52– Working Together to Safeguard Children 2026

Date ratified: 1st September 2026

Date policy to be reviewed: September 2027

Committee responsible for policy: The Board

Signed by M Atkin Director on behalf of Geraldine Kelly — Chair of the Board

Review No.	Date	Summary of Changes	Reviewer
1	1.09.2026	No changes since last review March 2026	D. Whittington

UK Government

Working Together to Safeguard Children 2026

A guide to multi-agency working to help, protect and promote the welfare of children

March 2026

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Safeguarding partners are under a duty to make arrangements to work together, and with other partners locally including early education and childcare settings, schools, colleges and other education providers, to safeguard and promote the welfare of all children in their area.

Safeguarding and promoting the welfare of children is defined for the purposes of this guidance as:

- providing help and support to meet the needs of children as soon as problems emerge
- protecting children from maltreatment, whether that is within or outside the home, including online
- preventing impairment of children's mental and physical health or development
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- promoting the upbringing of children with their birth parents, or otherwise their family network[4] through a kinship care arrangement, whenever possible and where this is in the best interests of the children
- taking action to enable all children to have the best outcomes in line with the outcomes set out in the Children's Social Care National Framework[5,6]
    - Outcome 1: Children, young people and families stay together and get the help they need
    - Outcome 2: Children and young people are safe in and outside their homes
    - Outcome 3: Children and young people are supported by their family network
    - Outcome 4: Children in care and care leavers have stable, loving homes

Child protection is part of safeguarding and promoting the welfare of children and is defined for the purpose of this guidance as activity that is undertaken to protect specific children who are suspected to be suffering, or likely to suffer, significant harm. This includes harm that occurs inside or outside the home, including in foster care and residential care, as well as online. Effective safeguarding is anti-discriminatory and anti-racist. Practitioners should understand and be sensitive to factors, including economic and social circumstances, ethnicity and disability, which can impact children and families' lives.

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[4] A family network can be a blood-relative, or a non-related connected person, such as a family friend or neighbour.

[5] Children's Social Care National Framework

[6] These children's social care specific outcomes support and align with the Keeping Children Safe priority outcome in the Local Outcomes Framework that sets out key priority outcomes that are delivered at the local level and driven by councils as local leaders of place.

to which the section 11 duty applies to have regard to any guidance given to them by the Secretary of State

- section 16B(7) of the Children Act 2004, as amended by the Children and Social Work Act 2017, which states that the Child Safeguarding Practice Review Panel must have regard to any guidance given by the Secretary of State in connection with its functions
- section 16C(2) of the Children Act 2004, as amended by the Children and Social Work Act 2017, which states that local authorities must have regard to any guidance given by the Secretary of State in connection with their functions relating to notifications
- section 16K of the Children Act 2004, as amended by the Children and Social Work Act 2017, which states that safeguarding partners and relevant agencies for a local authority area in England must have regard to any guidance given by the Secretary of State in connection with their functions under sections 16E to 16J of the Act
- section 16Q of the Children Act 2004, as amended by the Children and Social Work Act 2017, which states that the child death review partners for a local authority area in outcome o must have regard to any guidance given by the Secretary of State in connection with their functions under sections 16M to 16P of the Act
- section 175(4) of the Education Act 2002, which states that governing bodies of maintained schools (including maintained nursery schools), further education institutions and management committees of pupil referral units must have regard to any guidance given by the Secretary of State
- paragraph 7(b) of the Schedule to the Education (Independent School Standards) Regulations 2014, made under sections 94(1) and (2) of the Education and Skills Act 2008, which states that the arrangements to safeguard or promote the welfare of pupils made by the proprietors of independent schools (including academies or free schools) or alternative provision academies must have regard to any guidance given by the Secretary of State
- paragraph 3 of the Schedule to the Non-Maintained Special Schools (England) Regulations 2015, made under section 342 of the Education Act 1996, which requires arrangements for safeguarding and promoting the health, safety, and welfare of pupils in non-maintained special schools to have regard to any guidance published on such issues
- Section 20 of the Victims and Prisoners Act 2024 which introduced a new provision into Part 3 of the Domestic Abuse Act 2021, section 49A, titled 'Arrangements to notify schools', placing a statutory duty on all 43 territorial police forces across England and Wales to implement the Operation Encompass information-sharing scheme

Chapter 1: A shared responsibility

10. Successful outcomes for children depend on strong partnership working between parents/carers and the practitioners working with them. Practitioners should take a child-centred approach to meeting the needs of the whole family.

11. As set out in the Children's Social Care National Framework, the following principles apply here too:

- children's welfare is paramount
- children's wishes and feelings are sought, heard, and responded to
- children's social care works in partnership with whole families
- children are raised by their families, with their family networks or in family environments wherever possible
- local authorities work with other agencies to effectively identify and meet the needs of children, young people, and families
- local authorities consider the economic and social circumstances impacting children, young people, and families and actively seek to address discrimination and inequality experienced by families

A child-centred approach within a whole family focus

12. A child-centred approach is fundamental to safeguarding and promoting the welfare of every child. All practitioners should follow the principles of the Children Act 1989 and 2004. These Acts make clear that the welfare of children is paramount and that they are best looked after within their families, with their parents playing a full part in their lives, unless compulsory intervention in family life is necessary.

13. Children are clear about what they want from an effective safeguarding system:

should also be considered where there are concerns.

16. This approach sits within a whole family culture in which the needs of all members of the family are explored as individuals and how their needs impact on one another is drawn out.

17. This child-centred approach is supported by:

- the Children Act 1989, which requires local authorities to give due consideration to a child's wishes when determining what services to provide under section 17 and before making decisions about action to be taken to protect individual children under section 47. These duties complement requirements relating to the wishes and feelings of children who are, or may be, looked after (section 22(4)), including those who are provided with accommodation under section 20 and children taken into police protection (section 46(3)(d)).
- the Equality Act 2010, which puts a responsibility on public authorities to have due regard to the need to eliminate discrimination and promote equality of opportunity. This applies to the process of identification of need and risk faced by the individual child and the process of assessment. No child or group of children must be treated any less favourably than others in being able to access effective services which meet their particular needs. To comply with the Equality Act 2010, safeguarding partners must assess and where appropriate put in place measures ahead of time to support all children and families to access services, overcoming any barriers they may face due to a particular protected characteristic.
- the United Nations Convention on the Rights of the Child (UNCRC)[9] which is an international agreement that protects the rights of children and provides a child-centred framework for the development of services to children. The UK Government ratified the UNCRC in 1991 and, by doing so, recognises children's rights including to expression and receiving information.
- the Domestic Abuse Act 2021, section 3[10] recognises that a child is a victim of domestic abuse in their own right if they see, hear or experience the effects of domestic abuse and are related to either victim or perpetrator of the abuse, or either the victim or perpetrator of the abuse has parental responsibility for that child.
- the Children's Social Care National Framework[11], published in 2023, is statutory guidance that sets out the purpose of children's social care as existing to support children and families, to protect children by intervening decisively when they are at

[9] United Nations Convention on the Rights of the Child
[10] Domestic Abuse Act 2021 Section 3
[11] Children's Social Care National Framework

1) Effective partnership working with parents and carers happens when practitioners build strong, positive, trusting, and co-operative relationships by:
    - approaching families and their wider family networks and communities with empathy, respect, compassion, and creativity
    - avoiding reinforcing family shame, suffering, and blaming
    - using strength-based approaches, working with parents and carers to identify what is working well and how their strengths could support them to effect positive change
    - ensuring they work sensitively with parents, carers, and children, to identify and understand the impact of adversity and trauma in their lives. They seek to understand how adversity and trauma might manifest and affect children and parents' engagement and use their expertise to adapt their response with care and compassion
    - adapting their responses to meet the diverse needs of parents and carers, including fathers and male carers, and the specific challenges being faced, including parents and carers of disabled children, and where harm is outside the home[12]
    - ensuring they understand the families' background, ethnicity, religion, financial situation, ability, education, sex, ages and sexual orientation, and potential barriers these create in seeking and accessing help and support
    - being alert and recognising where parents or carers may not be acting in the best interest of the child or where children may be experiencing abuse, neglect, and exploitation as a result of actions by parents, carers, or other individuals in their lives. Practitioners use their skills and expertise to adapt their response to secure engagement
    - being mindful of negative stereotypes when making decisions which might lead to false assumptions
2) Verbal and non-verbal communication should be respectful, non-blaming, clear, inclusive, and adapted to parents' and carers' needs. Practitioners should ensure that all materials provided to children, parents, carers, and families are jargon free, developmentally appropriate and in a format that is easily understood. Where appropriate, material provided to children, parents, carers, and families should be made accessible and translated into their first language if necessary. Professional interpreters should be provided where needed. Practitioners should not need to rely on family members or partners for interpretation services, including British Sign Language.

[12] Multi-agency Practice Principles for responding to child exploitation and extra-familial harm (researchinpractice.org.uk)

23. Senior and middle managers may include Directors of Children's services, heads of services and team managers in local authorities, designated and named professionals (GP, nurse, doctor, midwife) in health, the Chief Superintendent and Chief Inspector (and equivalents) in police, head teachers, designated safeguarding leads and nursery managers in education.

24. Those in direct practice may include frontline social workers, health visitors and midwives, police constables, teachers, children's homes staff, independent reviewing officers, and those working in the voluntary and community sector. Foster carers have an important role in the day-to-day care of the child, including as part of the team around the child and therefore these expectations also apply to them.

25. The practitioners listed as examples for each level is not exhaustive, decision-making structures will differ by area, and local areas should consider how best to apply these standards to match their local approach.

26. Multi-agency expectations for **strategic leaders** are as follows:

- **Collaborate:** leaders develop a shared vision for how their services work together to deliver shared goals
- **Learn:** leaders use evidence from direct practice in their area so that they know and can evaluate what is and isn't working well for children and families
- **Resource:** leaders are ambitious about helping, supporting, and protecting children in their area and jointly prioritise and share resources accordingly
- **Include:** leaders create an inclusive and anti-discriminatory culture where diversity is understood, and multi-agency and multi-disciplinary working is celebrated
- **Mutual challenge**: leaders hold each other and their teams to account and are held to account by their teams for the quality of the partnership working

27. Multi-agency expectations for **senior and middle managers** are as follows:

- **Collaborate**: decisions are based on a shared practice approach and constructive debate and analysis of information from all services
- **Learn**: managers ensure their teams have time to engage in peer learning and knowledge exchange, peer audit, group supervision and observation
- **Resource**: managers ensure children receive the holistic support they need, drawing in expertise from a wide range of agencies
- **Include**: managers support staff to identify and challenge discrimination, disparity, and negative stereotypes
- **Mutual challenge**: constructive challenge within and across agencies and disciplines is actively encouraged, independent judgements are valued and given space alongside collective decision-making to avoid groupthink

domestic abuse.

31. Information sharing is also essential for the identification of patterns of behaviour, such as when a child is at risk of going missing or has gone missing, (including being missing from education, or when a looked after child goes missing from residential or foster care) or when there is a concern that a child may be a victim of or be drawn into crime. When multiple children appear associated to the same context or locations of risk, or in relation to children in the secure estate where there may be multiple local authorities involved in a child's care, it will be for local safeguarding partners to consider how they build relationships and share relevant information in a timely and proportionate way with each other, other local organisations, and other safeguarding partnerships.

32. The Data Protection Act 2018[15] and UK General Data Protection Regulation (UK GDPR) supports the sharing of relevant information for the purposes of keeping children safe. Fears about sharing information must not be allowed to stand in the way of safeguarding and promoting the welfare of children. To ensure effective safeguarding arrangements:

- all organisations and agencies should have arrangements in place that set out clearly the processes and the principles for sharing information. The arrangements should cover how information will be shared with their own organisation/agency and with others who may be involved in a child's life
- practitioners should not assume that someone else will pass on information that they think may be critical to keep a child safe. If a practitioner has concerns about a child's welfare or safety, then they should share the information with local authority children's social care and/or the police. All practitioners should be particularly alert to the importance of sharing information when a child moves from one local authority into another, due to the risk that knowledge pertinent to keeping a child safe could be lost
- UK GDPR provides a number of bases for sharing personal information. It is not necessary to seek consent to share information for the purposes of safeguarding and promoting the welfare of a child provided that there is a lawful basis to process any personal information required. The legal bases that may be appropriate for sharing data in these circumstances could be "legal obligation" or "public task", which includes the performance of a task in the public interest or the exercise of official authority. Each of the lawful bases under UK GDPR has different requirements[16]. In some circumstances, it may be appropriate to obtain consent to share data, but it is important to note that UK GDPR sets a high standard for consent which is specific, time limited and can be withdrawn (in which case the information would have to be deleted)

[15] Data Protection Act 2018
[16] Lawful basis for processing: Information Commissioner's Office

(someone convicted of stalking or harassment against the victim, or is subject to a stalking protection order to protect the victim) under Article 17(1)(g) of the UK GDPR[19]. Victims must provide evidence, such as sentencing information from Witness Care Units or a copy of the protection order.

36. Data controllers must investigate the allegation and decide that no further action is needed before deleting personal data under Article 17(1)(g). A data controller can refuse a request where exemptions apply, such as when data must be kept for legal obligations, for the performance of a task carried out in the public interest, or for safeguarding purposes.

37. Data controllers include bodies such as local authorities, which may hold information about allegations relating to someone's parenting or child safety. If such allegations are malicious and meet the criteria, victims may request erasure, subject to the relevant legal tests. Further guidance on this is available from the ICO in 'Your right to get your data deleted' and 'Right to erasure'.

[19] Article 17 (1)(g)

The common law duty of confidence and the Human Rights Act 1998 prevent the sharing of personal information

No, this is not the case. In addition to the Data Protection Act 2018 and GDPR, practitioners need to balance the common law duty of confidence and the Human Rights Act 1998 against the effect on individuals or others of not sharing the information

IT systems are often a barrier to effective information sharing

There are many IT systems that support the sharing of information, such as the Child Protection Information Sharing System (CP-IS). It is important that the sector continues to work with IT suppliers to ensure that their user needs around information sharing are factored into priorities for system enhancement.

2, paragraphs 69-79 on Relevant agencies) in the process.

43. Every local authority, ICB and constabulary in England must be covered by a multi-agency safeguarding arrangement[23].

44. The purpose of multi-agency safeguarding arrangements is to ensure that, at a local level, organisations and agencies are clear about how they will work together to safeguard all children and promote their welfare. This means:

- there is a clear, shared vision for how to improve outcomes for children locally across all levels of need and all types of harm
- when a child is identified as suffering or likely to suffer significant harm there is a prompt, appropriate and effective response to ensure the protection and support of the child
- organisations and agencies are challenged appropriately, effectively holding one another to account
- the voice of children and families combined with the knowledge of experienced practitioners and insights from data, provides a greater understanding of the areas of strength and/or improvement within arrangements and practice
- information is sought, analysed, shared, and broken down by protected characteristics to facilitate more accurate and timely decision-making for children and families, and through this the identification of groups of children who may be disproportionately over- or under-represented in services, to understand outcomes for different communities of children
- effective collection, sharing and analysis of data enables early identification of new safeguarding risks, issues, emerging threats, and joined-up responses across relevant agencies, including the identification of groups of children who may be disproportionately over- or under-represented in services, so that services are adapted to address these issues
- senior leaders promote and embed a learning culture which supports local services to become more reflective and implement changes to practice
- senior leaders have a good knowledge and understanding about the quality of local practice and its impact on children and families

[23] Children Act 2004 Section 16E

Strategic leadership

51. Strong, joined-up, impactful leadership is critical to effective multi- agency safeguarding, bringing together the various organisations and agencies. It is therefore important that the head of each statutory safeguarding partner agency plays an active role in these arrangements. They (hereafter 'lead safeguarding partner' or 'LSP') have been named because they are able to:

- speak with authority for the safeguarding partner they represent
- take decisions on behalf of their organisation or agency and commit them on policy, resourcing, and practice matters
- hold their own organisation or agency to account on how effectively they participate and implement the local arrangements.

52. The LSPs for safeguarding partners are: Chief Executives of Local Authorities[25], Chief Executives of the ICBs, and Chief Officers of police forces[26].

53. Each LSP is responsible for discharging their own statutory and legislative duties to safeguard and promote the welfare of children. As leaders of their organisations and the statutory safeguarding partners, it is for LSPs to assure themselves that their local arrangements are effective and keep children safe. This includes systems of assurance and accountability within each of their organisations, including inspection findings.

54. LSPs are jointly responsible for ensuring the proper involvement of and oversight of all relevant agencies, and should act as a team, as opposed to a voice for their agency alone. They should meet sufficiently regularly to undertake the following core functions: Through what mechanism and how often is for local decision.

[25] Head of paid service: Local Government and Housing Act 1989 Section 4

[26] A chief police officer is the most senior police officer in a police force as defined in the Police Act 1996 Section 101

Delivering multi-agency safeguarding arrangements

60. Each LSP should appoint a delegated safeguarding partner (DSP) for its agency who should be named in arrangements.

61. DSPs[28] should be sufficiently senior to be able to speak with authority, take decisions on behalf of the LSP and hold their sectors to account. The DSPs should have the authority to carry out these functions, while ultimate accountability remains with the LSP as the individual responsible for the delivery of the statutory duties of the safeguarding partners.

62. The DSP should have oversight of the quality and compliance of the delivery of agreed shared priorities. They should have processes in place to provide assurance that multi-agency practice is reviewed and operating well. Where this is not evident, they should have the capacity and resource from their own agencies to engage, respond and improve operational systems and practice.

63. DSPs and LSPs should have regular interaction and communication to ensure that the LSP has sufficient oversight and detail on key topics and issues to maintain their statutory responsibilities. Where a key decision needs to be made that will impact arrangements and/or services, this should involve the LSP. DSPs should escalate risks and issues they cannot resolve between them to the LSPs for resolution. This will ensure that accountability is clear, that strategic decisions are achievable and deliverable, and that progress is driven at all levels.

64. DSPs should meet sufficiently frequently to undertake the following joint functions:

[28] For the DSP role, we expect that, for the police, there might need to be delegation based on local context. The responsibilities of the delegate should be no lower than that of Area Commander, Head of Public Protection or equivalent.

Functions of Partnership Chair role

- To develop strategic links, support and hold to account all LSPs in fulfilling their safeguarding duties for children.
- Ensure that local arrangements are designed to work collaboratively and effectively by encouraging and supporting the development of partnership working between the LSPs, DSPs, independent scrutiny role and MASA sub-groups.
- Chair the meetings of the DSPs, including any additional meetings convened as a response to specific and exceptional circumstances, with the help of the business manager and independent scrutiny role.
- Offer appropriate challenge to ensure that the partners are accountable, and that the local arrangements operate effectively and with impact.

67. Strong leadership and clear accountability are crucial for effective multi-agency safeguarding arrangements. To strengthen accountability, local safeguarding arrangements should separate the roles of partnership chair and independent scrutiny and be clear about the three distinct functions within effective local safeguarding arrangements:

- the partnership chair has authority, is decisive and enables resource allocation, with risk escalation to lead safeguarding partners at the executive
- a business management function with adequate resources and capacity to support the partnership chair
- a rigorous and effective independent scrutiny function providing challenge to the safeguarding partners (see chapter 2, paragraphs 95-103 on Independent scrutiny)

68. The DSPs should ensure that, with the support of, the business management and independent scrutiny function (see chapter 2, paragraphs 95-103 on Independent scrutiny) the following activities and assurance will be delivered:

- oversee and be responsible for the analysis, intelligence, and timely collection of data to support functions, such as:
    - getting an accurate local picture of how effectively services are being delivered through regular communication across relevant agencies
    - advising the statutory safeguarding partners of the key challenges and emerging priorities

early years settings, alternative provision, pupil referral units and further education because of the pivotal role they play in children's daily lives and amount of time they spend with them.

72. Early years provision within schools and maintained nurseries are relevant agencies and help to safeguard some of the most vulnerable children. There are also other providers such as nurseries and childminders whose role within local arrangements should be considered. All early years providers should have regard to this guidance and the Early Years Foundation Stage statutory framework[30]. School-aged children may also attend a childcare setting or an out-of-school activity, and where children are home educated these settings are particularly significant. Therefore, LSPs should also consider including voluntary, charity, social enterprise (VCSE) organisations, childcare settings, and sports clubs in their published arrangements.

73. Local arrangements are expected to change over time to ensure they continue to work effectively for children and families, to keep pace with changing demographics and evolving social and economic challenges. Any changes should be reflected in updated published arrangements.

74. When identified by the LSPs as a relevant agency, an organisation must act in accordance with local safeguarding arrangements[31]. As part of this, the organisation should:

- have a clear understanding of its responsibilities in relation to safeguarding children locally, and how it will discharge them
- co-operate with safeguarding partners to improve, implement, and monitor effectiveness of the local safeguarding arrangements
- share information and data about safeguarding issues and concerns affecting the children involved in their organisation to contribute to local priorities
- ensure local multi-agency safeguarding arrangements are fully understood, and rigorously applied within their organisation

75. LSPs should consult with relevant agencies when developing safeguarding arrangements. This will ensure relevant agencies are aware of the expectations placed on them. Relevant agencies should actively promote and enforce the arrangements they have contributed to shaping.

76. Where a relevant agency has a national remit, such as the British Transport Police and Cafcass, LSPs should be clear on how these agencies should collaborate, what any agency's individual responsibilities are, and how they might contribute towards local safeguarding arrangements.

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[30] Statutory framework for the early years foundation stage
[31] Children's Act 2004 Section16G (4)

included in local safeguarding arrangements. This means making sure that the views and contributions of education and childcare providers are articulated at the highest level of decision-making. Although it may be challenging for a single education or childcare leader to speak on behalf of all local providers, LSPs should have an education representative at strategic discussions representing the education sector. These local leaders will bring insights on the experiences of children locally, and on how arrangements impact on the education and childcare system.

82. Most local multi-agency safeguarding arrangements include systems to ensure engagement and collaboration at the operational level, such as through education sub-groups and networks, practitioner forums involving designated safeguarding leads[34], and nominated education representatives. Some safeguarding partners already recognise the need to ensure settings have a voice at the strategic decision-making level and reflect this in their structures. Published arrangements and yearly reports should outline how settings are engaged and consulted with at both the operational and strategic levels, how this then impacts decision-making, what it means to be a relevant agency in their local area, and how they can escalate an issue.

83. Settings, including multi-academy trusts, have a responsibility to play their full part in local safeguarding arrangements, including where their footprint extends across several local authority areas. This includes, but should not be limited to, responding to safeguarding audits of quality and compliance[35], as requested by the local authority and/or local safeguarding partners. This is to ensure that policies are consistent with the local multi-agency safeguarding arrangements and relevant legislation and/or regulations. They should also provide staff and governor training that meets local and national safeguarding requirements[36]. Early education and childcare settings, schools, colleges and other education providers where required should report their audits to their governing bodies and proprietors to be shared as requested by the LSPs. Training for designated safeguarding leads and designated teachers should include shared understanding about different levels of need and how these need to be responded to. Settings also play a vital role in sharing and contributing to key information about children, including attendance data, exclusions, concerns about abuse, neglect, exploitation, and wider social and environmental factors including extra-familial contexts, which are a key aspect of keeping children safe. This should include the duty placed on police forces to share information about child victims of domestic abuse with educational settings as part of Operation Encompass.

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[34] Named child protection or safeguarding lead: NSPCC Learning

[35] Children Act 2004 Section 11, Education Act 2002 Section 157, Education Act 2002 Section 175, Children and Social Work Act 2017 Section 16H

[36] Keeping children safe in education

90. The person or organisation to whom a request is made must comply with such a request[40]. If they do not, safeguarding partners may take legal action against them.

91. As public authorities, safeguarding partners should be aware of their own responsibilities under the relevant information law and have regard to guidance provided by the Information Commissioner's Office[41] when issuing and responding to requests for information.

92. Safeguarding partners should have an agreement in place which outlines how information is shared safely and effectively between themselves and other relevant agencies.

Accountability & inspections

93. Safeguarding partners should ensure strong leadership and transparent governance to deliver effective multi-agency safeguarding arrangements. Accountability is addressed through a number of mechanisms, including regulatory inspections, independent scrutiny and safeguarding partner reporting.

94. Safeguarding partners are inspected at a single agency level by their respective inspectorates; Ofsted, His Majesty's Inspectorate of Constabulary, Fire and Rescue Services (HMICFRS) and Care Quality Commission (CQC). These inspectorates, along with HMI Probation, also jointly inspect and report on the impact of local multi-agency safeguarding arrangements through the joint targeted area inspection (JTAI) programme.

Independent scrutiny

95. Safeguarding partners must ensure that there are arrangements for effective independent scrutiny in place for their local area.

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[40] Children Act 2004 Section 16H (2)

[41] For organisations: Information Commissioner's Office

99. The decision on how best to implement a robust system of independent scrutiny is to be made locally, and LSPs should be assured that the system in place leads to objective and rigorous analysis of local arrangements.

100. Statutory partners and relevant agencies should review progress against agreed priorities and identify areas for scrutiny, with a focus on achieving outcomes for children.

101. Scrutiny should be based on sharing and analysis of local and national data, intelligence, and information. This could include the development of multi-agency dashboards, joint needs assessments, multi-agency audits, reviews, and mapping of what is already being scrutinised by the statutory safeguarding partners and relevant agencies, identifying the gaps and aligning with agreed priorities.

102. Independent scrutiny can be delivered through a range of methods and structures. Local areas may choose to have an individual or an externally commissioned group delivering their scrutiny. Furthermore, scrutiny may be embedded within the structure of the arrangement or set apart from it. Scrutiny work can be undertaken through interviews, focus groups, data analysis, observations, and peer review. Scrutiny should take account of the voice and experience of children and their families.

103. The approach to independent scrutiny should be clearly set out and accessible. The published arrangements should state how independent scrutiny is delivered locally and by whom, how the arrangements are reviewed and how regularly, which areas will be scrutinised, and how any recommendations will be taken forward. This might include the process and timescales for ongoing review of the arrangements, and the effectiveness of learning following serious incidents. In the yearly report, the LSPs should review the impact and learning from scrutiny and how they are responding to the findings to improve the effectiveness of arrangements (see chapter 2, paragraphs 107-108 on Reporting).

Funding

104. The LSPs should agree on the level of funding needed to deliver the multi-agency safeguarding arrangements. This includes consideration of business and analytical support, independent scrutiny, infrastructure, and core functions including local children safeguarding practice reviews, multi-agency training and learning events. It is the responsibility of the LSPs to ensure that adequate funding is allocated and spent in line with agreed priorities.

105. Funding contributions from the statutory safeguarding partners should be equitable and agreed by the LSPs. Funding for the arrangements should be reviewed on an ongoing basis to ensure that they can meet the financial needs of the arrangements.

- how all schools (including independent schools, academies, and free schools), colleges, early education and childcare settings and other education providers (including alternative provision) will be included in the safeguarding arrangements at both operational and strategic levels.
- how any youth custody and residential homes for children will be included in the safeguarding arrangements
- how the safeguarding partners will share information and data safely and effectively, using arrangements that clearly set out the processes and the principles for sharing
- how the safeguarding partners will use data and intelligence to assess the effectiveness of the help being provided to children and families, including early help
- how multi-agency training will be commissioned, delivered, and monitored for impact, and how they will undertake any multi-agency and inter-agency audits
- how the arrangements will be funded
- the process for undertaking local child safeguarding practice reviews, setting out the arrangements for embedding learning across organisations and agencies
- how the arrangements will include the voice of children and families, including how to escalate concerns and how any disputes will be resolved, including whistleblowing procedures
- how the local threshold document in place aligns with the arrangements

111. The published arrangements should be easily available and updated when there are key changes, such as changes to the LSPs, to the yearly priorities or the list of relevant agencies. Any updates to the published arrangements should be sent to the Department for Education (MASA.partners@education.gov.uk).

Yearly report on the impact and effectiveness of arrangements.

112. Safeguarding partners must jointly report on the activity they have undertaken in a 12-month period[43]. That reporting should be transparent, concise and easily accessible to families and practitioners. The focus of these reports should be on multi-agency priorities, learning, impact, evidence, and improvement. Reports must include:

- what partnerships have done as a result of the arrangements, including on child safeguarding practice reviews
- how effective these arrangements have been in practice

[43] Children Act 2004 Section 16G

Partners might consider the establishment's policies and practices and review sample records and recordings of the use of restraint along with discussions with staff. The findings of the review should be reported to the Youth Justice Board and the Youth Custody Service.

115. Safeguarding partners should make sure the annual report is widely available. A copy should be sent to the Child Safeguarding Practice Review Panel (Mailbox.NationalReviewPanel@education.gov.uk), who will review it to identify any issues that may need escalation to a national level, and the Multi-Agency Safeguarding Arrangements Unit (Child Protection and Safeguarding Division – DfE) MASA.partners@education.gov.uk given its focus on learning, within 7 days of publication. To allow for consistency across local areas, these should be submitted and published by the end of September every year, and should be reflective of work undertaken the previous financial year (April to March). If partners fail to submit the yearly report this may be escalated to the Secretary of State.

Dispute resolution process

116. Safeguarding partners and relevant agencies must act in accordance with the arrangements for their area and will be expected to understand each other's differences of views and resolve such differences locally[44]. LSPs should therefore agree a system to resolve disputes and issues between partners within multi-agency safeguarding arrangements.

117. This may be applied to isolated issues or incidents as well as any intractable recurring ones.

118. At all stages LSPs and their delegates should make use of key stakeholders in their local systems, that might include Police and Crime Commissioners (PCCs) (until May 2028), Mayors, lead members, and/or independent persons, who can be brought to the table to assist them to settle on a solution.

119. If the issue remains unresolved between the three safeguarding partners and their local networks the next stage of escalation is to the Secretary of State.

[44] Children and Social Work Act 2017 Section 16G (4)

breaks services statement[48].

125. Safeguarding partners should publish a threshold document, which sets out the local criteria for action in a way that is transparent, evidence-based, accessible, and easily understood. This should include:

- the process for accessing universal services and community-based early help, which may include an assessment
- the criteria, including the level of need, for when a child should be referred to Family Help, which covers non-statutory and statutory support and services provided through:
    - targeted early help under sections 10 and 11 of the Children Act 2004[49]. This support is provided to children and families who are identified by practitioners to have multiple and/or complex needs, requiring a specialist and/or multi-disciplinary/agency response, where statutory support or intervention is not required
    - statutory support, including assessments, delivered under section 17 of the Children Act 1989 (children in need, including how this applies for disabled children)
- the criteria, including the level of need, for when a child should be referred to local authority children's social care for assessment and for statutory services under:
    - section 47 of the Children Act 1989 (reasonable cause to suspect a child is suffering or likely to suffer significant harm)
    - section 31 of the Children Act 1989 (care and supervision orders)
    - section 20 of the Children Act 1989 (duty to accommodate a child)
- clear procedures and processes relating to:
    - the abuse, neglect, and exploitation of children inside and outside the home, including online
    - looked after children
    - children managed within the youth secure estate
    - disabled children

[48] Required under the Breaks for Carers of Disabled Children Regulations 2011

[49] The Children Act 2004 Section 10 requires each local authority to make arrangements to promote co-operation between the authority, each of the authority's relevant partners and such other persons or bodies working with children in the local authority's area as the authority considers appropriate. Section 11 places duties on a range of organisations and individuals to give regard to the need to safeguard and promote the welfare of children.

130. Local authorities also have a statutory duty to secure sufficient suitable education and training provision for all young people aged 16 to 19 and for those up to age 25 with a learning difficulty assessment or, EHC plan, in their area[52]. They should make available to young people aged 13 to 19 and to those up to the age of 25 with a learning difficulty assessment or EHC plan, support that will encourage, enable or assist them to participate in education or training[53].

131. As early education and childcare settings, schools, colleges and other education providers have daily contact with most children and families, they are uniquely placed to identify concerns and, with partners as appropriate, address them early. Safeguarding professionals, including safeguarding partners and their delegates, should work closely with education and childcare settings to ensure information about children is shared effectively, risks of harm are correctly identified and understood, and children and families receive the services they need. This includes, but is not limited to, information, such as increased absence or mental health problems, which may be indicators that a child has suffered or is at risk of suffering neglect, abuse, and exploitation.

132. Those that work in these settings need to be aware of how children's experiences can impact on their mental health, behaviour, attendance and progress at nursery, school, or college. Where children have suffered abuse, neglect and exploitation, or other potentially traumatic adverse childhood experiences, this can have a lasting impact throughout childhood, adolescence and into adulthood[54]. This should include understanding the impact of domestic abuse on children as victims in their own right.

133. It is important that relevant information where children are home educated is shared between local authorities, schools, colleges, and other relevant partners. This includes police forces making Operation Encompass notifications, as they would for other educational settings, to the local authority in which the child who is being home educated lives. Parents have a right to educate their children at home providing the education is suitable[55]. Most parents who take up the weighty responsibility of home education work hard to provide their child with a suitable education. However, the local authority has a duty to intervene where a home educated child is not being suitably educated, or is not safe, and in such cases the local authority must act to remedy the situation. When a child of school age is not a registered pupil at a school and is not receiving suitable education at home, this could be an indicator of neglect, abuse, or exploitation. Schools must notify the

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[52] Education Act 1996 Sections 15ZA and 18A as inserted by the Apprenticeships, Skills, Children and Learning Act 2009, and amended by the Children and Families Act 2014

[53] Education and Skills Act (ESA) 2008 Section 68

[54] An example of where schools and local police forces work together successfully to better support and safeguard children after experiencing domestic abuse, is through the Operation Encompass notification scheme. Operation Encompass works by directly connecting the police with schools. When officers have attended a domestic abuse incident, police share the information with a school's trained Designated Safeguarding Lead (DSL) before the start of the next school day, so that school staff can provide appropriate emotional and practical support at the earliest opportunity to children affected by domestic abuse

[55] The Education Act 1996, Section 7, sets out the duty on parents to ensure that the child receives an efficient full time education suitable to their age, ability and aptitude and any special educational needs, either by attendance at school or otherwise. Further detail on what constitutes a suitable home education can be found in DfE's Elective Home Education guidance (2019)
https://www.legislation.gov.uk/ukpga/1996/56/section/436A defines "suitable education" as efficient full-time education suitable to age, ability and aptitude and to any special educational needs

- engage effectively with families and their family network, making use of family group decision-making, such as family group conferences[59], to help meet the needs of the child[60]

- manage transitions between non-statutory and statutory (delivered under section 17 of the Children Act 1989) Family Help, maintaining consistent practitioner relationships, and building on the Family Help plan

137. Lead Practitioners should co-ordinate support and services, ensure the assessment and the Family Help plan responds to identified needs, and support the family to co-produce the plan. Practitioners should consider whether to include the family network. Where appropriate, local authorities should engage families, including children, to have a say in who their lead practitioner is, and have a process in place to collate feedback on their relationship.

138. The lead practitioner role can be held by a range of people, including social workers and other local authority employed staff (including those who work in a Best Start Family Hub), as well as those based in partner organisations. Decisions about who holds the role of lead practitioner should consider capacity and capability. Practitioners who begin working with families at the targeted early help stage can continue to lead work with families if the child is later assessed to be a child in need as defined by Section 17 of the Children Act 1989. The Families First Partnership programme guide provides operational details on lead practitioner roles and responsibilities, and expectations for coordinating a multi-disciplinary team around the family.

Identifying children and families who would benefit from help

139. Local organisations and agencies should have in place effective ways to identify emerging problems and potential unmet needs of individual children and families. Local authorities should work with organisations and agencies to develop joined up community-based early help, which can be delivered through a Best Start Family Hub, and Family Help services, based on a clear understanding of local needs. Local authorities should use the Joint Strategic Needs Assessment (JSNA)[61] to inform the offer.

140. Multi-agency and multi-disciplinary training will be important in supporting this collective understanding of the demographics and needs of the local community, the local practice framework, and the services available to support children of all ages. All

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[59] Family group decision-making is an umbrella term for voluntary, family-led decision-making forums in which a child's family network has all the resources, adequate preparation, relevant information and a safe and appropriate environment to make a plan in response to concerns about a child's safety and wellbeing, working alongside skilled professionals.
These can take different forms; family group conferences are one model of family group decision-making, which have been shown to be highly effective in supporting families, improving decision-making processes and diverting children from care. The Department for Education does not prescribe a specific model. There is further information in the glossary.

[60] The statutory guidance on court orders and pre-proceedings for local authorities (2014) highlights that family group decision making, such as family group conferences, is an important means of involving the family early to avoid the creation of barriers between the local authority and the family.

[61] Joint strategic needs assessment and joint health and wellbeing strategies explained

- is frequently missing/goes missing from care or from home[63]
- is at risk of modern slavery[64], human trafficking, sexual and/or criminal exploitation
- is at risk of being radicalised[65]
- is viewing problematic and/or inappropriate online content (for example, linked to violence), or developing inappropriate relationships online
- is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse[66]
- is misusing drugs or alcohol themselves
- is suffering from mental ill health
- has returned home to their family from care
- is a privately fostered child[67]
- has a parent or carer in custody[68]
- is missing education[69], or persistently absent from school, or not in receipt of full-time education
- has experienced multiple suspensions and is at risk of, or has been permanently excluded

142. Practitioners should also consider the needs of parents who no longer have children in their care. Offering support to parents who have had a child removed can help prevent future removals and support effective and stable reunification.

143. Practitioners should also consider the impact of domestic abuse on a child. Section 20 of the Victims and Prisoners Act 2024 introduced a new provision into Part 3 of the Domestic Abuse Act 2021 under Section 49A. The information sharing scheme known as 'Operation Encompass'[70] placed a statutory duty on police forces across England and Wales to notify a child's educational setting, and, where relevant, local authorities, if they have reasonable grounds to believe a child may be a victim of domestic abuse. This

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[63] Children who run away or go missing from home or care (2014)

[64] Modern Slavery: statutory guidance for England and Wales (under s49 of the Modern Slavery Act 2015) and non-statutory guidance for Scotland and Northern Ireland (accessible version) - GOV.UK

[65] Further information on requirements for those working with children who have concerns about radicalisation is set out in the statutory Prevent Duty guidance and via Managing risk of radicalisation in your education setting

[66] The Domestic Abuse Act 2021 Section 3 recognises children as victims of domestic abuse in their own right when they see, hear or experience domestic abuse perpetrated by a parent, those with parental responsibility, or a relative.

[67] Private fostering occurs when a child under the age of 16 (or under 18, if disabled) is provided with care and accommodation by a person who is not a parent, person with parental responsibility for them or a relative in their own home. A child is not privately fostered if the person caring for and accommodating them has done so for less than 28 days and does not intend to do so for longer. This term is also used in Championing Kinship Care: The National Kinship Care Strategy, capturing private fostering arrangements as a type of kinship care. It holds the same meaning, but applies only to individuals, excluding organisations or bodies.

[68] Farmer review for women (2019) found that children impacted by maternal imprisonment are more likely to leave their family home and be separated from their primary carer, resulting in significant disruption to their lives.

[69] Children missing education: statutory guidance for local authorities

[70] Statutory guidance: Duty on police forces in England and Wales to notify education establishments of domestic abuse incidents: Operation Encompass (accessible) - GOV.UK

- provide the basis for any future assessments if they are needed, for example, under sections 17 and 47 of the Children Act 1989

145. Practitioners should have consideration for specific needs, including, but not exclusive to, family members who may have learning difficulties/disabilities, are imprisoned or those whose first language is not English, parents, carers and children who may be at risk from hidden harms such as coercive and controlling behaviour, child sexual abuse and 'honour' or faith- or belief-based abuse, are care experienced, young parents[72], birth parents who have had children removed from their care, fathers or male carers, and parents who identify as LGBTQIA. This should also include where children may not view themselves as victims of abuse, such as teenage relationship abuse and child sexual exploitation.

146. If a family does not consent to a Family Help assessment, practitioners should seek to understand why this is the case, so that they can provide reassurance to the family about their concerns. They should ensure the family has understood the consensual nature of support, and range of services available to meet their needs. The practitioner should consider how the needs of the child could otherwise be met, for example, through provision by universal services that the family already engages with. Practitioners should still inform individuals that their data will be recorded and shared, and the purpose of this explained to them. If a family has chosen not to engage with support in the past, this should not act as a barrier to them accessing support in the future. If there are concerns that the child has suffered significant harm or is likely to do so, a referral should be made immediately to local authority children's social care. The lead practitioner for section 47 enquiries should be a social worker.

Provision of effective services to help families

147. Local areas should have a comprehensive range of effective services. They should reflect any local assessment of need, including the JSNA and the latest evidence of the effectiveness of Family Support programmes[73]. Good practice should also ensure effective join-up between targeted family support and universal services to ensure families can seamlessly transition from universal or other community-based services to more specialist support should a specific need be identified. There should be an explicit link to the local area's offer of short breaks for disabled children, as well as suitably adjusted services to support parents. Evidence should be collated to show their impact, including on those with a particular protected characteristic.

148. Family Help services typically include family and parenting programmes, assistance with school attendance, assistance with health issues including mental health, enabling financial stability, supporting secure housing, responses to emerging concerns in

[72] Our young parents project - The Lullaby Trust describes a young parent as someone under the age of 25

[73] What Works Centre for Children & Families) (Foundations). See Home | EIF Guidebook and Interventions with established evidence of preventing, stopping or reducing the impact of child abuse and neglect and related risks

with their professional regulations and standards on competence. Local authorities can also ask other agencies to assist in the delivery of support and services under section 17 of the Children Act 1989, but those agencies are under no obligation to do so.

153. Whilst the duty to deliver support and services under section 17 of the Children Act 1989 is with the local authority, other safeguarding partners may play a critical role in the delivery of services for children and their families. Local safeguarding partners are responsible for setting the strategic direction, vision, and culture of the local multi-agency safeguarding arrangements, including agreeing and reviewing shared priorities, and the resources required to deliver services effectively. More information can be found under 'Strategic leadership and accountability' and 'Delivering multi-agency safeguarding arrangements' in chapter 2.

protocol should reflect the local practice framework for work with children and their families. The local authority is publicly accountable for this protocol and all organisations and agencies have a responsibility to understand it. A local protocol should:

- be consistent with the requirements of this statutory guidance
- set out clear arrangements for how cases will be managed once a child is referred into local authority children's social care
- set out who can act as a lead practitioner in supporting children and their families under section 17, and reflect that the decision about who will act as lead practitioner will be made in line with practitioner knowledge and skills, resources, commissioned service requirements, relevant professional standards as appropriate[75] and accountabilities
- set out the skills, knowledge, experience, and competence required for the lead practitioner role and how this will be monitored locally
- set out clearly the governance arrangements to support effective decision-making, including roles, responsibilities, and accountabilities, and how these take account of high-level risk, risks that are dynamic and/or complex.
- set out the process for case audits and accountability including allocation of lead practitioners and decision-making. Information should be included in the yearly report (see chapter 2, paragraphs 112-115) on the evidence of impact on outcomes for children and families, to show progress and learning that has occurred following audits.
- clarify how organisations, agencies and practitioners undertaking assessments and providing services can work in partnership including when sharing and seeking information
- set out how and when organisations and agencies should communicate with children and families
- set out the process for challenge by children and families by publishing the complaints procedures[76]

155. Local protocols should also reflect the specific needs of certain groups, including but not limited to young carers, children with special educational needs and/or disabilities (including to inform and be informed by EHC plans), unborn children where there are concerns, vulnerable babies, young parents, children in hospital, children in mental health inpatient settings, children with specific communication needs, asylum seeking children, children considered at risk of exploitation and harm outside the home (including serious violence and association with organised crime groups), children who are victims of

[75] For example, the Social Work England Professional Standards - Professional standards - Social Work England or the Nursing and Midwifery Council's Code - Professional standards of practice and behaviour for nurses, midwives and nursing associates

[76] Including as specified under the Children Act 1989 Section 26 (3) and the Children Act 1989 Representations Procedure (England) Regulations 2006

and where necessary to make them safe

- identify support from within the family network

161. Action to meet a child's needs can begin even before assessment has concluded.

Assessment framework

162. Research has shown that taking a systematic approach to enquiries using a conceptual model is the best way to deliver a comprehensive assessment for all children including unborn children where there are concerns. An example of such a model is set out in the diagram below. It investigates three domains:

- the child's developmental needs
- the capacity of parents or carers (resident and non-resident) and any other adults living in the household to respond to those needs[78,79]
- the impact and influence of the family network and any other adults and children living in the household as well as community and environmental circumstances

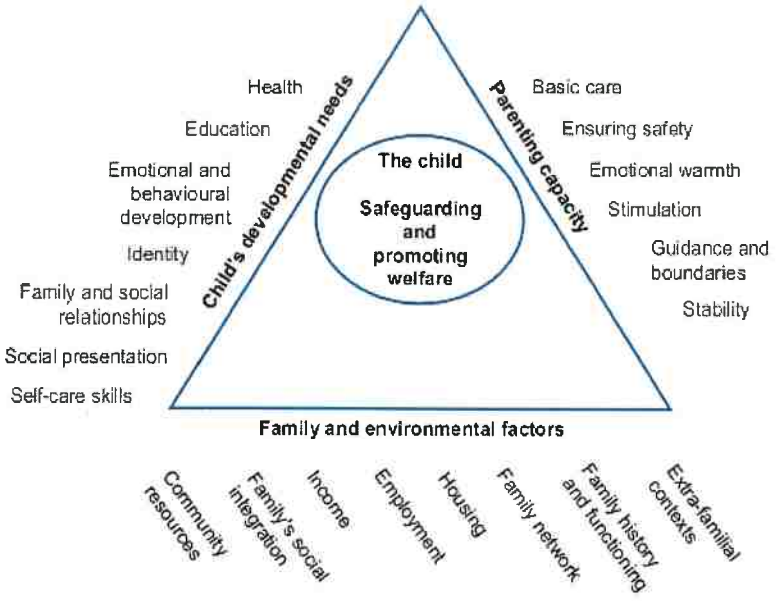


Figure 1: Assessment framework

[78] An assessment of the support needs of parent carers of disabled children may be required

[79] See chapter 4, paragraph 292 on adults with parental responsibility for disabled children

will include determining whether:

- the child requires immediate protection and urgent action is required
- the child is in need and should be assessed under section 17 of the Children Act 1989
- there is reasonable cause to suspect that the child is suffering or likely to suffer significant harm, and whether enquiries must be made, and the child assessed under section 47 of the Children Act 1989 including where the child is looked after under section 20 or section 31 of the Children Act 1989 or as a result of being remanded in custody
- any immediate services are required urgently by the child and family and what type of services
- further specialist assessments are required to help the local authority to decide what further action to take
- to see the child as soon as possible if the decision is taken that the referral requires further assessment

168. For children in need of immediate protection, action must be taken by the local authority, the police (including British Transport Police) or the NSPCC[81] if removal is required. This should happen as soon as possible after the referral has been made to local authority children's social care[82,83].

169. The maximum timeframe for the assessment to conclude, such that it is possible to reach a decision on next steps, should be no longer than 45 working days from the point of referral. If, in discussion with a child and their family and other practitioners, an assessment exceeds 45 working days, the lead practitioner should record the reasons for exceeding the time limit. In some cases, the needs of the child will mean that a quick assessment will be required. In all cases, as practitioners identify needs during the assessment, they do not need to wait until the assessment concludes before providing support or commissioning services to support the child and their family.

Provision of support and services for a child in need

170. Once the referral has been accepted by local authority children's social care, a social work qualified practice supervisor or manager should decide, with partners where appropriate, who the most appropriate lead practitioner will be and with the lead practitioner's agreement, allocate them in line with the local protocol.

171. The lead practitioner role can be held by a range of people, including social

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[81] National Society for the Prevention of Cruelty to Children.
[82] Children Act 1989 Section 44
[83] Children Act 1989 Section 46

practitioners and agencies[84], and drawing in the relevant expertise

- be discussed with the child and their parents or carers, as appropriate
- build a full picture of all aspects of a child's and their family's life, including their strengths and interests as well as any previous referrals and interventions
- be holistic in approach and address presenting and underlying issues and each of the child's needs, giving sufficient recognition and priority to the specific needs of babies, disabled children and young carers[85] and to any risks the child faces within or outside the home
- explore the needs of all members of the family[86] as individuals and consider how their needs impact on one another as well as how the family network could support and help de-escalate issues[87]
- be a dynamic process, not an event, analysing and responding to the changing nature and level of need and/or risk faced by the child from within and outside their family
- recognise and respect the individual and protected characteristics of families, including the ways in which these can overlap and intersect, ensuring support reflects their diversity of needs and experiences
- lead to action, including the provision of services, the impact of which is reviewed on an ongoing basis
- recognise a child's entitlement to a full-time education and the positive impact attendance at school has on personal development and attainment

178. Where there are concerns that a child may be at risk of, or experiencing harm outside the home, assessments should include work with the child, parents, carers, family networks and partners, including residential care staff or foster carers where appropriate[88], to determine:

- the nature and duration of the harm
- where risk is located and understand the context in which harm is or may be happening, including online
- the level of risk associated with each concern and context identified
- whether further referrals to other statutory or non-statutory services are required, including for children who are potential victims of criminal or sexual exploitation, modern slavery or human trafficking

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[84] For example, teachers, early years workers, health practitioners, youth justice practitioners, the police and adult social care.

[85] Recognised, valued and supported: next steps for the carers strategy (2010).

[86] An assessment of the support needs of parent carers, or non-parent carers, of disabled children may be required

[87] Family and friends care: statutory guidance for local authorities (2010), paragraph 4.37

[88] This can include safeguarding partners and community partners (such as those working in voluntary, private and statutory organisations who may come into contact with or be aware of the presence of children as they carry out their day-to-day roles in the community – for example, business owners, youth workers, faith and community leaders, park wardens).

cumulative abuse, neglect, and exploitation as well as the impact of any previous services. Where a child has been looked after and has returned home, information from previous assessments and case records should also be reviewed.

187. This information should be used by practitioners to get as comprehensive an understanding as possible of the level of need, and actual or likely significant harm being faced by a child, taking into account the child's perspective of the protective and risk factors they are facing. This should include factors both inside and outside the home,

188. Practitioners' analysis should be supplemented and challenged by others working in the multi-agency team, including the social work qualified practice supervisor or manager, with the family and/or in their teams and management chain. Critical reflection through supervision should further strengthen the analysis.

189. Practitioners should also be alert to a desire to think the best of adults and to hope they can overcome their difficulties. This should not subvert the need to protect children from chaotic, abusive, and neglectful homes. Practitioners should always reflect the latest research on the impact of abuse, neglect, and exploitation, and relevant findings from serious case and practice reviews when analysing the level of need and risk faced by the child. This should be reflected in the case recording.

190. Decisions on the nature and level of the child's needs, and the level of actual or likely significant harm, if any, should be reviewed by a social work qualified practice supervisor or manager.

191. Decisions over what support to provide a child and family should be multi-agency, taken with the best interests of the child in mind, informed by the evidence available, and underpinned by knowledge of child development. Regular decision and review points should be held, involving the child and family and relevant practitioners to ensure that help is given in a timely and appropriate way, and that the impact of this help on the child's outcomes and welfare is evaluated and changed as needed. Decisions should be agreed by the lead practitioner and the multi-agency team working with the family, including the social work qualified practice supervisor or manager.

192. Judgements may need to be revised as a case progresses and further information comes to light. It is a characteristic of skilled practice that practitioners revisit their assumptions in the light of new evidence and take action to revise their decisions in the best interests of the individual child.

193. Decisions about whether looked after children can return home will rest on whether the needs that were previously identified have been addressed. This may include instances where harm from outside the home means the child has been placed out of area (away from the local authority in which they usually live), to ensure their immediate safety. In these cases, the lead practitioner will be a social worker who should work with partners to take the decision about how to keep the child safe following the return to their family. Local authorities should set out what support and services will be provided in the

families and go on joint home visits as needed to review the plan for the child. They should work in partnership to ensure help given is leading to a significant positive change for the child and consider whether the pace of that change is appropriate for the child. Practitioners working with children should always have access to appropriate colleagues to talk through their concerns and judgements affecting the welfare of the child.

200. This review should also consider how the family network is supporting the parent or carers to sustain improvements and whether any further support could be offered.

201. Practitioners should consider if a family group decision-making forum is appropriate to determine the help and support the family network can provide for the child. Local authorities should consider referring the family to a family group decision-making service if they believe there is a possibility the child may not be able to remain with their parents or carers, or in any event before a child becomes looked after, unless this would be a risk to the child. If family group decision-making cannot be conducted at this point, the local authority should still consider this as an option later, including as a route to reunification with the birth parents or family network where appropriate.

202. Family group decision-making, including the family group conference model, promotes the involvement of the family network in decision-making about a child's safety or wellbeing. Family group decision-making forums offer a way of ensuring that all resources within the family's wider networks have been engaged for the benefit of the child and empower family networks to come to a decision on how this can be done. Family group decision-making is an umbrella term for voluntary, family-led decision-making forums in which a child's family network has all the resources, adequate preparation, relevant information and a safe and appropriate environment to make a plan in response to concerns about a child's safety and wellbeing, working alongside skilled practitioners. At pre-proceedings stage, practitioners should consider the use of an independent coordinator[94] and families should be offered "private family time", unless there are safeguarding concerns which would mean this might be considered inappropriate or unsafe.

203. Local partnerships should consider the strong evidence for the family group conference model. In both domestic and international studies, family group conferences have been shown to be highly effective in supporting families, improving decision-making processes and diverting children from care[95].

204. Known transition points for the child should be planned for in advance. This includes where children are likely to transition between child and adult services, where they move from one local authority to another and where they move between schools.

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[94] Court Orders and Pre-proceedings guidance 2014

[95] RCT of Family Group Conferencing at Pre-proceedings stage; Evaluation-of-SA-FGC-Final-Report-July

strengths-based, and gather information to inform decisions on the help needed to:

- ensure the child achieves the best possible outcomes
- enable the child's family to continue in their caring role where that is right for the child
- safeguard children in cases where there is abuse, neglect, and exploitation
- ensure that appropriate practical support is in place to enable disabled children and their families to thrive

211. The local authority must also consider whether it is necessary to provide support under section 2 of the Chronically Sick and Disabled Persons Act 1970[96]. Where a local authority is satisfied that the identified services and assistance can be provided under section 2 of the Chronically Sick and Disabled Persons Act 1970, and it is necessary in order to meet a disabled child's needs, it must arrange to provide that support. Where a local authority is assessing the needs of a disabled child, a carer of that child may also require the local authority to undertake an assessment of their ability to provide, or to continue to provide, care for the child, under section 1 of the Carers (Recognition and Services) Act 1995. The local authority must take account of the results of any such assessment when deciding whether to provide services to the disabled child.

212. If a local authority considers that a parent carer of a disabled child may have support needs, it must carry out an assessment under section 17ZD of the Children Act 1989. The local authority must also carry out such an assessment if a parent carer requests one. Such an assessment must consider whether it is appropriate for the parent carer to provide, or continue to provide, care for the disabled child. The assessment should also take account of parent carer's needs and wishes, and the specific needs and circumstances of the child resulting from their disability. Parent carers have the right to request an assessment under section 17ZD of the Children Act 1989[97], including where a child is not otherwise known to children's social care. Local authorities must ensure they have a process to facilitate these assessments if requested.

213. In line with the commitments made in the Special Educational Needs and Alternative Provision Improvement Plan[98], local authorities are encouraged to implement the role of Designated Social Care Officer (DSCO) in each local area. The DSCO will provide the capacity and expertise to improve the links between social care services and the SEND system. Similar to the Designated Clinical Officer (DCO)[99] or Designated Medical Officer (DMO) role in health, the DSCO role will support both operational input (such as the contributions from care to education, health and care assessments) and more strategic planning functions (such as the commissioning of care services such as short breaks) for disabled children and those with SEN.

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[96] Chronically Sick and Disabled Persons Act 1970 Section 2
[97] Children Act 1989 Section 17ZD
[98] Special Educational Needs and Disabilities (SEND) and Alternative Provision (AP) Improvement Plan
[99] DCO handbook

will have vulnerabilities that can be exploited by others and will require support appropriate to their needs to minimise the potential for exploitation.

218. While any child can experience harm outside the home, children with special educational needs or disabilities, those missing from home, care or education, looked after children, and those with previous experience of abuse or neglect, may be at greater risk of harms such as sexual or criminal exploitation. Perpetrators, including those acting in organised groups, may purposefully target children who are already vulnerable.

219. All children, including those who may be causing harm to others, should receive a safeguarding response, and practitioners should work with them to understand their experiences and what will reduce the likelihood of harm to themselves and others. Some children who experience harm, including outside the home, can be mistakenly perceived to be older than they are. This is more commonly experienced by Black children but can affect children from a range of minoritised backgrounds, as well as those in contact with the youth justice system and those who are looked after. This can lead to children's needs being poorly understood and opportunities to provide help being missed. Practitioners should seek to understand the context in which harm is happening to children and remain curious about what drives their vulnerability, including consideration of coercion, responses to adversity and trauma, and the impact of special educational needs and disabilities.

220. Where children may be experiencing extra-familial harm, assessments should determine whether a child is in need under section 17 of the Children Act 1989 or whether to make enquires under section 47 of the same Act, following concerns that the child is suffering or likely to suffer significant harm[106]. Where the child is looked after, section 47 enquiries should be carried out alongside a review of the care, and any action required should be included and monitored through the care planning process. A good assessment should:

- build an understanding of the child's strengths, interests, identity, and culture
- respond to each of the vulnerabilities and/or challenges that the child may be facing, including any within the home or within their own intimate relationships
- gather information on past experiences of trauma and how this may impact on the child's current experience of harm and on how they interact with practitioners
- explore how the child's experiences within their families and networks, including their friends and peer groups and interactions online, interplay with the risk of harm outside of the home and identify what needs to change[107]
- support parents, carers, and family networks to understand what is happening to

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[106] See chapter 3, section 3, paragraph 160 on Purpose of assessment

[107] For some children, a safe and loving family environment is not enough to protect them from these risks. For others, problems which exist within the home, such as abuse and neglect, could mean they are more vulnerable to exploitation and extra-familial harm

should be made to the NRM, as soon as possible. Specified public authorities (including the police and local authorities) must notify the Home Office about all potential victims of modern slavery in England and Wales. A child's consent is not needed for a referral to the NRM to be made. In addition to a NRM referral, first responders should also make a referral to children's social care[113].

225. Independent Child Trafficking Guardians (ICTG) are an independent source of advice for children who have been trafficked and somebody who can speak up on their behalf. Where the ICTG service has been implemented[114], if the first responder considers a child to be a potential victim of modern slavery or human trafficking, they should refer them to the ICTG service. This is in addition to following usual safeguarding routes and NRM referrals. The NRM referral and ICTG referral should be made in parallel.

Supporting children in secure youth establishments

226. Any assessment of children in secure youth establishments should take account of their specific needs. In all cases, the local authority in which a secure youth establishment is located is responsible for the safety and welfare of the children in that establishment.

227. The host local authority should work with the governor, director, manager or principal of the secure youth establishment and the child's home local authority, their relevant youth offending team and, where appropriate, the Youth Custody Service[115] to ensure that the child has a single, comprehensive support plan.

228. Where a child becomes looked after, as a result of being remanded to youth detention accommodation (YDA), the local authority should visit the child and assess the child's needs before taking a decision on how they should be supported[116]. This information should be used to prepare the care plan, which should set out how the YDA and other practitioners will meet the child's needs whilst the child remains remanded, and at any point of transition they will experience (either returning to the community or upon receiving a custodial sentence). The care plan[117] must be reviewed in the same way as a care plan for any other looked after child[118].

Supporting looked after children

229. Local safeguarding partners have responsibilities to safeguard and promote the welfare of all children in their area, including those who are looked after by the local

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[113] Further information on the National Referral Mechanism, including a list of first responder organisations can be found at National Referral Mechanism guidance: adult (England and Wales)

[114] First responders should consult the: Interim guidance for Independent Child-Trafficking Guardians for further guidance and for a list of sites with current ICTG coverage. Public authorities should give due regard to all ICTG functions, as would be required by regulations made under section 48 (6) (e)(i) and 8 (6) (e) (ii) of the Modern Slavery Act 2015,noting that section 48 of the Modern Slavery Act is currently only partially commenced.

[115] As the placing authority

[116] Promoting the health and well-being of looked-after children

[117] The Care Planning, Placement and Case Review (England) Regulations 2010 Regulation 4

[118] Following the Legal Aid Sentencing and Punishment of Offenders Act 2012 all children remanded by a court in criminal proceedings will be looked after.

- suitability and arrangements for the child's care if the placement is not granted, including within the family network through a kinship care arrangement

235. The lead practitioner responsible for the assessment should attend the MBU Admissions Board to represent the best interests of the child. When placed in an MBU, the mother retains full parental responsibility for the day-to-day care of the child and the local authority in which the prison is located is responsible for safeguarding and promoting the welfare of the child.

Supporting children at risk from people in prison and people supervised by the Probation Service

236. The Prison Service undertakes a child safeguarding enquiry[123] with children's social care for all newly sentenced prisoners and will identify prisoners who present an ongoing risk to children from within custody. Prisons will also decide on the level of contact, if any, they will allow between a prisoner and a child based on a child contact risk assessment[124] and will prohibit or restrict a prisoner's contact with a child where necessary.

237. In response to a child safeguarding enquiry, children's social care should:

- review information provided by the Prison Service and record it as required
- respond to a child safeguarding enquiry and share with the Prison Service any concerns about the prisoner and any contact with a child
- contribute to the prisons' child contact risk assessment where a child is known to children's social care, or has previously been known, by providing a report on the child's best interests and verifying the child's identity. Where the child is not known to children's social care, they should still provide a view on child contact and should advise the prison to complete a child safeguarding referral if one is required

238. The Probation Service will share information with children's social care about supervised individuals who have contact with children or who pose a known risk and will also request information by making child safeguarding enquiries. Information exchange between probation and children's social care help both agencies develop a better understanding of the children and families they work with and ensures risk assessments are accurate and well informed.

239. Under the UKGDPR and Data Protection Act 2018 sharing of personal information of an offender must be lawful and fair and must comply with Part 3 of the Data Protection Act 2018 and in particular the data protection principles. Sharing of information for the purposes of law enforcement and keeping children and young people safe meets one of the requirements for lawful processing under the Data Protection Act 2018 as the data sharing is authorised by law (under section 325(3) and (4) of the Criminal Justice Act

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[123] The HMPPS Child Safeguarding Policy Framework sets out that a child safeguarding enquiry (sometimes referred to as a safeguarding check) is an official enquiry that HMPPS staff send to local authority children's social care to request information on an individual, child or family.
[124] The child contact risk assessment process is explained in Chapter 5b of the Public Protection Manual (PPM) PSI 18/2016.

Assessment, support and planning for children under the Children Act 1989

Following acceptance of a referral by local authority children's social care, a social work qualified practice supervisor or manager should initiate a multi-agency assessment under section 17 of the Children Act 1989. The assessment should be led by a lead practitioner and approved by a social work qualified practice supervisor or manager. Local authorities have a duty to ascertain the child's wishes and feelings and take account of them when planning the provision of services. Assessments should be carried out in a timely manner reflecting the needs of the individual child, as set out in this chapter.

Where the local authority children's social care decides to provide services, a multi-agency child in need plan should be developed which sets out which organisations and agencies will provide which services to the child and family. Where the child is already known to services, assessments should build on existing information, activity, assessments and plans, including those completed in Family Help under section 17 of the Children Act 1989, at or at targeted early help, and in community-based early help. The child in need plan should set clear measurable outcomes for the child and expectations for the parents. The plan should reflect the positive aspects of the family situation as well as the weaknesses, acknowledging any factors beyond the family that may be undermining their capacity to parent or keep their child safe.

Where a child in need has moved permanently to another local authority area, the original local authority should ensure that all relevant information (including the child in need plan) is shared with the receiving local authority as soon as possible. The receiving local authority should consider whether support services are still required and discuss with the child and family what might be needed, based on a timely re-assessment of the child's needs, as set out in this chapter. Support should continue to be provided by the original local authority in the intervening period. The receiving local authority should work with the original local authority to ensure that any changes to the services and support provided are managed carefully.

Where a child in need is approaching 18 years of age, this transition point should be planned for in advance. This includes where children are likely to transition between child and adult services.

Where information gathered during an assessment result in the lead practitioner and social work qualified practice supervisor or manager suspecting that the child is suffering or likely to suffer significant harm, the local authority should hold a strategy discussion to enable it to decide, with other agencies, whether it must initiate enquiries under section 47 of the Children Act 1989.

The police should:

- assist other organisations and agencies to carry out their responsibilities where there are concerns about the child's welfare, providing information about the child and family drawing on individual and organisational knowledge and expertise to strengthen any plan to safeguard and promote the welfare of the child
- be involved in assessments where crimes have been committed, where their expertise is required to identify whether a crime has been committed and where crimes may be committed in the future. These investigations might be reactive (where there is evidence to suggest a crime has been committed) or proactive (where further activity is required to establish if a crime has occurred)

All involved practitioners should:

- 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, and inform local authority children's social care if any immediate action is required
- seek advice and guidance as required and in line with local practice guidance

Looked after children returning home to their families

Where the decision to return a child to the care of their family is planned, the local authority should undertake an assessment while the child is looked after as part of the care planning process (under regulation 39 of the Care Planning Regulations 2010). This assessment should consider what services and support the child and their family might need. Family group decision-making, such as family group conferences, could also be used to establish how the family network will support the child to return home. The outcome of this assessment should be included in the child's care plan. The decision to cease to look after a child will, in most cases, require approval under regulation 39 of the Care Planning Regulations 2010. Practitioners must carry out an assessment of need for eligible children[125] to consider their eligibility for independence and transition into adulthood.

Where a child who is accommodated under section 20 of the Children Act 1989 returns home in an unplanned way, (for example, the decision is not made as part of the care planning process, but the parent removes the child, or the child decides to leave), the local authority should work with partners to consider whether there are any immediate concerns about the safety and wellbeing of the child. This could include harm from outside the home. The local authority should take appropriate action, including making enquiries under section 47 of the Children Act 1989, if there is concern that the child is suffering or likely to suffer significant harm.

There should be a clear plan for all children who return home that reflects current and previous assessments, focuses on outcomes, and includes details of services and support required. Following reunification:

- practitioners should make the timeline and decision-making process for providing ongoing services and support clear to the child and family
- when reviewing outcomes, children should, wherever possible, be seen alone. Practitioners have a duty to ascertain their wishes and feelings regarding the provision of services being delivered

The impact of services and support should be monitored and recorded, and where a child is remanded to local authority or youth detention accommodation, consideration must be given to what ongoing support and accommodation the child may need after their period of remand[126]. This should be included in their care plan.

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[125] Where the child is an eligible child, regulation 42 of the Care Planning, Placement and Case Review (England) Regulations 2010 applies.

[126] The Children Act 1989 Guidance and Regulations Volume 2: Care, planning, placement and case review paragraph 8.20

Section 4: Multi-agency child protection

242. Alongside the offer of help and support, there must be strong and effective multi-agency child protection arrangements[127].Children who need protecting may include those who experience harm in their own family, those experiencing harm whilst living in residential, kinship or foster care and those who are harmed or exploited by others, including their peers, in their community and/or online. Suffering or being likely to suffer significant harm is the threshold for child protection enquiries and can take different forms, including sexual, physical or emotional abuse, neglect or domestic abuse (including controlling or coercive behaviour[128]), exploitation by criminal gangs or organised crime groups, trafficking, online abuse, sexual exploitation, and the influences of extremism which could lead to radicalisation.

243. An effective and strong multi-agency child protection system is one where the right decisions are made at the right time for children to keep them safe. A multi-agency, multi-disciplinary child protection system is fundamental to safeguarding and protecting children from all harms. Practitioners should work collaboratively across agencies to help and protect children through strong and effective information sharing, joint decision making, shared practice, accountability, governance and quality assurance frameworks and coordinated, evidence-based interventions.

244. Child protection is the set of multi-agency activities and processes that follow a concern that a child is suffering or likely to suffer significant harm. Under section 47 of the Children Act 1989, the local authority has a duty to make enquiries when this is the case and to take decisive action when needed to protect a child from abuse, neglect, and exploitation.

245. Statutory safeguarding partners should make arrangements to promote cooperation between the relevant agencies and organisations, and ensure local multi-agency child protection aligns with local demographics, needs, and patterns of harm to help and protect local children and their families. This should include understanding and responding to sexual abuse and extra-familial harm and the needs of all age groups from unborn children to teenagers.

246. Actual or likely significant harm should be assessed through an anti-racist, anti-discriminatory and culturally aware framework, applying knowledge of faith, beliefs and family cultures that can positively and negatively impact on children, whilst maintaining a core focus on the safety and wellbeing of the child.

247. Practitioners across agencies responsible for child protection decision-making should come together as an integrated team to support the local authority to discharge

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[127] Children Act 2004

[128] Serious Crime Act 2015 Section 76 provides information regarding circumstances when a child cannot be considered a victim of coercive or controlling behaviour.

education service

- consider a wide range of evidence from many sources, including other practitioners and agencies working with the family
- recognise and respond to the specific needs and vulnerabilities of children with SEND
- understand the impact of poverty. Practitioners should be skilled at recognising the distinction between poverty and neglect and respond accordingly
- be inclusive, anti-discriminatory and responsive to the needs and experiences of children and families of different ethnic, cultural and religious backgrounds. Practitioners should remain alert to any bias in practice that may adversely impact particular groups or communities and consider children foremost in terms of their vulnerability to harm. For instance, care should be taken to ensure children of particular ethnic backgrounds are not treated as older than they are

- Where the child is already known to services, assessments should build on existing information, activity, assessments and plans, including those completed in Family Help under section 17 of the Children Act 1989, at or at targeted early help, and in community-based early help
- recognise that looked after children can experience actual or likely significant harm. Where a child is looked after, child protection activities should align with care planning processes and decision making, working with relevant carers and practitioners

251. Where the child is known and receiving services and child protection concerns are raised, the lead practitioner in Family Help should continue to work with the child and their family. The Family Help lead practitioner will hold vital information about the child and should be involved in decision making about any protective activity that is required. Social workers with child protection expertise should lead and oversee child protection activities with input from multi-agency partners.

252. Where the decision is taken not to proceed with a section 47 enquiry or child protection plan, or to discharge a child protection plan, the lead practitioner should consider the ongoing support that the child requires, which might include Family Help support including under section 17 of the Children Act 1989 or support from universal or early help services. Where it is decided that no further action is necessary, the reasons for this should be recorded and shared with the child, family and practitioners involved with the family.

National multi-agency practice standards for child protection

253. The following national multi-agency practice standards for child protection are for all practitioners working in services and settings who come into contact with children who may be suffering or have suffered significant harm inside or outside the home. The term practitioner is used throughout the guidance to refer to individuals who work with children and their families in any capacity, including a range of professionals, such as qualified

A: Recognising actual or likely significant harm for all practitioners

- Practitioners are alert to potential indicators of abuse, neglect, and exploitation, and listen carefully to what a child says, how they behave, and observe how they communicate if pre-verbal or non-verbal (due to age, special needs and/or disabilities, or if unwilling to communicate). Practitioners will try to understand the child's personal experiences and observe and record any concerns.
- Practitioners communicate in a way that is appropriate to the child's age, developmental stage and ability, and use evidence-based practice for engaging inclusively with all children, including those with special educational needs and disabilities.
- When practitioners have concerns or information about a child that may indicate a child is suffering or likely to suffer significant harm, they share them with relevant practitioners and escalate them if necessary, using the referral or escalation procedure in place within their local multi-agency safeguarding arrangements. They update colleagues when they receive relevant new information.
- Practitioners should give full consideration to concerns reported by family members, without bias or prejudice. Practitioners should not consider referrals as malicious without undertaking a full and thorough multi-agency assessment.
- Practitioners never assume that information has already been shared by another professional or family member and always remain open to challenging and changing their views about the likelihood of significant harm.

B: Section 47 enquiries, child protection conferences and child protection plans

- Practitioners are aware of the strengths and limitations of their personal expertise and agency remit. They work collaboratively and proactively with multi-agency practitioners to build an accurate and comprehensive understanding of the daily life of a child and their family to establish the likelihood of significant harm and any ongoing risks. Practitioners respect the opinions, knowledge and skills of multi-agency colleagues and engage constructively in their challenge.
- Practitioners have an applied understanding of what constitutes a child suffering actual or likely significant harm. They consider the severity, duration and frequency of any abuse, degree of threat, coercion, or cruelty, the significance of others in the child's world, including all adults and children in contact with the child (this can include those within the immediate and wider family and those in contexts beyond the family, including online), any risk of harm to others (both children and adults) and the cumulative impact of adverse events.

- Practitioners remain alert to changes in circumstances for the child and family and respond as new information comes to light that needs to be reflected in the child protection plan.
- Practitioners reflect on the proposed protection plan and consider adjustments to strengthen the protection plan. The protection plan is specific, achievable, and relevant to the likelihood of significant harm and the context in which it is occurring.
- Interventions are prompt, evidence-based and address the child's needs, proactively tackling and reducing harm.

C: Discharging the child protection plan

- Practitioners work as part of a multi-agency team to create lasting change for families and ensure the child, parents and family network know that further help and support is available if needed or further concerns arise.
- Following a decision to discharge a child protection plan, practitioners ensure that appropriate support is in place for the child and family and respond to changing circumstances and new information.
- Where a child becomes looked after, practitioners ensure that this is well planned and that the child, parents and family network are appropriately supported. Ongoing need is monitored as part of care planning.

256. The following descriptors and flow charts set out the steps that practitioners should take when working together to protect a child who is or is likely to suffer significant harm.

Strategy discussion

Whenever there is reasonable cause to suspect that a child is suffering or is likely to suffer significant harm, there should be a strategy discussion involving local authority children's social care (including the residential or fostering service, if the child is looked after), the police, health, and other bodies such as the referring agency, education, early help, or other practitioners involved in supporting the child. This should be a multi-agency meeting. More than one discussion may be necessary. A strategy discussion can take place following a referral or at any other time, including during the assessment process and when new information is received on an already open case.

Purpose

The purpose of a strategy discussion is to determine the child's welfare and plan rapid future action if there is reasonable cause to suspect the child is suffering or is likely to suffer significant harm.

Attendees

A local authority social worker, health practitioners and a police representative should, as a minimum, be involved in the strategy discussion and should have expertise, skills and experience in child protection practice. Other relevant practitioners will depend on the nature of the individual case but may include those who have concerns about the child and/or those involved in the child's life, for example:

- the practitioner or agency which made the referral
- the child's educational setting or childcare provider
- the elective home education team/home education service, if a child is being home educated or if the child's parents or family want to home educate the child
- probation
- any health or care services the child or family members are receiving
- youth justice practitioner and/or youth worker
- adult mental health, substance misuse and/or domestic abuse specialist
- housing and/or welfare support
- British Transport Police representative (if concerns relate to harm or human trafficking on the rail network)
- Independent Child Trafficking Guardian where exploitation, modern slavery or human trafficking is a concern

Tasks

The discussion should be used to:

- share, seek and analyse available information
- agree the conduct and timing of any criminal investigation
- consider whether enquiries under section 47 of the Children Act 1989 should be undertaken.

It is for the local authority to decide whether to make enquiries and the strategy discussion should inform this decision.

Where there are grounds to initiate an enquiry under section 47 of the Children Act 1989, decisions should be made as to:

- what further information is needed if an assessment is already underway and how it will be obtained and recorded
- what immediate and short-term action is required to support the child, and who will do what by when
- whether legal action is required

The timescale for the assessment to reach a decision on next steps should be based upon the needs of the individual child, consistent with the local protocol and no longer than **45 working days** from the point of referral into local authority children's social care.

The assessment framework set out earlier in this chapter should be followed for assessments under section 47 of the Children Act 1989. The lead practitioner for section 47 enquiries should be a social worker with relevant experience and expert knowledge in frontline child protection practice.

Lead practitioners should make sure they:

- consider the child's welfare and safety, including through speaking to the child, and identifying whether the child is suffering or likely to suffer significant harm
- decide 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 harm)
- agree what further action is required, and who will do what by when, where an EPO is in place, or the child is the subject of police powers of protection
- record agreed decisions in accordance with local recording procedures. All agency decisions should be recorded, including a decision not to take further action and the reason for it. For example, where criminal action has been deemed inappropriate or unnecessary by the police
- follow up actions to make sure what was agreed gets done in a timely manner

Initiating section 47 enquiries

A section 47 enquiry is carried out by undertaking or building on and continuing with an assessment in accordance with the guidance set out in this chapter. Local authority social workers should lead assessments under section 47 of the Children Act 1989. The police, health practitioners, educational settings and childcare provider practitioners and other relevant practitioners should help the local authority in undertaking its enquiries.

Purpose

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

Lead practitioners should:

- have relevant skills, in-depth knowledge and experience in frontline child protection practice
- lead the assessment in accordance with this guidance
- work alongside, guide and advise, and draw on the expertise and knowledge of the Family Help lead practitioner
- carry out enquiries in a way that minimises distress for the child and family
- see the child who is the subject of concern alone to ascertain their wishes and feelings, assess their understanding of their situation, assess their relationships and circumstances more broadly, and understand the child's experiences and interactions with others, especially where there are concerns of domestic abuse, sexual abuse or extra-familial harm
- explain to parents or carers the purpose, process and potential outcome of the enquiries and be prepared to answer questions openly, unless to do so would affect the safety and welfare of the child
- interview parents or carers and determine the wider social, cultural, religious and environmental factors that might impact on them and their child, including extra-familial contexts
- systematically gather information about the child's and family's history including who has regular contact with the child
- analyse the findings of the assessment and evidence about what interventions are likely to be most effective with other relevant practitioners
- determine the child's needs and the level of actual or likely significant harm faced by the child, recognising that the child may be experiencing multiple forms of harm, including in different contexts, to inform what help should be provided and work with others to take action to provide that help

Outcome of section 47 enquiries

The lead practitioner (social worker) is responsible for deciding what action to take and how to proceed following section 47 enquiries. They should make these decisions based on multi-agency discussions informed by the voice of the child.

If local authority children's social care decides not to proceed with a child protection conference, then other practitioners involved with the child and family have the right to request that local authority children's social care convene a conference if they have serious concerns that a child's welfare may not be adequately safeguarded. As a last resort, the safeguarding partners should have in place a quick and straightforward means of resolving differences of opinion.

Where a criminal investigation has been undertaken as part of the section 47 enquiry and the threshold for criminal proceedings is not met, the reasons should be recorded and shared with all agencies. The decision not to proceed with a criminal investigation should not determine whether the threshold for actual or likely significant harm is met.

Where concerns of significant harm are not substantiated

Lead practitioners should:

- discuss the outcome and reasons with the child, parents or carers and other practitioners and be prepared to answer questions openly, and be clear on next steps
- discuss whether ongoing support from any wider services may be helpful and help secure it
- consider whether the child's health and development should be re-assessed regularly against specific objectives, decide who has responsibility for doing this and ensure the child, parents or carers are referred on appropriately
- discuss with the family whether they wish to be referred to a family group decision-making forum, such as a family group conference, to determine ongoing support for the child and family (or whether this is required if it has not already taken place)
- record the reasons why concerns are not substantiated

All involved practitioners should:

- participate in further discussions as necessary
- contribute to the development of any plan as appropriate
- provide services as specified in the plan for the child
- review the impact of services delivered as agreed in the plan
- approach the work with parents and carers in line with the principles set out in

- attend the conference when invited and participate in decision-making
- seek advice and guidance as required and in line with local practice guidance

The conference chair:

- is accountable to the Director of Children's Services and where possible the same person should chair subsequent child protection reviews
- should be a practitioner with relevant skills, in-depth knowledge and experience in frontline child protection activity, independent of operational and/or line management responsibilities for supporting the child. This can be the lead practitioner for protective action for that child
- should have the ability to draw on their skills and experience, alongside perspectives from the child, parents or carers, wider family and agencies involved in supporting and protecting the child, ensuring objectivity and fairness in decision-making
- should meet the child and parents or carers in advance to ensure they understand the issues, the purpose, the process, and possible outcomes of the conference
- should be prepared to answer questions openly
- should approach the work with parents and carers in line with the principles set out in chapter 1 of this guidance
- should consider whether members of the family network should attend and participate in the conference, including those who have attended any family group decision-making meeting, to support safety planning for the child
- should ensure all participants are encouraged to contribute views independently

Lead practitioners should:

- convene, attend, and present information about the reason for the conference, their understanding of the child's needs, parental capacity, family and environmental context (including extra-familial contexts), and evidence of how the child has been abused, neglected, or exploited and its impact on their health and development
- analyse the information to enable informed multi-agency 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)
- 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, drawn from expertise and perspectives across agencies
- record conference decisions and recommendations and ensure action follows

The child protection plan

Actions and responsibilities following the initial child protection conference

Purpose:

The aim of the child protection plan is to:

- ensure the child is safe from harm (including inside and outside of the home, and online) and prevent them from suffering further harm
- promote the child's health and development
- support the parents, family, and the family network to safeguard and promote the welfare of the child
- set out the support and resources to be provided by each agency to safeguard and promote the welfare of the child

Local authority children's social care should:

- designate a suitably skilled and experienced social worker to be the lead practitioner as they carry statutory responsibility for the child's welfare
- consider the evidence and decide what legal action to take if any, where a child has suffered or is likely to suffer significant harm
- define the local protocol for timeliness of circulating plans after the child protection conference

Lead practitioners should:

- be the lead for multi-agency and multi-disciplinary work with the child and family, co-ordinating the contribution of family members, including through family group decision-making such as family group conferences, and practitioners into putting the child protection plan into effect
- support multi-agency and multi-disciplinary practitioners to contribute to the development of the outline child protection plan into a more detailed multi-agency plan and circulate to all relevant practitioners (and family where appropriate)
- ensure the child protection plan is aligned and integrated with any associated offender risk management plan
- undertake direct work with the child and family in accordance with the child protection plan, taking into account the child's wishes and feelings, and the views of the parents in so far as they are consistent with the child's welfare

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.

Purpose:

To review whether the child is continuing to suffer or is likely to suffer significant harm and review developmental progress against child protection plan outcomes.

To consider whether the child protection plan should continue or should be changed.

Lead practitioners should:

- attend and lead the organisation of the conference
- determine when the review conference should be held within three months of the initial conference, and thereafter at maximum intervals of six months
- provide information to enable informed decisions about what action is necessary to continue to safeguard and promote the welfare of the child, and the effectiveness and impact of action taken so far
- share the conference information with the child and family beforehand, where appropriate, and ensure that they understand the information provided
- approach work with parents and carers in line with the principles set out in chapter 1
- engage the family network where this is appropriate to support the child. If there is family group decision-making, such as a family group conference, parents and family networks should have the opportunity to prepare for it in advance
- record conference outcomes
- 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) if the child is considered to be suffering significant ha

All involved practitioners should:

- attend, when invited, and provide details of their involvement with the child and family
- produce reports for the child protection review. This information will provide an overview of work undertaken by family members and practitioners and evaluate the impact on the child's welfare against the planned outcomes set out in the child protection plan
- approach work with parents and carers in line with the principles set out in chapter 1
- be sufficiently skilled and experienced to prepare for and engage with the review, and able to critically assess and challenge their own and other's input

Initiating pre-proceedings

Once the child protection process has been carried out, it may be deemed by the local authority that there is still not sufficient protection of the child by the parents and that the 'threshold'[130] for care proceedings has been met in principle. In this instance, the local authority should determine whether to initiate pre-proceedings and follow the 'Court orders and pre-proceedings guidance for local authorities'[131]. This decision should be informed by engagement with other relevant agencies. During this period, the local authority should offer family group decision-making, such as family group conferences, to continue to explore potential placements within the family network and to clarify the realistic options available for the child. At pre-proceedings, records of key discussions with the family can be used as evidence of decision-making[132].

The pre-proceedings process acts as the final opportunity for parents to avoid care proceedings. Whilst pre-proceedings may be initiated at this final stage as per flow chart 6, where the local authority considers the "threshold" for care proceedings to be met, proceedings can be initiated at any stage.

The local authority should work in partnership with families and, where possible, any extra support or services needed to support the family should be identified and put in place. There should be clear expectations set with parents about the changes they are required to make.

Link to the full statutory guidance on court orders and pre-proceedings can be found in Appendix B of this document, titled "Children Act 1989: court orders and pre-proceedings".

When initiating pre-proceedings, practitioners should review Practice Direction 12A, the link can also be found in Appendix B. The pre-proceedings checklist in this Practice Direction outlines the documentation that must be prepared in pre-proceedings or before and submitted as part of the local authority application for a court order.

Practitioners and strategic leads can also refer to the family justice hub for access to resources and tools to support the delivery of best practice in pre-proceedings. A link to these resources can be found in Appendix B, titled "Pre-proceedings and family justice hub".

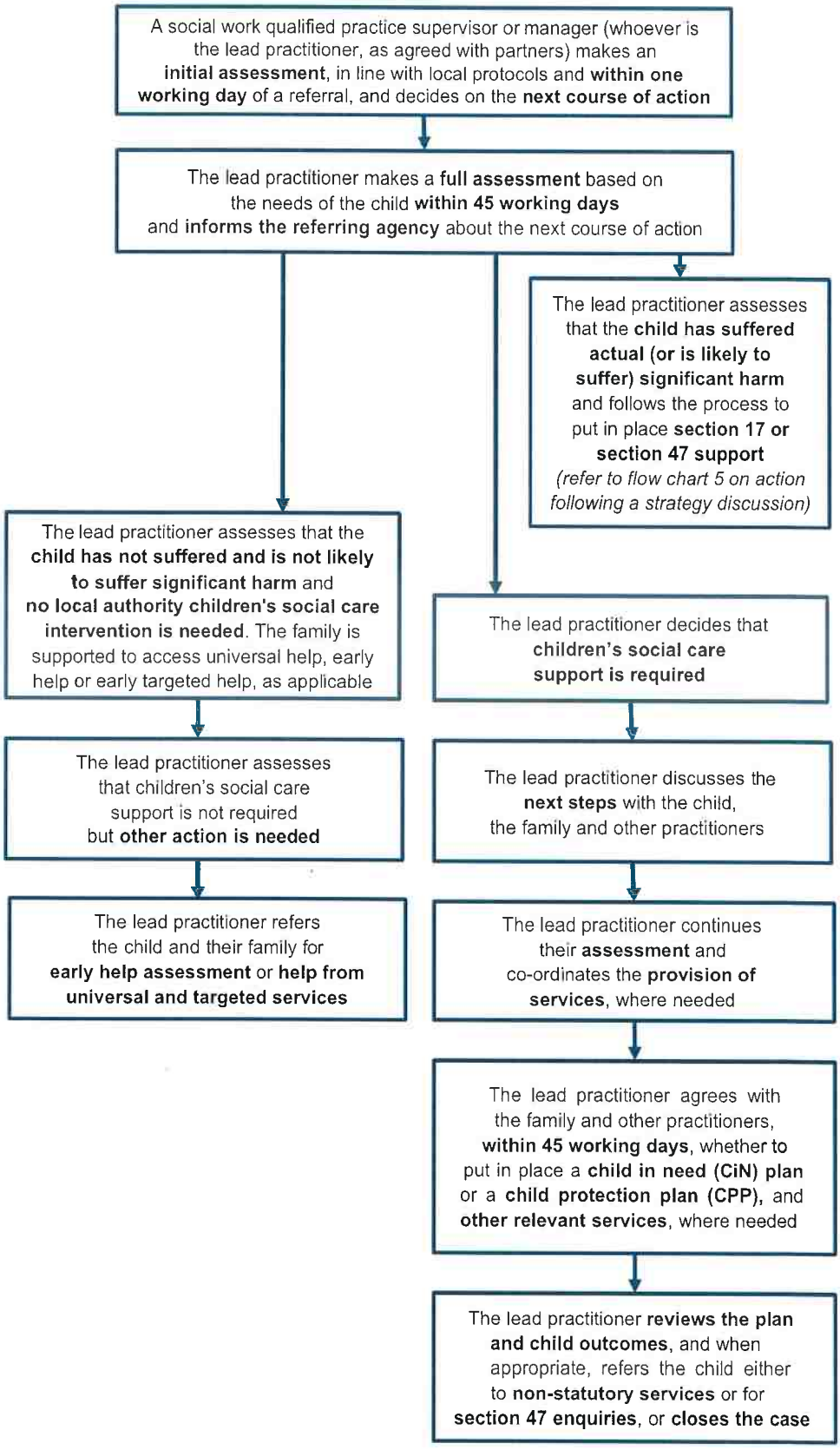
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130 The Children Act 1989 Section 31 (2)

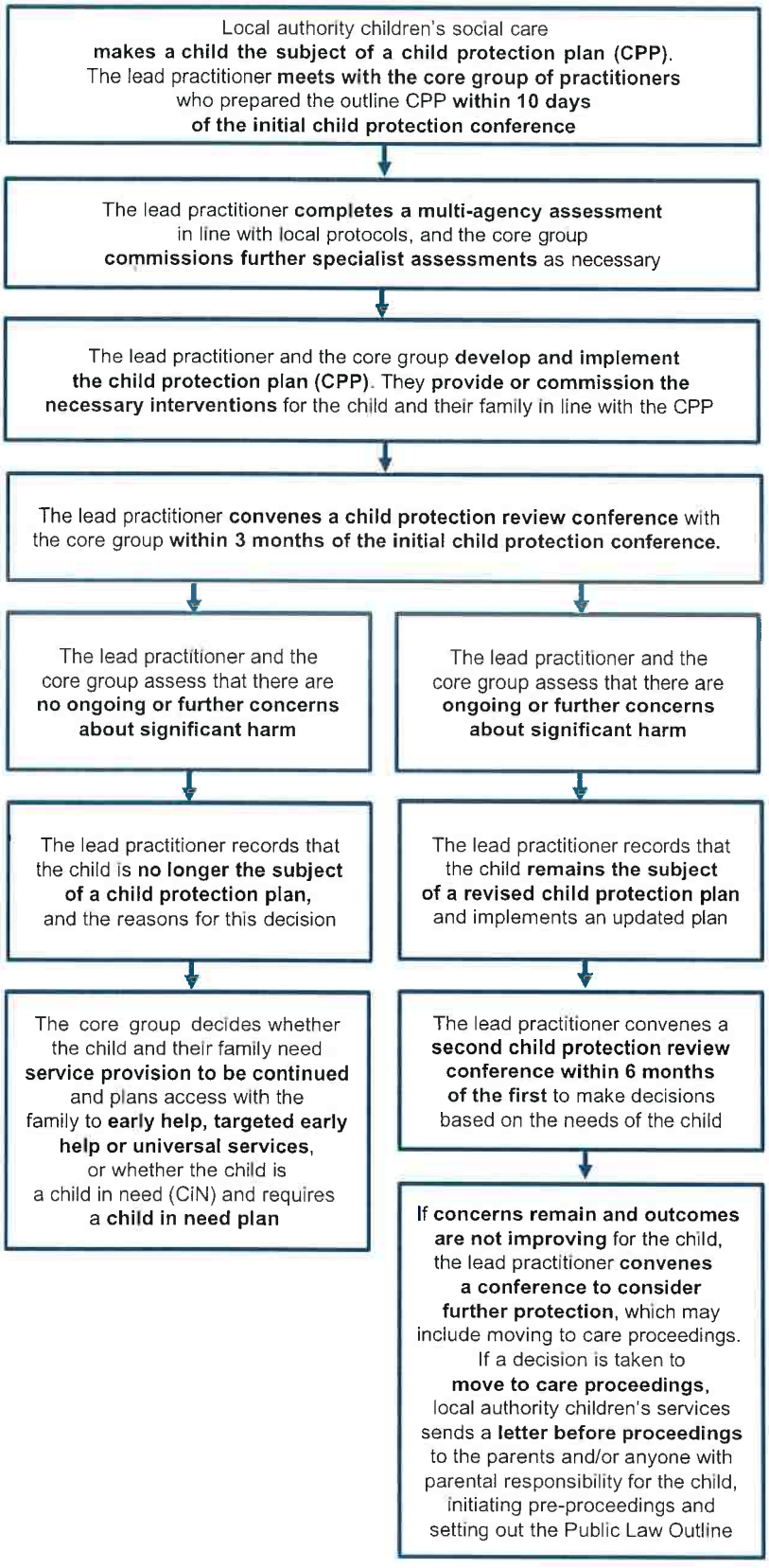
131 Court Orders and Pre-proceedings for Local Authorities (2014)

132 Practice direction 12A – Care supervision and other part 4 proceedings: guide to case management.

Flow chart 4: Action taken for an assessment of a child under the Children Act 1989



Flow chart 6: What happens after the child protection conference, including review?



- clear whistleblowing procedures, which reflect the principles in Sir Robert Francis' 'Freedom to Speak Up Review' and are suitably referenced in staff training and codes of conduct, and a culture that enables issues about safeguarding and promoting the welfare of children to be addressed[133]
- clear escalation policies for staff to follow when their child safeguarding concerns are not being addressed within their organisation or by other agencies
- arrangements which set out clearly the processes for sharing information (including Operation Encompass notifications), with other practitioners and with safeguarding partners
- a designated practitioner (or, for health provider organisations/agencies, named professional). Please see Health Practitioners with Specific Duties for more detail) for child safeguarding. Their role is to support other practitioners in their organisations and agencies to recognise the needs of children, including protection from possible abuse or neglect. Designated practitioner roles should always be explicitly defined in job descriptions. Practitioners should be given sufficient time, funding, supervision, and support to fulfil their child welfare and safeguarding responsibilities effectively
- safe recruitment practices and ongoing safe working practices for individuals whom the organisation or agency permit to work regularly with children, including policies on when to obtain a criminal record check
- appropriate supervision and support for staff, including undertaking safeguarding training
- creating a culture of safety, equality, and protection within the services they provide

In addition:

- employers are responsible for ensuring that their staff are competent to carry out their responsibilities for safeguarding and promoting the welfare of children and creating an environment where staff feel able to raise concerns and feel supported in their safeguarding role
- staff should be given a mandatory induction, which includes familiarisation with child protection responsibilities and the procedures to be followed if anyone has any concerns about a child's safety or welfare
- all practitioners should have regular reviews of their own practice to ensure they have knowledge, skills and expertise that improve over time

[133] Sir Robert Francis' freedom to speak up review

employer's attention or that are made directly to the police. If the person is subject to registration or regulation by a professional body or regulator, for example by the Care Quality Commission or Ofsted, the designated officer should advise on whether a referral to that body is appropriate.

265. Regulated activity providers (employers or volunteer managers of people working in regulated activity in England, Wales and Northern Ireland) and personnel suppliers have a legal duty to make a referral to the Disclosure and Barring Service (DBS) where conditions are met[134]. If an organisation or agency removes an individual (paid worker or unpaid volunteer) from work in regulated activity[135] with children (or would have, had the person not left first) because the person poses a risk of harm to children, the organisation or agency must make a referral to the Disclosure and Barring Service to consider whether to add the individual to the barred list. In some circumstances, organisations and agencies should consider making a referral where conditions are not met, in the interests of safeguarding children or vulnerable adults.

266. This applies irrespective of whether a referral has been made to local authority children's social care and/or the designated officer, or team of officers. It is an offence to fail to make a referral without good reason[136].

Individual organisational responsibilities

267. In addition to these section 11 duties, which apply to a number of named organisations and agencies, further safeguarding duties are also placed on individual organisations and agencies through other statutes. The key duties that fall on each individual organisation are set out below.

Schools, colleges and other education providers

268. The following have duties in relation to safeguarding and promoting the welfare of children:

- governing bodies of maintained schools (including maintained nursery schools), and colleges which includes providers of post 16 Education as set out in the Apprenticeships, Skills, Children and Learning Act 2009: 16-19 Academies, Special Post-16 institutions and Independent Training Providers[137]
- proprietors of independent schools, (including academies, free schools, and alternative provision academies) and non-maintained special schools. In the case of academies, free schools and alternative provision academies, the proprietor will be the academy trust

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[134] Making barring referrals to the DBS

[135] Regulated activity in relation to children: scope

[136] Further guidance on referrals to the DBS is available at Appendix B

[137] Apprenticeships, Skills, Children and Learning Act 2009Apprenticeships, Skills, Children and Learning Act 2009

assessing needs and capacity, responding to those needs, and contributing to multi-agency assessments and reviews.

273. A wide range of health practitioners have a critical role to play in safeguarding and promoting the welfare of children, including: GPs, primary care practitioners, paediatricians, nurses, health visitors, midwives, public health school nurses, allied health practitioners, those working in maternity, children and young people's mental health, youth custody establishments, adult mental health, sexual health, alcohol and drug services for both adults and children, unscheduled and emergency care settings, highly specialised services, and secondary and tertiary care.

274. All staff working in healthcare settings, including those who predominantly treat adults, should receive training to ensure they attain the competences appropriate to their role and follow the relevant professional guidance[142], [143], [144].

275. Within the NHS[145].

- NHS England is responsible for ensuring that the health commissioning system as a whole is working effectively to safeguard and promote the welfare of children. It is accountable for the services it directly commissions or delegates, including healthcare services in the under 18 secure estate (for police custody settings see below in the policing section). NHS England also leads and defines improvement in safeguarding practice and outcomes and should also ensure that there are effective mechanisms for safeguarding partners to raise concerns about the engagement and leadership of the local NHS. Each NHSE region should have a safeguarding lead to ensure regional collaboration and assurance through convening safeguarding forums.
- ICBs are one of the statutory safeguarding partners and the major commissioners of local health services. They are responsible for the provision of effective clinical, professional, and strategic leadership to child safeguarding, including the quality assurance of safeguarding through their contractual arrangements with all provider organisations and agencies, including from independent providers.

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[142] Safeguarding Children and Young People: roles and competencies for health care staff (RCN, 2019)

[143] Intercollegiate document (2025) Safeguarding children and young people & children and young people in care: Competencies for health care staff (RCN, 2025)

[144] For example, Protecting children and young people: the responsibilities of all doctors (GMC, 2018) and Safeguarding children and young people: the RCGP/NSPCC's safeguarding children toolkit for general practice (RCGP, 2018)

[145] Further guidance on accountabilities for safeguarding children in the NHS is available in Safeguarding children, young people and adults at risk in the NHS: safeguarding accountability and assurance framework (2022)

Other organisations providing NHS services

281. Other public, voluntary, and independent sector organisations, agencies and social enterprises providing NHS services to children and families should ensure that they follow this guidance.

Police

282. The police are one of the three statutory safeguarding partners as set out in chapter 2 and are subject to the section 11 duties set out in this chapter. Under section 1(8)(h) of the Police Reform and Social Responsibility Act 2011[148], the Police and Crime Commissioner (PCC) must hold the Chief Constable to account for the exercise of the latter's duties in relation to safeguarding children under sections 10 and 11 of the Children Act 2004.

283. All police officers and other police employees, such as Police Community Support Officers, are well placed to identify early when a child's welfare is at risk and when a child may need protection from harm. Children have the right to the full protection offered by criminal law. In addition to identifying when a child may be a victim of a crime, police officers should be aware of the effect of other incidents which might pose safeguarding risks to children and where officers should pay particular attention. Harm may be indirect and non-physical as, for example, in the case of some domestic abuse which may involve controlling or coercive behaviour, economic abuse, 'honour' abuse, faith- or belief-based abuse. An officer attending a domestic abuse incident should be aware of the effect of such behaviour on any child in the household and should recognise that children who see, hear, or experience domestic abuse are victims in their own right[149].

284. Under Section 49A of the Domestic Abuse Act 2021, if the police believe a child may be a victim of domestic abuse, they have a statutory duty to notify the child's educational setting, and where relevant, local authorities. The information sharing scheme is known as 'Operation Encompass.' Notifications should be made for all children connected to a household where they have attended the incident, including children physically present at the incident, children not physically present, and situations where a child resides in another household temporarily or permanently. An Operation Encompass notification does not replace a safeguarding referral.

285. Children who are encountered as offenders, or alleged offenders, are entitled to the same safeguards and protection as any other child and due regard should be given to their safety and welfare at all times. These children are often victims of harm, for example, children who are apprehended in possession of Class A drugs may be victims of exploitation through county lines drug dealing. Consideration should be given to the

[148] Police Reform and Social Responsibility Act 2011 Section 1 (8) (h)
[149] Domestic Abuse Act 2021, section 3

disrupting child sexual and criminal exploitation activity. For example, Slavery and Trafficking Risk Orders, Sexual Risk Orders, Slavery and Trafficking Prevention Orders and Sexual Harm Prevention Orders can place prohibitions on the offender in order to disrupt child criminal exploitation and child sexual exploitation activity.

Adult social care services

290. Local authorities provide services to adults who are themselves responsible for children who may be in need. These services are subject to the section 11 duties set out in this chapter. When staff are providing services to adults, they should ask whether there are children in the family including if an adult is pregnant or thinking about becoming pregnant and take actions to respond if the children need help or protection from harm. Additional parenting support could be particularly needed where the adults have mental health problems, misuse drugs or alcohol, are in an abusive or violent relationship, at risk of 'honour', faith- or belief-based abuse, have complex needs or learning difficulties.

291. Local authority services to adults must consider whether any children are providing care to the adult and whether the young carers are in need of support[155]. In such cases, or when requested by a parent or the young carer, the authority is under a duty to conduct a young carers' needs assessment under section 17ZA of the Children Act 1989 (see chapter 3, paragraphs 214-215).

292. Adults with parental responsibilities for disabled children have a right to a separate parent carer's needs assessment under section 17ZD of the Children Act 1989. Adults who do not have parental responsibility, but are caring for a disabled child, are entitled to an assessment on their ability to provide, or to continue to provide, care for that disabled child under the Carers (Recognition and Services) Act 1995[156]. That assessment must also consider whether the carer works or wishes to work, or whether they wish to engage in any education, training, or recreation activities.

293. Adult social care services should liaise with children's social care services to ensure that there is a joined up approach when both carrying out such assessments and in the provision of support to families where there are young carers or parent carers.

Housing services

294. Housing and homelessness services in local authorities and others, such as environmental health organisations, are subject to the section 11 duties set out in this chapter. Practitioners working in these services may become aware of conditions that could have or are having an adverse impact on children. Under Part 1 of the Housing Act 2004[157], authorities must take account of the impact of health and safety hazards in

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155 The Care and Support (Assessment) Regulations 2014 Regulation 4
156 Carers (Recognition and Services) Act 1995
157 Housing Act 2004 Part 1

at risk of homelessness). Further referral information may include:

- whether an individual is already homeless, and if not when they are likely to become homeless
- whether the individual is at risk of rough sleeping on the date the referral is made and if so whether this is imminent
- risk assessment information, considering risks to the individual and to others
- key medical information where relevant

301. Full guidance can be found in the Homelessness Code of Guidance[159]. Further guidance on how social care and housing authorities should work together to prevent those aged 16 and 17 from becoming homeless, and how the duty to refer should operate in this context, can be found in the 'Prevention of homelessness and provision of accommodation for 16 and 17 year old young people who may be homeless and/or require accommodation guidance'[160].

British Transport Police

302. The British Transport Police (BTP) is subject to the section 11 duties set out in this chapter. In its role as the national police for the railways, the BTP can provide a useful insight beyond the geographical footprint of local authority areas. They also play an important role in safeguarding and promoting the welfare of children, especially in identifying and supporting children who have run away, who are missing, at risk of suicide, sexual abuse or who are being exploited by criminal gangs, such as the movement of drugs through county lines drug dealing.

303. The BTP should carry out its duties in accordance with its legislative powers, working closely with safeguarding partners. This includes prevention activity to reduce safeguarding concerns and actual or likely significant harm to children on the rail network, investigating offences perpetrated against children, such as through the Modern Slavery Act 2015 where children have been exploited, responding to immediate concerns about actual or likely significant harm to children and utilizing all policing powers including removing a child to a suitable place using their police protection powers under the Children Act 1989[161]. Where there are safeguarding concerns or children are experiencing actual or likely significant harm on the rail network, information should be shared with BTP and they should be invited to relevant strategy meetings, in addition to the Home Office police forces.

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[159] Homelessness code of guidance for local authorities

[160] Provision of accommodation for 16 and 17 year old young people who may be homeless and/or require accommodation

[161] Children Act 1989 Section 46

- email – unwantedprisonercontact@justice.gov.uk
- telephone – 0300 060 6699, Monday to Friday, 9am to 4pm
- website – GOV.UK/stop-prisoner-contact

307. A prison can monitor a prisoner's communication (including letters and telephone calls) to protect children where it is proportionate and necessary to the risk presented.

308. Prison governors or directors should ensure there is a clear process for children's social care practitioners to engage prisoners who are involved in safeguarding or child protection procedures. This may be via face-to-face visits or virtual conferencing. All prisons have an Offender Management Unit (OMU) with a telephone or functional mailbox which can be found at Prisons in England and Wales - GOV.UK (www.gov.uk), this should be the first point of contact for agencies who need to contact a prisoner or OMU. Agencies or organisations who need to find a prisoner should follow the instructions outlined at Find a prisoner - GOV.UK (www.gov.uk)

309. Each prison should have arrangements in place that take account of the needs of children who have parents in prison. During a prisoner's first night induction, they will be supported to make suitable care arrangements for any dependent children. Prisons can work with children's social care services and other agencies to contribute to improved outcomes for children who are impacted by parental imprisonment. The Prison Service should:

- provide facilities for children to play whilst visiting a prisoner
- ensure the visitors' area caters for the needs of children and promotes a positive and safe experience
- ask all prisoners during their initial custody screening process whether they have caring responsibilities for any children under the age of 18
- review who is looking after the dependent children of prisoners, and inform children's social care services if they have concerns about a child's safety or wellbeing

310. Prison staff may also use the Prisoners' Families Helpline[168] to find local services who can support children who are impacted by parental imprisonment. Further support for families can be found at Useful links | Prisoners' Families Helpline.

311. Prisons should encourage and assist prisoners to maintain relationships with their families, including children, to support their social rehabilitation wherever it is appropriate

[168] Contact our Helpline Team | Prisoners' Families Helpline.

courts may ask the Probation Service to provide sentencing advice and an assessment of the offender's risk. Probation staff will make child safeguarding enquiries[174] with children's social care about whether they have information about children which may impact on the safety of different sentencing options (for example, the use of an electronically monitored curfew at the home address). They may request a response on the same day. Probation staff should incorporate considerations about the potential impact on children of any proposal they make to the court so that they are safe and appropriate. Probation staff working in prisons and in community teams may also undertake child safeguarding enquiries and should request a quick response if there are concerns about an offender having contact with a child.

317. Probation staff should make child safeguarding enquiries and share information with children's social care to inform sentencing advice and ongoing management of offenders, including the impact any offender may have on the safety or wellbeing of a child. Probation will send child safeguarding enquiries to the local authority in which the child and offender live. Each Probation Delivery Unit (PDU)[175] should have arrangements in place with children's social care for exchanging information. This includes responding to information sharing requests from local authorities regarding prospective foster carers and adoptive parents. If an offender who poses a risk to an identified child moves to another address which is in a different local authority, the probation practitioner should ensure the local authority where the offender lives is made aware. Probation should share the details of the offender and the identified child at risk.

318. The Probation Service ensures every offender undergoes a thorough risk assessment[171] to understand the risk they pose, and the factors related to their offending. Where appropriate this assessment will be informed by a range of agencies, which may include children's social care, police, healthcare services, housing, and other voluntary organisations. Probation practitioners will develop a sentence plan and where necessary a risk management plan (RMP) which contains any specific measures required to manage and reduce the risk of harm to children. When appropriate, the Probation Service should share risk assessments and RMPs with other organisations and agencies involved in the management of the offender's risk. Probation practitioners will also work with children's social care to ensure that RMPs align with child protection and child in need plans.

319. The sentence plan includes specific child safeguarding objectives for those offenders who pose a risk of serious harm to children or where there are child safeguarding concerns. Probation practitioners will also consider how a planned intervention might affect the offender's caring or parental responsibilities or contribute to improved outcomes for children known to be in an existing relationship with the offender.

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[174] The HMPPS child safeguarding policy framework sets out that a child safeguarding enquiry (sometimes referred to as a safeguarding check) is an official enquiry that HMPPS staff send to local authority children's social care to request information on an individual, child or family.

[175] HMPPS risk of serious harm assessments and guidance provides information regarding the specialist tools HMPPS practitioners use to assess the risk posed by an offender

behaviour are entitled to the same safeguards and protection as any other child and due regard should be given to their welfare at all times.

324. The purpose of sharing information about individuals (data subjects) under MAPPA is to enable the relevant agencies to work together more effectively in assessing risks and considering how to manage them in order to protect the public. Agencies should share all relevant information, so that public protection is not compromised, while respecting the rights of data subjects, which may limit what can be shared. These rights are set out in Part 3 of the Data Protection Act 2018 and Article 8 of the European Convention on Human Rights. In summary, the principles derived require that information sharing is lawful, necessary, and proportionate.

325. Section 325(4) of the Criminal Justice Act 2003 provides a lawful basis for sharing information between RA and DTC agencies[178]. It also states that all DTC agencies qualify as competent authorities when fulfilling their obligations under MAPPA. This means that all information sharing under MAPPA is governed by Part 3 of the Data Protection Act 2018, rather than UK GDPR[179].

Serious violence duty

326. The Serious Violence Duty was introduced as part of the Police Crime Sentencing and Courts Act 2022[180] and requires specified authorities namely police, Justice (Probation and YOTs), Fire and Rescue Service, Health (ICBs) in England, and Local Health Boards in Wales, and local authorities to work together to prevent and reduce serious violence. This includes identifying the kinds of serious violence[181] that occur in the area, the causes of that violence (so far as it is possible to do so), and to prepare and implement a strategy for preventing, and reducing serious violence in the area.

327. The Duty also requires the specified authorities to consult relevant authorities, namely educational, prison and youth custody authorities for the area in the preparation of their strategy. The Duty takes a multi-agency approach to understand the causes and consequences of serious violence, focusing on prevention and early intervention, and informed by evidence. It does not require new multi-agency structures and encourages the use of existing local structures and partnerships to prevent and reduce serious violence and ultimately improve community safety and safeguarding.

328. The Duty commenced on 31 January 2023 and every local area in England and Wales was required to publish their serious violence strategy by March 2024 and to review regularly.

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[178] Criminal Justice Act 2003 Section 325 (4)

[179] Multi-agency public protection arrangements (MAPPA): guidance

[180] Police, Crime, Sentencing and Courts Act 2022

[181] Police, Crime, Sentencing and Courts Act 2022 Section 13 makes clear that violence is not limited to physical violence against the person. It provides that, for the purposes of the duty, violence includes domestic abuse, sexual offences, violence against property and threats of violence but does not include terrorism.

336. Local authorities should consider how they help, support and protect children placed out of area. This should include joint working across safeguarding partnerships to plan for and monitor outcomes for these children.

337. Safeguarding partners and practitioners should understand the inherent risks from 'closed cultures'. A 'closed culture' means a poor culture that can lead to harm, which can include human rights breaches such as abuse. The four key risk factors are:

- weak leadership and management including for example where staff are not supported or encouraged to raise concerns
- children experiencing poor quality of care, support and outcomes
- poor skills, experience and training of the staff providing care and support
- lack of external oversight including limited interaction with outside agencies due to failings on the part of the service to submit mandatory information such as notifications or safeguarding referrals

The secure estate for children

338. Governors, managers, directors and principals of the following secure establishments are subject to the section 11 duties set out in this chapter:

- secure training centres
- young offender institutions

339. Each centre holding those aged under 18 should have in place an annually reviewed safeguarding children policy. The policy is designed to promote and safeguard the welfare of children and should cover all relevant operational areas as well as key supporting processes, which would include issues such as child protection, risk of harm, restraint, separation, staff recruitment and information sharing. A manager should be appointed and will be responsible for implementation of this policy[186].

340. Each centre should work with their local safeguarding partners to agree how they will work together, and with the relevant YOT and placing authority (the Youth Custody Service), to make sure that the needs of individual children are met.

Youth offending teams

341. Youth Offending Teams (YOTs) are subject to the section 11 duties set out in this chapter. YOTs are multi-agency teams responsible for the supervision of children subject to pre-court interventions and statutory court disposals[187] They are therefore well placed to identify children known to relevant organisations and agencies as being most at risk of

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[186] Detailed guidance on the safeguarding children policy, the roles of the safeguarding children manager and the safeguarding children committee, and the role of the establishment in relation to the LSCP can be found in Prison Service Instruction (PSI) 08/2012 Care and Management of Young People.

[187] The statutory membership of YOTs is set out in the Crime and Disorder Act 1998 Section 39 (5)

The armed services

348. Local authorities have the statutory responsibility for safeguarding and promoting the welfare of the children of service families in the UK[190], in discharging these responsibilities:

- where a local authority requires input from the Ministry of Defence (MoD) in relation to safeguarding reviews or have been informed of an allegation against a serving person of a safeguarding nature that requires Local Authority Designated Officer (LADO) or equivalent involvement, they should notify the MoD[191] to promote timely information sharing
- local authorities should ensure that the MoD is made aware of any service child who is the subject of a child in need or child protection plan and whose family is about to move overseas
- each local authority with a United States (US) base in its area should establish liaison arrangements with the base commander and relevant staff. The requirements of English child welfare legislation should be explained clearly to the US authorities, so that the local authority can fulfil its statutory duties

Channel panels

349. The Counter-Terrorism and Security Act 2015 contains a duty on specified authorities in England, Wales, and Scotland to have due regard to the need to prevent people from being drawn into terrorism.

350. Children can be vulnerable to the influences of extremism which could lead to radicalisation. Channel panels, established under the Counter-Terrorism and Security Act 2015, arrange for support for individuals who have been assessed as vulnerable to being drawn into terrorism[192, 193].

351. The Children Act 1989 promotes the view that all children and their parents should be considered as individuals and that family structures, culture, religion, ethnic origins, and other characteristics should be respected.

352. When providing support to an individual on the Channel programme, local authorities and their partners should consider how best to align assessments under the Children Act 1989 to safeguard and promote the welfare of the child.

353. Links should be established between Channel panels and other statutory partners, including safeguarding partners and YOTs.

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[190] The Ministry of Defence (MOD) is responsible for providing safeguarding support and promoting the welfare of the children of armed forces personnel and the children of civilians working with the armed forces when those groups are based overseas. The MOD contact is through the armed forces families safeguarding policy team at People-AFFS-Safeguarding-Mailbox@mod.gov.uk

[191] The MOD contact is through the armed forces families safeguarding policy team at People-AFFS-Safeguarding- Mailbox@mod.gov.uk

[192] Channel duty guidance: protecting people susceptible to radicalisation

[193] Prevent duty guidance

or oversight of sport or leisure are included within the Relevant Agency Regulations[195]. This means if the safeguarding partners name them as a relevant partner they must cooperate. Other VCSE, faith-based and private sector organisations not on the list of relevant agencies can also be asked to co-operate as part of the local arrangements and should do so.

Sports clubs/organisations

360. There are many sports clubs and organisations, including voluntary and private sector providers that deliver a wide range of sporting activities to children. Some of these will be community amateur sports clubs, some will be charities. All should have the arrangements described in this chapter in place and should collaborate to work effectively with the safeguarding partners as required by any local safeguarding arrangements. Paid and volunteer staff need to be aware of their responsibilities for safeguarding and promoting the welfare of children, how they should respond to child protection concerns and how to make a referral to local authority children's social care or the police if necessary.

361. All National Governing Bodies of Sport that receive funding from either Sport England[196] or UK Sport[197] should aim to meet the Standards for Safeguarding and Protecting Children in Sport[198].

[195] The Child Safeguarding Practice Review and Relevant Agency (England) Regulations 2018
[196] Sport England
[197] UK Sport
[198] Standards for safeguarding and protecting children in sport

366. The data and information gathered from incidents further enables the government and the Panel to identify and analyse key themes and trends, promoting learning and driving improvements to better safeguard children.

367. Serious harm includes (but is not limited to) serious and/or long-term impairment of a child's mental health or intellectual, emotional, social, or behavioural development. This is not an exhaustive list. When making decisions, judgement should be exercised in cases where impairment is likely to be long-term, even if this is not immediately certain. Even if a child recovers, including from a one-off incident, serious harm may still have occurred. Local authorities and safeguarding partners should refer to the panel's guidance[199] for further clarity on issues relating to the criteria for serious child safeguarding cases.

368. Abuse is a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Harm can include ill treatment that is not physical as well as the impact of witnessing ill treatment of others. This can be particularly relevant, for example, in relation to the impact on children of all forms of domestic abuse, including physical abuse, sexual abuse, emotional and psychological abuse, coercive and controlling behaviour and economic or financial abuse, where they see, hear, or experience its effects. Children may be abused in a family or in an institutional or extra-familial context by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults, or another child or children. This includes in teenage relationships, and 'honour', faith- or belief-based abuse.

369. Neglect 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:

- provide adequate food, clothing, and shelter (including exclusion from home or abandonment)
- protect a child from physical and emotional harm or danger
- ensure adequate supervision (including the use of inadequate caregivers)
- ensure access to appropriate medical care or treatment
- provide suitable education

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

370. All three safeguarding partners have equal responsibility in determining whether an incident meets the criteria for notification and for contributing relevant information. As a

[199] Child Safeguarding Practice Review Panel

the time but meets the criteria for notification. In these circumstances, safeguarding partners should take into account the time that has elapsed since the harm occurred, the opportunities for learning and whether the learning principally relates to adult or children's services. Partners should consult with the Panel for advice before submitting a notification.

378. Where safeguarding partners have determined the criteria for serious incident notification has not been met, they may choose to undertake their own local learning reviews outside of the formal review process. For example, where there is an opportunity to learn from good or poor practice, or from a near-miss incident. However, only incidents that have been notified as a serious incident through the Child Safeguarding Incident System shall be subject to the procedures followed in this guidance and overseen by the Panel.

379. Only local authorities can submit serious incidents to the Panel. The reviews carried out subsequently are locally led by safeguarding partners. Members of the public who wish to request a local review of a serious incident should contact their local authority as local partners are the decision makers regarding the submission of a serious incident notification.

380. The Department for Education is responsible for publishing annual serious incident data. This data is extracted from the notifications submitted by local authorities, so accuracy when completing the online notification form is key. The number of notifications submitted is not seen as a reflection of local area performance. Making a notification ensures that vital learning is identified and fed back into local areas or nationally to prevent future harm or death.

Notification in the event of the death of a looked after child or care leaver:

381. The local authority must also notify the Secretary of State for Education, and Ofsted of the death of a looked after child, regardless of whether or not abuse or neglect occurred via the Child Safeguarding Incident Notification System.

382. The local authority should also notify the Secretary of State for Education and Ofsted of the death of a care leaver up to and including the age of 24 via the Child Safeguarding Incident Notification System[201].

383. Care leavers under the age of 18:

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[201] Care leavers are entitled to support from their Personal Adviser up to their 25th birthday. Local authorities are required to keep in touch with all care leavers up the point they reach age 21, and to make their best efforts to contact all care leavers aged 21 to 24 annually to remind them that they remain eligible for support. If a young person chooses not to take up support between 21 to 24 years of age the local authority may no longer be aware of a care leaver's whereabouts or circumstances (and therefore their death). Guidance on notifications in the event of the death of a care leaver can be found here: Report the death or serious harm of a child or care leaver - GOV.UK

Employers should consider whether any disciplinary action should be taken against practitioners whose conduct and/or practice falls below acceptable standards and should refer to their regulatory body as appropriate.

Decisions on local reviews

388. Whilst the local area where the incident occurred is responsible for submitting the notification, some incidents may involve children known to multiple areas. In these circumstances safeguarding partners must work collaboratively to agree who should lead the reviews to gather all relevant information and ensure comprehensive learning is captured. If agreement cannot be reached, the responsibility should default to the notifying local area to lead the review process in collaboration with the other areas involved.

389. The way in which this responsibility is divided between the lead safeguarding partners (LSPs) and their delegates is for local decision. Accountability for ensuring learning from serious incidents is implemented is the responsibility of the LSPs and the impact of local and national reviews should be evidenced in yearly reports and subjected to independent scrutiny.

390. The panel and safeguarding partners have a shared aim to identify improvements to practice for protecting children from harm and should maintain an open and ongoing dialogue. This will enable them to raise concerns, highlight commonly recurring areas needing further investigation (whether leading to a local or national review), and share learning, including from success, that could lead to improvements elsewhere.

391. As such, safeguarding partners should have regard to any guidance the Panel publishes. Guidance will include the timescales for a rapid review and for the Panel's response.

The rapid review

392. Once the notification has been made, the safeguarding partners should promptly undertake a rapid review of the case, in line with any guidance published by the panel. The aim of this review is to enable them to:

- gather the facts about the case, as far as they can be readily established
- discuss whether any immediate action is needed to ensure children's safety and share any learning appropriately
- consider the potential for identifying improvements to safeguard and promote the welfare of children
- decide what steps they should take next, including whether to undertake a local child safeguarding practice review

Commissioning a reviewer(s) for a local child safeguarding practice review

396. The safeguarding partners are responsible for commissioning and supervising reviewers for local reviews[204].

397. In all cases they should consider whether the reviewer has:

- professional knowledge, understanding and practice relevant to local child safeguarding practice reviews, including the ability to engage with practitioners, children, and families
- knowledge and understanding of research relevant to children's safeguarding issues
- ability to recognise the complex circumstances in which practitioners work together to safeguard children
- the ability to understand practice from the viewpoint of the individuals, organisations or agencies involved at the time rather than using hindsight
- the ability to communicate findings effectively
- any real or perceived conflict of interest

Conducting the LCSPR

398. The safeguarding partners should agree with the reviewer the method by which the review should be conducted, taking into account this guidance and the principles of the systems methodology recommended by the Munro review[205]. It should provide a way of looking at and analysing frontline practice as well as organisational structures and learning, and allow those involved in the review to reach recommendations that will improve outcomes for children. All reviews should reflect all children involved in the incident and be from both the child's perspective and the family context.

399. The review should be proportionate to the circumstances of the case, focus on potential learning, and establish and explain the reasons the incidents occurred as they did.

400. As part of their duty to ensure the review is of satisfactory quality, the safeguarding partners should ensure that:

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[204] Safeguarding partners may also consider appointing reviewers from the panels pool of reviewers, where available

[205] The Munro review of child protection final report: a child-centred system (2011)

children, family members, practitioners and others closely affected by the case. The safeguarding partners should ensure that reports are written in such a way so that what is published avoids harming the welfare of any children or vulnerable adults involved in the case.

407. Safeguarding partners must send a copy of the full report to the panel and to the Secretary of State no later than seven working days[209] before the date of publication. Where the safeguarding partners decide only to publish information relating to the improvements to be made following the review, they must also provide a copy of that information to the panel and the Secretary of State within the same timescale. They should also provide the report, or information about improvements, to Ofsted within the same timescale.

408. Depending on the nature and complexity of the case, the report should be completed and published as soon as possible and no later than six months from the date of the decision to initiate a LCSPR. Where other proceedings may have an impact on or delay publication, (for example, an ongoing criminal investigation, inquest or future prosecution), the safeguarding partners should inform the panel and the Secretary of State of the reasons for the delay. Safeguarding partners should also set out for the panel and the Secretary of State the justification for any decision not to publish either the full report or information relating to improvements. Safeguarding partners should have regard to any comments that the panel or the Secretary of State may make in respect of publication.

409. Every effort should also be made, both before the review and while it is in progress, to:

- capture points from the case about improvements needed
- take corrective action and disseminate learning

410. The safeguarding partners should take account of the findings from their own local reviews and from all national reviews, with a view to considering how identified improvements should be implemented locally, including the way in which organisations and agencies work together to safeguard and promote the welfare of children. The safeguarding partners should highlight findings from reviews with relevant parties locally and should regularly audit progress on the implementation of recommended improvements[210]. Improvement should be sustained through regular monitoring and follow-up of actions so that the findings from these reviews make a real impact on improving outcomes for children.

411. Learning from local reviews should be reflected in the annual reports published yearly by the safeguarding partners.

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[209] "Working day" means any day which is not a Saturday, Sunday, or bank holiday.

[210] See also Reporting section in chapter 2 (safeguarding partners' report).

414. In many cases there will need to be dialogue between the safeguarding partners and the panel to support the decision-making process. The safeguarding partners must share further information with the panel if requested.

415. The panel should inform the relevant safeguarding partners promptly following receipt of the rapid review, if it considers that:

- a national review is appropriate, setting out the rationale for its decision and the next steps
- further information is required to support its decision-making, including whether the safeguarding partners have decided to commission a local review

416. The panel should decide on whether to undertake a national review and communicate its rationale appropriately, including to families. The panel should notify the Secretary of State if it decides to carry out a national review.

417. On receipt of the information from a rapid review or following its appraisal of a number of rapid reviews that highlight a particular theme, the panel must decide whether it is appropriate to commission a national review of a case, or cases, or to undertake a thematic review. For the criteria and guidance that the panel considers in its decision-making, refer to its guidance[214]

418. If the panel decides to undertake a national review, it should discuss with the safeguarding partners its potential scope and methodology and how it will engage with them and those involved in the case.

419. There will be instances where a local review has been carried out which could then form part of a thematic review that the panel undertakes at a later date. There may be other instances where a local review has not been carried out but where the panel considers that the case could be helpful to a future national review. In such circumstances, the panel should engage with safeguarding partners to agree how the review should be conducted.

420. Alongside any national or local reviews, there could be a criminal investigation, a coroner's investigation and/or professional body disciplinary procedures.

421. The panel and the safeguarding partners should have in place clear processes for how they contribute to with other investigations (including a domestic homicide review, multi-agency public protection arrangements, death in custody reviews or safeguarding adult's reviews), and collaborate with those responsible for carrying them out. This will reduce the burdens on, and anxiety for, the children and families concerned as well as uncertainty and duplication of effort.

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[214] Child Safeguarding Practice Review Panel

publish either the full report or information relating to improvements. During the review, the panel should share any points that arise about improvements needed with the safeguarding partners in any local authority areas covered by the review and others as applicable.

428. The panel should send copies of published reports of national and local child safeguarding practice reviews or published information relating to improvements that should be made following those reviews, to Foundations (What Works Centre for Children and Families) and relevant inspectorates, bodies, or individuals as they see fit. Where a local review results in findings which are of national importance, or in recommendations for national government, the panel should consider the potential of those recommendations to improve systems to safeguard and promote the welfare of children and how best to disseminate and embed such learning.

Summary: how to notify a serious incident, rapid review, and local child safeguarding practice review

Serious incident notification

All serious child safeguarding incidents must be notified to the panel (and by extension the DfE and Ofsted).

Notifications should be sent within five working days of the local authority becoming aware of the incident.

Notifications are made through the online notification system, which is accessible 24 hours a day.

The rapid review

Rapid reviews should be submitted to the panel within 15 working days of the serious incident notification. This is a non-statutory requirement and more details can be found in the panel's practice guidance[215].

Rapid reviews should be submitted to the panel secretariat, at Mailbox.NationalReviewPanel@education.gov.uk.

Local child safeguarding practice review

Local Child Safeguarding Practice Reviews should be submitted within 6 months from the date of the decision to initiate a LCSPR.

Full reports must be sent to the panel and the Secretary of State for Education[216] no later than seven working days before the date of publication.

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[215] Child Safeguarding Practice Review Panel guidance for safeguarding partners

[216] By sending to Mailbox.CPOD@education.gov.uk

Chapter 6: Child death reviews

429. The death of a child is a devastating loss that profoundly affects all those involved. The process of systematically reviewing the deaths of children is grounded in respect for the rights of both children and their families[217], with the intention of learning what happened and why, and preventing future child deaths.

430. The majority of child deaths in England arise from medical causes. Enquiries should keep an appropriate balance between forensic and medical requirements and supporting the family at a difficult time. This chapter provides guidance to child death review partners on their statutory responsibilities.

431. Child death review partners are local authorities and any ICBs for the local area as set out in the Children Act 2004, as amended by the Children and Social Work Act 2017[218]. The statutory responsibilities for child death review partners are set out below, and the agency and organisational boundaries should be decided locally as described in paragraph 437 of this chapter.

432. In the immediate aftermath of a child's death, a copy of 'When a child dies – a guide for parents and carers'[219] should be offered to all bereaved families or carers through the child death review process. In addition to supporting families and carers, staff involved in the care of the child should also be considered and offered appropriate support.

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[217] United Nations Convention on the Rights of the Child
[218] Children Act 2004, Section 16Q
[219] When a child dies: a guide for parents and carers

Responsibilities of child death review partners

433. The child death review process covers children[222], regardless of the cause of death[223].

434. In making arrangements to review child deaths, child death review partners should establish a structure and process to review all deaths of children normally resident in their area and, as indicated and agreed between child death review partners, the deaths of children not normally resident in their area but who have died there. Child death review partners should model their child death review structures and processes as laid out in the 'Child Death Review Statutory and Operational Guidance (2018)'[224].

435. Child death review partners should consider the core representation of any panel or structure they set up to conduct reviews, and this would ideally include:

- public health
- the designated[225] doctor for child deaths for the local area
- social services
- police
- the designated doctor or nurse for safeguarding
- primary care (GP or health visitor)
- nursing and/or midwifery
- lay representation
- other professionals that child death review partners consider should be involved

It is for child death review partners to determine what representation they have in any structure reviewing child deaths.

436. Child death review partners should agree locally how the child death review process will be funded in their area.

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[222] Children Act 2004 Section 65 - a child is defined as a person under 18 years of age

[223] This will include the death of any liveborn baby, where a death certificate has been issued, or where the birth was unattended, but does not include those (of any gestation) who are stillborn where there was medical attendance or planned terminations of pregnancy carried out within the law.

[224] Child Death Review: Statutory and Operational Guidance (England)

[225] Within that part of the health system that supports child safeguarding and protection services, the word "designated" means a dedicated professional with specific roles and responsibilities that are centred on the provision of clinical expertise and strategic advice.

Responsibilities of other organisations and agencies

442. All local organisations or individual practitioners that have had involvement in the case should co-operate, as appropriate, in the child death review process carried out by child death review partners. All local organisations or individual practitioners should also have regard to any guidance on child death reviews issued by the government.

Specific responsibilities of relevant bodies in relation to child deaths

Registrars of Births and Deaths (Section 31 of the Children and Young Persons Act 2008): Requirement on registrars of births and deaths to supply child death review partners with the particulars of the death entered in the register in relation to any person who was or may have been under the age of 18 at the time of death. A similar requirement exists where the registrar corrects an entry in the register.

The registrar must also notify child death review partners if they issue a Certificate of No Liability to Register (where a death is not required by law to be registered in England or Wales) where it appears that the deceased was or may have been under the age of 18 at the time of death.

The information must be provided to the appropriate child death review partners (which cover the sub-district in which the register is kept) no later than seven days from the date the death was registered, the date the correction was made or the date the certificate was issued.

Coroners and Justice Act 2009 & Coroners (Investigations) Regulations 2013: Duty to investigate and hold an inquest. Powers to request a post-mortem and for evidence to be given or produced.

Coroner's duty to notify the child death review partners for the area in which the child died or where the child's body was found within three working days of deciding to investigate a death or commission a post-mortem.

Coroner's duty to share information, including post-mortem reports with the relevant child death review partners.

445. The processes that should be followed by all those involved when responding to, investigating, and reviewing child deaths is set out in the Child Death Review Statutory and Operational guidance[226] on child death reviews issued by the government.

446. All practitioners participating in the child death review process should notify, report, and scrutinise child deaths using the standardised templates[227]. These should be forwarded to the relevant CDOP.

The child death review process

A child dies

447. Practitioners in all agencies should notify the child death review partners, via the local CDOP administrator (or equivalent) of the death of any child of which they become aware by using the child death notification form[228].

Immediate decision-making and notifications, and investigation and information gathering

448. Whenever a child dies, practitioners should work together in responding to that death in a thorough, sensitive, and supportive manner. The aims of this response are to:

- establish, as far as is possible, the cause of the child's death
- identify any modifiable or contributory factors[229]
- provide ongoing support to the family
- learn lessons in order to reduce the risk of future child deaths and promote the health, safety, and wellbeing of other children
- ensure that all statutory obligations are met

449. Where a joint agency response is required, practitioners should follow the process set out in 'Sudden unexpected death in infancy and childhood: multi-agency guidelines for care and investigation (2016)'[230]. A joint agency response is required if a child's death:

- is or could be due to external causes
- is sudden and there is no immediately apparent cause (including sudden

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226 Child Death Review Statutory and Operational guidance

227 Child death reviews: forms for reporting child deaths

228 Child death notification form

229 These are defined as factors that may have contributed to the death of the child and that might, by means of a locally or nationally achievable intervention, be modified to reduce the risk of future deaths

230 Sudden unexpected death in infancy and childhood: multi-agency guidelines for care and investigation – RCPCH Child Protection

455. In addition to the statutory responsibilities set out above, the review should also provide data to the National Child Mortality Database.

456. Child death review partners for a local authority area in England must prepare and publish a report as set out in the statutory responsibilities above[232,233]. They may therefore wish to ask their CDOP to produce an annual report on local patterns and trends in child deaths, any lessons learnt and actions taken, and the effectiveness of the wider child death review process in order to assist child death review partners to prepare their report.

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232 Children Act 2004 Section 16M

233 Child Death Review: Statutory and Operational Guidance (England)

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. Sexual abuse can take place in family settings, in institutional settings, online, and technology can be used to facilitate offline abuse. Child sexual abuse material available online may have been generated in a family environment. Online abuse can also take the form of cyber-grooming or self-generated sexual content under coercion. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. A child of any age or gender can be a victim of sexual abuse.

Child sexual exploitation - Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

Children – A person from birth to age 18. The fact that a child has reached 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital or in custody in the secure estate, does not change their status or entitlements to services or protection.

Controlling or coercive behaviour - Also known as coercive control, controlling or coercive behaviour is a form of domestic abuse. In 2015, the offence of controlling or coercive behaviour was introduced under Section 76 of the Serious Crime Act as a criminal offence. Controlling or coercive behaviour is included in the definition of domestic abuse in section 1(3)(c) of the Domestic Abuse Act 2021.

Controlling or coercive behaviour is a pattern of abuse (on two or more occasions) that involves multiple behaviours and tactics used by a perpetrator to (but not limited to) hurt, humiliate, intimidate, exploit, isolate, and dominate the victim. It is an intentional pattern of behaviour used to exert power, control, or coercion over another person and can also be present in teenage relationships or between a child and adult. Controlling or coercive behaviour is often committed in conjunction with other forms of abuse and is often part of a wider pattern of abuse, including violent, sexual, or economic abuse.
Children can be used to control or coerce the victim, for example, by frustrating child contact and/or child arrangements, telling the children to call the victim derogatory names or to hit the victim, or by threatening to abduct the children.

This pattern of abuse causes fear, serious alarm and/or distress which can lead to a substantial adverse effect on a victim's day-to-day life. This can have a significant impact

hear or experience the effects of abuse.

Young people can also experience domestic abuse within their own intimate relationships. This form of child-on-child abuse is sometimes referred to as teenage relationship abuse. Depending on the age of the young people, this may not be recognised in law under the statutory definition of domestic abuse (if one or both parties are under 16). However, as with any child under 18, where there are concerns about safety or welfare, child safeguarding procedures should be followed and both young victims and young perpetrators should be offered support. The 'Domestic Abuse Act 2021: statutory guidance'[239] provides further advice for frontline professionals who have responsibility for safeguarding and supporting victims of domestic abuse, including children. This guidance provides further information about the different forms of domestic abuse (including teenage relationship abuse and child to parent and carer abuse) and the impact of domestic abuse on children.

Education, health and care (EHC) plan - An education, health and care (EHC) plan details the education, health and social care support that is to be provided to a child or young person who has SEN[240].

Emotional abuse - The persistent emotional or psychological maltreatment of a child so as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them, or making fun of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Extra-familial contexts - Extra-familial contexts include a range of environments outside the family home in which harm can occur. These can include peer groups, school, and community/public spaces, including known places in the community where there are concerns about risks to children (for example, parks, housing estates, shopping centres, takeaway restaurants, or transport hubs), as well as online, including social media or gaming platforms.

Extra-familial harm - Children may be at risk of or experiencing physical, sexual, or emotional abuse and exploitation in contexts outside their families or the home they live

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[239] Domestic Abuse Act 2021: statutory guidance

[240] SEND code of practice: 0 to 25 years - GOV.UK

laundering. This is when criminals target children and adults and take advantage of an imbalance of power to coerce, control, manipulate or deceive them into facilitating the movement of illicit funds. This can include physical cash and/or payments through financial products, such as bank and cryptocurrency accounts.

Group-based child sexual exploitation – Group-based is defined as two or more individuals (whether identified or not) who are known to (or associated with) one another and are known to be involved in or to facilitate the sexual exploitation of children. Being involved in the sexual exploitation of children includes e.g. introducing them to other individuals for the purpose of exploitation, trafficking a child for the purpose of sexual exploitation, taking payment for sexual activities with a child or allowing their property to be used for sexual activities with a child, etc. This can be perpetrated within or beyond the family, by both children and adults, and groups can be organised or loosely linked.

'Honour'-based abuse - So-called 'honour'-based abuse (HBA) encompasses incidents or crimes which have been committed to protect or defend the honour of the family and/or the community, including female genital mutilation (FGM), forced marriage, and practices such as breast ironing. Abuse committed in the context of preserving 'honour' often involves a wider network of family or community pressure and can include multiple perpetrators. It is important to be aware of this dynamic and additional risk factors when deciding what form of safeguarding action to take. All forms of HBA are abuse (regardless of the motivation) and should be handled and escalated as such. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a child being at risk of HBA, or already having suffered HBA.

Kinship care - When a child lives full-time or most of the time with a relative, friend or connected person and that person provides most or all of the child's care. It does **not** include parents, foster carers with no prior connection to the child, or anyone caring in a professional capacity. Kinship care arrangements can be **formal** (through legal orders or kinship fostering) or **informal** (family or friends caring without a formal agreement in place).

The following are all types of kinship care arrangements however this list is not exhaustive:

a. Informal kinship care arrangements (not approved foster care) including:

   i. A private family arrangement in which a close family member who does not hold parental responsibility, raises the child and

      - the local authority has had no major role in making the arrangement for the child
      - where a Family Court has not made an order in respect of the care of the child.

   ii. Where a child under the age of 16 is being provided with accommodation for

ensure that any allegations about those who work with children are passed to the designated officer, or team of officers, without delay.

Maltreatment - All forms of physical and/or emotional ill-treatment, sexual abuse, neglect, or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child's health, survival, development or dignity in the context of a relationship of responsibility, trust or power.

Neglect - 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:

- provide adequate food, clothing, and shelter (including exclusion from home or abandonment)
- protect a child from physical and emotional harm or danger
- ensure adequate supervision (including the use of inadequate caregivers)
- ensure access to appropriate medical care or treatment
- provide suitable education

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs

Parent carer - A person aged 18 or over who provides or intends to provide care for a disabled child for whom the person has parental responsibility

Physical abuse - A form of abuse which 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.

Relative - The Children Act 1989 (section 105)[246] defines a relative as in relation to a child, meaning a grandparent, brother, sister, uncle or aunt (whether of the full blood or half blood or by marriage or civil partnership) or step-parent. This guidance uses this definition and includes cousins when referring to relatives.

Safeguarding and promoting the welfare of children - Defined for the purposes of this guidance as:

- providing help and support to meet the needs of children as soon as problems emerge
- protecting children from maltreatment, whether that is within or outside the home, including online
- preventing impairment of children's mental and physical health or development

[246] Children Act 1989 Section 105

Appendix B: Further sources of information

Guidance issued by the Department for Education

- Care of unaccompanied migrant children and child victims of modern slavery
- Child sexual exploitation: definition and guide for practitioners
- Children Act 1989: court orders and pre-proceedings
- Children Act 1989 guidance and regulation volume 2: care planning, placement, and case review
- Children Act 1989: private fostering
- Keeping children safe in education: for schools and colleges
- Listening to and involving children and young people
- Managing risk of radicalisation in your education setting
- Mandatory reporting of female genital mutilation: procedural information
- Multi-agency statutory guidance on female genital mutilation
- National action plan to tackle child abuse linked to faith or belief
- National minimum standards for private fostering
- Non-Maintained Special Schools (England) Regulations 2015
- Pathways to harm, pathways to protection: a triennial analysis of serious case reviews, 2011 to 2014
- Preventing and tackling bullying
- Prevention of homelessness and provision of accommodation for 16 and 17 year old young people who may be homeless and/or require accommodation
- Safeguarding and social care for children
- Safeguarding children who may have been trafficked practice guidance
- Safeguarding strategy: unaccompanied asylum seeking and refugee children
- Social work post-qualifying standards: Knowledge and skills statements
- Statutory framework for the early years foundation stage (EYFS)
- Statutory guidance on children who run away or go missing from home or care
- Statutory visits to children with special educational needs and disabilities or health conditions in long-term residential settings

- Domestic Abuse Act 2021: statutory guidance Home Office
- Every child matters: statutory guidance (arrangements to safeguard and promote the welfare of children UK Visas and Immigration
- Female genital mutilation protection orders: factsheet Home Office
- Female genital mutilation resource pack Home Office
- Forced marriage Foreign, Commonwealth and Development Office, and Home Office
- Forced marriage protection orders (application) HM Courts and Tribunals Service
- Forced marriage resource pack Home Office
- Forced marriage: statutory guidance for heads of safeguarding organisations, and non-statutory guidance for front-line professionals Home Office, and Foreign, Commonwealth and Development Office
- Guidance for health professionals on domestic violence Department of Health and Social Care
- Homelessness code of guidance for local authorities Department for Levelling Up, Housing and Communities
- Information sharing duty: Operation Encompass Home Office
- Interim guidance for ICTGs Home Office
- Mental Health Act 1983: Code of Practice Department of Health and Social Care
- Missing children and adults: a cross-government strategy Home Office
- Modern Slavery Act: statutory guidance Home Office
- Multi-agency public protection arrangements (MAPPA): Guidance Ministry of Justice, HM Prison and Probation Service
- National service framework: children, young people, and maternity services Department of Health and Social Care
- Practice direction 12A – care, supervision, and other part 4 proceedings: guide to case Management Ministry of Justice
- Prevent duty guidance: for England and Wales Home Office
- Prison, probation, and rehabilitation: public protection manual HM Prison and Probation Service
- Probation Service Serious further offence procedures policy framework Ministry of Justice
- Protocol for liaison and information exchange when criminal proceedings coincide with child safeguarding practice reviews in England Crown Prosecution Service
- Recognised, valued and supported: next steps for the carers strategy 2010

- Police response to concern for a child College of Policing
- Pre-proceedings and family justice hub Research in Practice and Essex County Council
- Prison and Probation Ombudsman's fatal incidents reports
- Prisoners' Families Helpline
- Private fostering CoramBAAF
- Protecting children and young people: doctors' responsibilities General Medical Council
- Protective measures and civil orders College of Policing
- 'Right to erasure' ICO
- Safeguarding children: toolkit for general practice Royal College of General Practitioners
- Safer young lives research centre University of Bedfordshire
- Signs and Indicators: a template for identifying and recording signs of child sexual abuse Centre of Expertise on Child Sexual Abuse
- Standards for safeguarding and protecting children in sport NSPCC
- Sudden unexpected death in infancy and childhood: multi-agency guidelines for care and investigation Royal College of Pathologists
- Supporting parents and carers: a guide for those working with families affected by child sexual abuse Centre of Expertise on Child Sexual Abuse
- UK Safer Internet Centre: Online safety advice and resources UK Safer Internet Centre
- Useful links | Prisoners' Families Helpline
- Whistleblowing advice line NSPCC
- Working Together with Parents Network: Good practice guidance on working with parents with a learning disability (2021) University of Bristol
- 'Your right to get your data deleted' ICO