved in specific assessments relating to the child's developmental progress. Ensure appropriate treatment and follow-up health concerns.
<b>All involved professionals should:</b>	Contribute to the assessment as required, providing information about the child and family. Exceptionally, consider whether a joint enquiry/investigation team may need to speak to a child victim without the knowledge of the parent or caregiver.

## OUTCOME OF SECTION 47 ENQUIRIES

Local authority social workers are responsible for deciding how to proceed following section 47 enquiries.

Other professionals involved with the child and family have the right to request that local authority children's social care convene a child protection conference, where they have serious concerns that a child's welfare may not otherwise be adequately safeguarded. Local Safeguarding Children's Boards (LSCBs) should have protocols in place for resolving professional differences about whether a child protection conference should be convened.

### Where Concerns Are Not Substantiated:

**Social workers and their manager should:**

Discuss the case with the child, parents and other professionals.  
Decide whether to complete the assessment to determine whether support services may be helpful.

Consider whether the child's health and development should be re-assessed regularly against specific objectives and who has responsibility for doing this.

**Other professionals should:**

Participate in further discussions as necessary.

Contribute to the completion of the assessment as appropriate.

Provide services as specified in the plan for the child.

### Where concerns are substantiated, but the child is not judged to be continuing, or likely, to suffer significant harm:

**Social workers and their managers should:**

Consider carefully whether to proceed to a child protection conference where it is known that a child has suffered significant harm.

Discuss the findings of the section 47 enquiry with other professionals and decide whether a child protection conference is required, or whether a plan for ensuring the child's future safety and welfare can be developed and implemented without the need for a child protection conference or a child protection plan.

If necessary, complete the assessment, to inform the development of the child's plan. In particular, the child's health and development may require careful monitoring and reassessment over time with milestones for progress clearly set out in the plan.

**The police should:**

Consider whether to continue with a criminal investigation.

**Other professionals should:**

Be involved in decisions and any future plan for the child and family.

Be fully involved in discussions about whether to convene a child protection conference.

Request that local authority social workers convene a conference if they have serious concerns that a child might not be adequately safeguarded.

**Where concerns are substantiated, and the child is judged to be continuing, or likely, to suffer significant harm:**

<p><b>Social workers should:</b></p>	<p>Convene an initial child protection conference to enable professionals most involved with the child and family, and the child and their family where possible to assess all relevant information and plan how to safeguard the child and promote their welfare. The timing of this conference must meet the needs of the child and the nature and severity of the harm.</p> <p>Consider whether any professionals with specialist knowledge should be invited to participate.</p> <p>Ensure parents are invited to participate where possible, unless there are grounds for excluding them.</p> <p>Ensure that the child and their parents understand the purpose of the conference and who will attend.</p> <p>Help prepare the child if he or she is attending or making representations through a third party to the conference.</p> <p>Prepare a report for the conference on the child and family which sets out and analyses what is known about the child and family and the local authority's recommendation.</p>
<p><b>All professionals should:</b></p>	<p>Contribute to the information their agency provides ahead of the conference, setting out the nature of the agency's involvement with the child and family.</p> <p>Consider, in conjunction with the police and the appointed conference Chair, whether the report can and should be shared with the parents, and if so, when. Where invited, attend the conference and take part in decision making.</p>

## INITIAL CHILD PROTECTION CONFERENCE

Following section 47 enquiries, an initial child protection conference brings together family members (and the child where appropriate), with the supporters, advocates and professionals most involved with the child and family, to make decisions about the child's future safety, health and development. The conference should decide whether the child is likely to suffer significant harm in the future and whether, therefore, they require a child protection plan to be put in place. The conference should also decide what category of abuse (physical, emotional or sexual) or neglect to record that the child is the subject of a child protection plan.

The conference should ask:

- Has the child suffered significant harm? and
- Is the child likely to suffer significant harm in the future?

If the conference decides the child is likely to suffer significant harm, there will need to be an inter-agency child protection plan to prevent further harm or its recurrence.

It may be decided, where the child has suffered significant harm but is not considered to be likely to in the future, that she or he will not be the subject of a child protection plan. In this situation, consideration should be given to the child's needs and what future help would assist the family in responding to them.

**Social workers and their managers should:**

Attend and present information about the reason for the conference, their understanding of the child's needs, parental capacity and family and environmental context and evidence of how the child has been abused or neglected and its impact on their health and development.

Provide information to enable informed decisions about what action is necessary to safeguard and promote the welfare of the child who is the subject of the conference.

Share the conference information with the child and family beforehand (where appropriate).

Record conference decisions and recommendations.

**All professionals should**

**Have a shared understanding of the test for likelihood of suffering harm in the future:**

- the child can be shown to have suffered ill-treatment or impairment of health or development as a result of physical, emotional or sexual abuse or neglect, and professional judgment is that further ill-treatment or impairment is likely; **or**
- professional judgment, substantiated by findings of enquiries on this individual case or by research evidence, is that the child is likely to suffer ill-treatment or the impairment of health or development as a result of physical, emotional or sexual abuse or neglect.

<p><b>LSCBs should have protocols in place to define:</b></p>	<p>The timing of the conference – timescales should be proportionate based on the nature and seriousness of the harm to the child and the time required to obtain relevant information about the child and family.</p> <p>Criteria for when professionals are expected to attend and when specific specialist opinions should be sought.</p> <p>Specific responsibilities and status of conference chair.</p> <p>Criteria for excluding parents or other family members from a child protection conference.</p> <p>Criteria for professional disagreements about the agreed course of action.</p>
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**THE CHILD PROTECTION PLAN**

**Actions and responsibilities following the initial child protection conference**

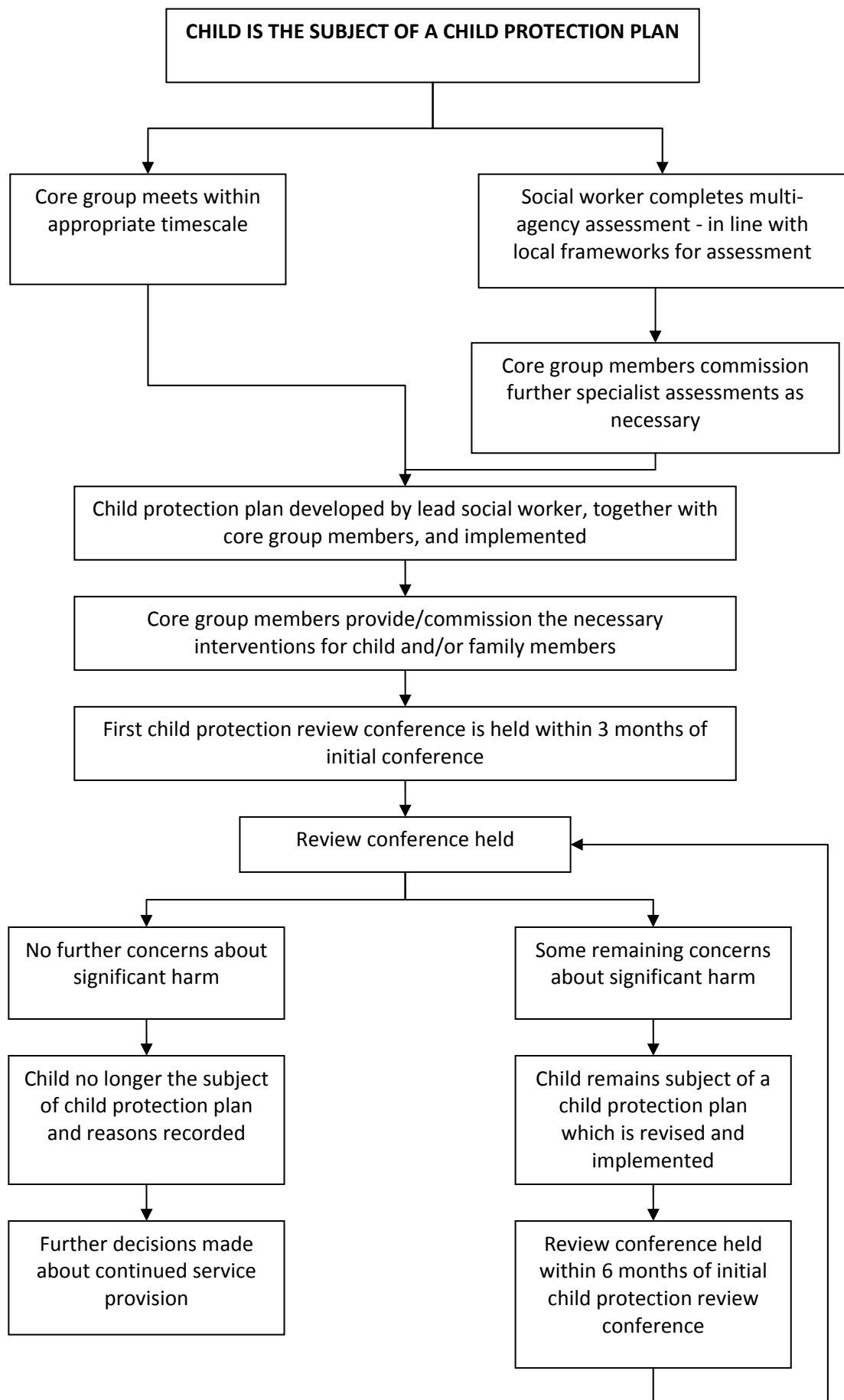
<p><b>Responsibilities of local authority children’s social care</b></p>	<p>Carry statutory responsibility for the child’s welfare and designate a social worker to be the lead professional.</p> <p>Consider the evidence and decide what legal action to take (if any), where a child has suffered, or is likely to suffer, significant harm.</p> <p>Define the local framework for timeliness of circulating plans after the child protection conference.</p>
<p><b>Responsibilities of the lead social worker</b></p>	<p>Lead professional for inter-agency work with the child and family, co-ordinating the contribution of family members and professionals into planning actions and putting the child protection plan into effect.</p> <p>Develop the outline child protection plan into a more detailed inter-agency plan and circulate to relevant professionals (and family where appropriate).</p> <p>Undertake direct work with the child and family in accordance with the child protection plan. Complete the child and family’s in-depth assessment, securing contributions from core group members and others as necessary.</p> <p>Coordinate reviews of progress against the planned outcomes set out in the plan, updating as required.</p> <p>Record decisions and actions agreed at core group meetings, as well as the written views of those who were not able to attend. The child protection plan should be updated as necessary.</p> <p>Lead core group activity.</p>
<p><b>To support joint working, responsibilities of the core group</b></p>	<p>Following the child protection conference, develop the outline child protection plan, based on assessment findings, and set out what needs to change in order for the child to be safe and have their needs met.</p> <p>Decide what steps need to be taken, by whom, to complete the in-depth assessment to inform decisions about the child’s safety and welfare.</p> <p>To implement the child protection plan, with joint responsibility for carrying out the agreed tasks, monitoring progress and outcomes and refining the plan as needed.</p>

## CHILD PROTECTION REVIEW CONFERENCE

**The review conference procedures for preparation, decision-making and other procedures should be the same as those for an initial child protection conference.**

<b>Purpose:</b>	<p>Review whether the child is continuing to suffer, or is likely to suffer, significant harm, and review developmental progress against child protection plan outcomes.</p> <p>Consider whether the child protection plan should continue or should be changed.</p>
<b>Social workers should:</b>	<p>Attend and lead organisation of the conference.</p> <p>Determine when the review conference should be held within three months of the initial conference and thereafter at maximum intervals of six months.</p> <p>Provide information to enable informed decisions about what action is necessary to safeguard and promote the welfare of the child who is the subject of the child protection plan.</p> <p>Share the conference information with the child and family beforehand (where appropriate).</p> <p>Record conference outcomes.</p> <p>If the child is considered to be suffering significant harm, decide whether to initiate family court proceedings (all the children in the household should be considered, even if concerns are only expressed about one child).</p>
<b>To support joint working:</b>	<p>Professionals should attend, and provide details of their involvement with the child and family.</p> <p>The core group has a collective responsibility to produce reports for the child protection review. This information will provide an overview of work undertaken by family members and professionals, and evaluate the impact on the child's welfare against the planned outcomes set out in the child protection plan.</p> <p>The same LSCB decision-making protocol used at the initial conference should be followed.</p>

**Flow chart 5: Action following a child protection conference, including the review process**





## DISCONTINUING THE CHILD PROTECTION PLAN

A child should no longer be the subject of a child protection plan if:

- it is judged that the child is no longer continuing to, or be likely to, suffer significant harm and therefore require safeguarding by means of a child protection plan;
- the child and family have moved permanently to another local authority area. In such cases, the receiving local authority should convene a child protection conference within 15 working days of being notified of the move, only after which event may discontinuing the child protection plan take place in respect of the original local authority's child protection plan; or
- the child has reached 18 years of age (to end the child protection plan, the local authority should have a review around the child's birthday and this should be planned in advance), has died or has permanently left the UK.

**Social workers should:**

Notify, as a minimum, all agency representatives who were invited to attend the initial child protection conference that led to the plan.

The lead social worker should consider whether support services are still required and discuss with the child and family what might be wanted, based on a re-assessment of the child's needs.

## Glossary

### Definitions and descriptions

Children	for the purposes of this document, means persons who have not yet reached their 18th birthday and, therefore includes any reference in this document to 'young people'. The fact that a child has reached 16 years of age, is living independently, is in further education, is a member of the armed forces, is in hospital or in custody in the secure estate for children and young people, does not change his or her status or entitlement to services or protection under the Children Act 1989.
Safeguarding and promoting the welfare of children	is defined for the purposes of this guidance as: <ul style="list-style-type: none"><li>• protecting children from maltreatment;</li><li>• preventing impairment of children's health or development;</li><li>• ensuring that children are growing up in circumstances consistent with the provision of safe and effective care; and</li><li>• taking action to enable children in need to have optimum life chances.</li></ul>
Child protection	is a part of safeguarding and promoting welfare. This refers to the activity that is undertaken to protect children who are suffering, or are likely to suffer, significant harm. Effective child protection is essential as part of wider work to safeguard and promote the welfare of children. However, all agencies and individuals should aim proactively to safeguard and promote the welfare of children so that the need for action to protect children from harm is reduced.
Children in need	is a term that is defined in section 17(10) of the Children Act 1989, namely children are unlikely to reach or maintain a satisfactory level of health or development, or their health and development will be significantly impaired, without the provision of services or children who are disabled. The critical factors to be taken into account in deciding whether a child is in need under the Children Act 1989 are: <ul style="list-style-type: none"><li>• what will happen to a child's health or development without services being provided; and</li><li>• the likely effect the services will have on the child's standard of health and development.</li></ul>
Abuse and neglect	are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm or which in itself harms a child. Children may be abused in a family or in an institutional or community setting, by those known to them or, more rarely, by a stranger for example, via the internet. They may be abused by an adult or adults, or another child or children.
Physical abuse	may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.
Emotional	is the persistent emotional maltreatment of a child such as to cause severe

abuse	and persistent adverse effects on the child's emotional development. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.
Sexual abuse	involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.
Neglect	<p>is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:</p> <ul style="list-style-type: none"> <li>• provide adequate food, clothing and shelter (including exclusion from home or abandonment);</li> <li>• protect a child from physical and emotional harm or danger;</li> <li>• ensure adequate supervision (including the use of inadequate care-givers); or</li> <li>• ensure access to appropriate medical care or treatment.</li> </ul> <p>It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.</p>

<b>ASSESSMENT FRAMEWORK DIMENSIONS</b>	
<b>Child's Developmental Needs</b>	
Health	Covers growth and development as well as physical and mental wellbeing.
Education	Covers all areas of a child's cognitive development which begins from birth.
Emotional and Behavioural Development	Concerns the appropriateness of response demonstrated in feelings and actions by a child, initially to parents and caregivers and, as the child grows older, to others beyond the family.
Identity	Concerns the child's growing sense of self as a separate and valued person.
Family and Social Relationships	Development of empathy and the capacity to place self in someone else's shoes.
Social Presentation	Concerns the child's growing understanding of the way in which appearance, behaviour, and any impairment are perceived by the outside world and the impression being created.
Self Care Skills	Concerns the acquisition by a child of practical, emotional and communication competencies required for increasing independence. Includes early practical skills of dressing and feeding, opportunities to gain confidence and practical skills to undertake activities away from the family and independent living skills as older children.
<b>Parenting Capacity</b>	
Basic Care	Providing for the child's physical needs, and appropriate medical and dental care.
Ensuring Safety	Ensuring the child is adequately protected from harm or danger.
Emotional Warmth	Ensuring the child's emotional needs are met and giving the child a sense of being specially valued and a positive sense of own racial and cultural identity.
Stimulation	Promoting child's learning and intellectual development through encouragement and cognitive stimulation and promoting social opportunities.

<i>Parenting Capacity (continued)</i>	
Guidance and Boundaries	Enabling the child to regulate their own emotions and behaviour. The key parental tasks are <i>demonstrating and modelling</i> appropriate behaviour and control of emotions and interactions with others, and <i>guidance</i> which involves setting boundaries, so that the child is able to develop an internal model of moral values and conscience, and social behaviour appropriate for the society within which they will grow up
Stability	Providing a sufficiently stable family environment to enable a child to develop and maintain a secure attachment to the primary caregiver(s) in order to ensure optimal development.
Family and Environmental Factors	
Family History and Functioning	Family history includes both genetic and psycho-social factors. Family functioning is influenced by who is living in the household and how they are related to the child; significant changes in family/household composition; history of childhood experiences of parents; chronology of significant life events and their meaning to family members; nature of family functioning, including sibling relationships and its impact on the child; parental strengths and difficulties, including those of an absent parent; the relationship between separated parents.
Wider Family	Those considered to be members of the wider family by the child and the parents.
Housing	Covers basic amenities and facilities appropriate to the age and development of the child and other resident members. Accessibility and suitability to the needs of disabled family members.
Employment	Employment in the household, pattern of work and any changes. Income available over a sustained period of time.
Family's Social Integration	Exploration of the wider context of the local neighbourhood and community and its impact on the child and parents.
Community Resources	Describes all facilities and services in a neighbourhood, including universal services of primary health care, day care and schools, places of worship, transport, shops and leisure activities.