

Child Protection Case Conferences



CHILD PROTECTION CASE CONFERENCES

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Child Protection Case Conferences

Introduction

1. A core component of GIRFEC is the Child's Plan. Within the context of child protection activity, where the plan includes action to address the risk of significant harm, it is known as a Child Protection Plan and any meeting to consider such a plan is known as a Child Protection Case Conference (CPCC). CPCCs can be uncomfortable for children to attend and the child or young person's age and the emotional impact of attending a meeting must be considered. A decision not to invite the child or young person should be verbally communicated to them, unless there are reasons not to do so. Children and young people attending should be prepared beforehand so that they can participate in a meaningful way, and thought should be given to making the meeting as child and family friendly as possible. Consideration should also be given to the use of an advocate for the child or young person. It is crucial that the child's or young person's views are obtained, presented, considered and recorded during the meeting, regardless of whether or not they are present. Where the child is disabled, consideration should be given to whether they will need support to express their views. Where appropriate and agreed the child should be part of the core group.
2. CPCCs are a core feature of inter-agency co-operation to protect children and young people. Their primary purpose is to consider whether the child, including an unborn child is at risk of significant harm and if so, to review an existing Child's Plan and/or consider a multi-agency action plan to reduce the risk of significant harm. CPCCs are formal multi-agency meetings that enable services and agencies to share information, assessments and chronologies in circumstances where there are suspicions or allegations of child abuse and neglect. The need for a conference should be discussed with other services and agencies at an early stage in investigations. Any agency can request a CPCC. This request should be made in writing or for NHS Forth Valley Staff using the CP4 form. Correspondence should be sent to the Child Protection Co-ordinator, or equivalent, see Appendix 1. A CPCC will be convened if the request evidences that the criteria of at risk of significant harm is met. National timescales have been introduced for CPCCs as well as for the production of minutes and Child Protection Plans. Every effort should be made to meet the timescales within the National Guidance but it is recognised that this may not always be possible. The reasons for not complying with the timescales should be recorded, along with a proposed future date for completion.
3. Where a child is believed to be at actual or potential risk of significant harm, their name should be placed on the Child Protection Register. Social work services are responsible for the Child Protection Register and, as such, for arrangements in respect of registration. Even where a child is not felt to be at risk of significant harm, there will still often be a need to develop a co-ordinated Child's Plan and identify a Lead Professional. Due to the timescales

for calling an initial CPCC, in certain circumstances the conference may not have all the information required to make a decision on registration. In these circumstances the conference may be continued for a period, agreed by the participants but no longer than 3 months, to allow for further information to be obtained where concerns require to be further evidenced or substantiated or for further assessment of the child/family's circumstances. The reconvened conference would be a Continued Initial CPCC.

CPCC Function

4. The function of all CPCCs is to share information in order to identify risks to the child collectively and the actions by which those risks can be reduced. The participants should maintain an outcome-focused approach:

ensuring that all relevant information held by each service or agency has been shared and analysed on an inter-agency basis;

- assessing the degree of existing and likely future risk to the child;
- considering the views of the child/parents/carers;
- identifying the child's needs and how these can be met by services and agencies;
- developing and reviewing the Child Protection Plan;
- identifying a Lead Professional;
- deciding whether to place or retain a child's name on the Child Protection Register and
- considering whether a referral to the Reporter to the Children's Hearing is needed if this has not already been done.

There are four types of CPCC: initial, pre-birth, review and transfer.

Initial CPCC

5. The purpose of an initial CPCC is to allow representatives from across services to share information about a child for whom there are child protection concerns, jointly assess that information and the risk to the child and determine whether there is a likelihood of significant harm through abuse or neglect that needs to be addressed through a multi-agency Child Protection Plan.
6. Where it is agreed that a child is at risk of significant harm and that their name should be placed on the Child Protection Register, those attending the CPCC are responsible for developing and agreeing a Child Protection Plan and identifying the core group of staff responsible for implementing, monitoring and

reviewing the plan. The participants need to take account of the circumstances leading to the CPCC and the initial risk assessment. In some instances, there will already be a multi-agency Child's Plan in place and this will need to be considered in light of the concerns about the child. In some circumstances the Core Group will be responsible for expanding on the Child Protection Plan.

7. The initial CPCC should be held as soon as possible and **no later than 21 calendar days** from the notification of concern being received. Where possible, participants should be given a minimum of five days notice of the decision to convene a CPCC. It is important to ensure there are clear arrangements in place for sharing information held by schools and ensuring education representation at meetings during school holidays. These arrangements need to be communicated effectively to staff within and across services.

Pre-birth CPCC

8. The purpose of a pre-birth CPCC is to decide whether serious professional concerns exist about the likelihood of harm through abuse or neglect of an unborn child when they are born. The participants need to prepare an inter-agency plan in advance of the child's birth.
9. They will also need to consider actions that may be required at birth, Including;
 - whether it is safe for the child to go home at birth;
 - whether there is the need to recommend an application for a Child Protection Order at birth or other appropriate legal measures.
 - whether the child's name should be placed on the Child Protection Register. It should be noted that as the Register is not regulated by statute, an unborn child can be placed on the Register. Where an unborn child is felt to require a Child Protection Plan, their name should be placed on the Register; and
 - whether there should be a core group meeting prior to the discharge.
10. The pre-birth CPCC should take place **no later than at 28 weeks pregnancy** or, in the case of late notification of pregnancy, as soon as possible from the concern being raised. There may be exceptions to this where the pregnancy is in the very early stages. All pre-birth referrals must be allocated for assessment purposes within 21 calendar days of the concern being raised.

Review CPCC

11. The purpose of a review CPCC is to review the decision to place a child's name on the Child Protection Register or where there are significant changes in the child or family's circumstances. The participants will review the progress of the Child Protection Plan, consider all new information available and decide whether the child's name should remain on the Child Protection Register.
12. The first review CPCC should be held within three months of the initial CPCC. Thereafter, reviews should take place six-monthly, or earlier if circumstances change. Where a child is no longer considered to be at risk of significant harm their name should be removed from the Child Protection Register by the review CPCC. The child and their family/carers may still require ongoing support and this should be managed through the Child's Plan. A deregistration core group will be convened within six weeks from the date of the child's name has been removed from the register. The purpose of this meeting is to ensure that the appropriate arrangements are in place to ensure that the child's safety and wellbeing are protected.

Transfer CPCC

13. Transfer CPCCs specifically cover the transfer of information about a child where a Child Protection Plan is currently in place. Only a review CPCC can deregister a child from the Child Protection Register. Where a child and/or their family move permanently to another local authority area, the original local authority will notify the receiving local authority immediately, then follow up the notification in writing.
14. Where the child moves to another authority the originating authority needs to assess this change in circumstances. If there is felt to be a reduction in risk the originating authority should arrange a review CPCC to consider the need for ongoing registration, or, if appropriate, de-registration. In such circumstances it would be best practice for an appropriate member of staff from the receiving authority to attend the review. Where the original authority considers that the risk is ongoing or even increased by the move, the receiving local authority is responsible for convening the transfer CPCC. This should be held within the timescales of the receiving local authority's initial CPCC arrangements but within a **maximum of 21 calendar days**.
15. Where a child and their family move from one Scottish authority to another then;
 - if the child has a Child Protection Plan, the case records and/or file needs to go with the child; or
 - whenever possible if the child is subject to a Supervision Requirement, the case records and/or file needs to go with child.

Where a child was on the Child Protection Register previously in another area, the receiving authority should request the child's file from the previous authority (if still available).

Where a child is subject to a supervision requirement, responsibility for both this and the CP registration should transfer at the same time. This ensures that both are held by the one authority.

16. At the transfer CPCC, the minimum requirement for attendance will be the original local authority's allocated social worker and the receiving local authority social worker, plus the appropriate managers as well as representatives from relevant services including health and education.

CPCC participants

17. The number of people involved in a CPCC should be limited to those with a need to know or those who have a relevant contribution to make. All persons invited to a CPCC need to understand its purpose, functions and the relevance of their particular contribution. This may include a support person or advocate for the child and or family.

Chair

18. CPCCs will be chaired by senior staff members, experienced in child protection, who are competent, confident and capable. It is critical that the chair has a sufficient level of seniority/authority within their own organisation and is suitably skilled and qualified to carry out the functions of the chair. The chair, wherever possible, should not have any direct involvement with or supervisory function in relation to any practitioner who is involved in the case. They should be sufficiently objective to challenge contributing services on the lack of progress of any agreed action, including their own. While the chair will in the majority of instances be from social work services, where an individual could fulfil the required criteria, it is possible for a senior staff member from a different agency or service to undertake the role. The chair should be able to access suitable training and peer support.
19. The chair's role is to:
 - agree who to invite, who cannot be invited and who should be excluded in discussion with the Lead Professional and any other relevant agency;
 - meet with parents/carers and explain the nature of the meeting and possible outcomes;
 - facilitate information-sharing and analysis;
 - identify the risks and protective factors;
 - ensure that the parents/carers and child's views are taken into account;

- facilitate decision-making;
- determine the final decision in cases where there is disagreement;
- wherever possible, chair review CPCCs to maintain a level of consistency;
- where a child's name is placed on the Register, outline decisions that will shape the initial Child Protection Plan;
- identify the Lead Professional;
- advise parents/carers about local dispute resolution processes;
- facilitate the identification of risks, needs and protective factors;
- facilitate the identification of a core group of staff responsible for implementing and monitoring the Child Protection Plan;
- agree review dates;
- challenge any delays in action being taken by staff or agencies;
- ensure that national timescales are adhered to, including review dates, distribution of minutes and copies of the Child Protection Plan and changes to plans; and
- ensure that all participants are clear about the actions required by them as part of the plan;
- ensure that any member of staff forming part of the core group who was not present at the case conference is informed immediately about the outcome of the case conference, the decisions and any actions required by them.

Minute-taker

20. Minutes are an integral and essential part of the meeting and should be noted by a suitably trained clerical worker and agreed by the chair before being circulated to the participants. Participants should receive the minutes within 15 calendar days of the CPCC whenever possible. A record of key decisions and agreed tasks must be circulated within one day of the meeting. This should be distributed to invitees who were unable to attend and members of the core group, as well as CPCC attendees. The Chair should ensure that staff who did not attend the CPCC are informed of any actions assigned to them as soon as possible.
21. Minutes need to be clearly laid out and should as a minimum, record:
 - those invited, attendees and absentees;

- reasons for child/parents/carers non-attendance;
 - reports received;
 - a summary of the information shared;
 - the risks and protective factors identified;
 - the views of the child and parents/carers;
 - the decisions, reasons for the decisions and note of any dissent;
 - the outline of the Child Protection Plan agreed at the meeting, detailing the required outcomes, timescales and contingency plans;
 - the name of the Lead Professional; and
 - membership of the core group.
22. CPCC participants need to include:
- local authority social worker(s);
 - education staff where any of the children in the family are of school age or attending pre-five establishments;
 - NHS staff, health visitor/school nurse/GP as appropriate, depending on the child's age, and the children's paediatrician where applicable. Across the Forth Valley a Child Protection Nurse Advisor will attend all pre-birth and Initial Case Conferences. This is to ensure that all the relevant health information about children, parents/carers is shared and assessed.;
 - Central Scotland Police. This can either be a member of the PPU or a community officer if more appropriate.
23. Other participants might include other health practitioners (including mental health services), adult services, housing staff, addiction services, educational psychologists, relevant third sector organisations, representatives of the Procurator Fiscal and armed services staff where children of service personnel are involved. On occasion, a Children's Reporter may be invited to attend although their legal position means they can only act as an observer and cannot be involved in the decision-making.
24. Participants attending are there to represent their agency/service and share information to ensure that risks can be identified and addressed. They have a responsibility to share information and clarify other information shared as necessary.
25. There may be occasions when it is appropriate to invite foster carers, home carers, childminders, volunteers or others working with the child or family

to the CPCC. The practitioner most closely involved with the person to be invited should brief him or her carefully beforehand. This should include providing information about the purpose of the CPCC and their contribution, the need to keep information shared confidential and advice about the primacy of the child's interests over that of the parents/carers where these conflict.

Parents/carers

26. Parents, carers or other with parental responsibilities should be invited to the CPCC. They need clear information about practitioners' concerns if they are to change behaviour which puts the child at risk.
27. In exceptional circumstances, the chair may determine that a parent/carer should not be invited to or be excluded from attending the CPCC (for example, where bail conditions preclude contact or there are concerns that they present a significant risk to others attending, including the child or young person). The reasons for such a decision need to be clearly documented. Their views should still be obtained and shared at the meeting and the chair should identify who will notify them of the outcome and the timescale for carrying this out. This should be recorded in the minutes.
28. The chair should encourage the parent/carer to express their views, while bearing in mind that they may have negative feelings regarding practitioners' intervention in their family. The chair should make certain that parents/carers are informed in advance about how information and discussion will be presented and managed. Parents/ carers may need to bring someone to support them when they attend a CPCC. This may be a friend or another family member, at the discretion of the chair, or an advocacy worker. This person is there solely to support the parent/carer and has no other role within the CPCC.
29. Information about CPCCs should be made available to children and parents/carers. The leaflets available to parents/carers and children are available at Appendix 2.

Child

30. Consideration should always be given to inviting children and young people aged 12 years and over to a CPCC considering their circumstances to ensure that their views are heard. In addition, if a younger child expresses a wish to attend, this should, in consultation with the chair, be facilitated wherever possible, if only for part of the meeting.
31. Reasons for agreeing that older children and young people should or should not attend a CPCC or core group meeting should be noted, along with details of the factors that lead to the decision. This should be recorded in the minutes.

Provision of reports

32. Reports should be produced and co-ordinated to ensure that relevant information is effectively shared with conference participants and supports good decision-making. Where possible, composite reports should be produced either in advance of the CPCC meeting or soon afterwards with the Lead Professional collating information and all relevant participants (particularly the child(ren) and family) contributing.
33. The report/s should include all relevant information and a chronology, to be completed by the Lead Professional. They should also include information pertaining to significant adults in the child's life and provide a clear overview of the risks, vulnerabilities, protective factors and the child's views. Other children in the household or extended family should also be considered.
34. Invitees have a responsibility to share the content of the report(s) with the child and family in an accessible, comprehensible way. Particularly prior to an initial CPCC, consideration needs to be given as to the most appropriate means of sharing reports with the child and family and to when it should be done.

Restricted access information

35. Restricted access information is information that, by its nature, cannot be shared freely with the child, parent/carer and anyone supporting them. The information will be shared with the other participants at the CPCC. Such information may **not** be shared with any other person without the explicit permission of the provider.
36. Restricted information includes:
 - Sub-judice information that forms part of legal proceedings and which could compromise those proceedings;
 - information from a third party that could identify them if shared;
 - information about an individual that may not be known to others, even close family members, such as medical history and intelligence reports; and
 - information that, if shared, could place any individual(s) at risk,

Reaching decisions

37. All participants at a CPCC with significant involvement with the child/family have a responsibility to contribute to the decision as to whether or not to place the child's name on the Child Protection Register. Where there is no clear consensus in the discussion, the Chair will use his or her professional judgement to make the final decision, based on an analysis of the issues raised.

Dispute resolution

38. Dispute resolution is a way of managing:
- challenges about the inter-agency process;
 - challenges about the decision-making and outcomes;
 - challenges by children/young people or their parents/carers about the CPCC decisions; and
 - complaints about practitioner behaviour.
39. Pending the completion of the dispute resolution process all protective actions should continue, the child's name be added to Child Protection Register and the Child Protection Plan developed as required.
40. The agencies and services involved in child protection work have clear complaints procedures, which should be followed where there is a complaint about an individual practitioner. There are clearly defined local arrangements for challenging inter-agency CPCC processes:
- **Parent/carer** – where they wish to challenge the decisions of the CPCC, they should be supported to follow the process contained within each local authority social work services child protection procedures. If the complaint is about a specific practitioner, they should follow that agency's complaints procedures.
 - **Child** – children and young people should be able to access child and family friendly information on how to challenge a decision or make a complaint from any of the practitioners with whom they have contact.
41. If any practitioner disagrees with the decision of the CPCC and believes that the child remains at risk they should immediately inform the Chair. It is noted that only in exceptional circumstances should practitioners raise these concerns out with the CPCC meeting.

Child Protection Plan

42. When a Child's Plan is converted into a Child Protection Plan or when a new Child Protection Plan is developed for the first time, the plans should set out in detail:
- the perceived risks and needs;
 - what is required to reduce these risks and meet those needs; and
 - who is expected to take any tasks forward including parents/carers and the child themselves.

Children and their families need to clearly understand what is being done to support them and why.

43. In addition, Child Protection Plans need to clearly identify:
- key people involved and their responsibilities, including the Lead Professional and named practitioners;
 - timescales;
 - supports and resources required (in particular, access to specialist assistance);
 - the agreed outcomes for the child or young person;
 - the longer terms needs of the child and young person;
 - the process of monitoring and review; and
 - any contingency plans.
44. Responsibility is shared for the Child Protection Plan. Each person involved should be clearly identified, and their role and responsibilities set out. To preserve continuity for the child and their parent(s)/carer(s), arrangements should be made to cover the absence through sickness or holidays of key people. All Child Protection Plans where there are current risks should have specific cover arrangements built into make sure that work continues to protect the child. As part of this continuity, children and young people who are on the Child Protection Register should not be excluded from school unless there is a multi-agency discussion to identify risk factors and strategies to address these.
45. Any interventions should be proportionate and clearly linked to a desired outcome for the child. Progress can only be meaningfully measured if the action or activity has had a positive impact on the child.
46. Participants should receive a copy of the agreed Child Protection Plan within five calendar days of the CPCC. It is recognised that a full comprehensive risk assessment may not be achievable within the timescales of the initial CPCC or the first core group.

Core groups

47. A core group is a group of identified individuals, including the Lead Professional, the child and their parents/carers, who have a crucial role to play in implementing and reviewing the Child Protection Plan. The core group is responsible for ensuring that the plan remains focused on achieving better outcomes for the child by reducing the known risks. The initial core group meeting should be held **within 15 calendar days** of the initial CPCC.

48. The functions of a core group include:
- ensuring ongoing assessment of the needs of, and risks to, a child or young person who has a Child Protection Plan;
 - implementing, monitoring and reviewing the Child Protection Plan so that the focus remains on improving outcomes for the child. This will include evaluating the impact of work done and/or changes within the family in order to decide whether risks have increased or decreased;
 - maintaining effective communication between all services and agencies involved with the child and parents/carers;
 - activating contingency plans promptly when progress is not made or circumstances deteriorate;
 - reporting to review CPCCs on progress; and
 - referring any significant changes in the Child Protection Plan, including non engagement of the family, to the CPCC chair.
 - core groups take place every 4-6 weeks depending on the local authority area.
49. Consideration of the involvement of the child should take cognisance of their age and the emotional impact of attending a meeting to discuss the risks they have been placed at. Children attending must be prepared beforehand to allow them to participate in a meaningful way. It is crucial that their views are obtained, presented and considered during the meeting. This group should provide a less formal way for children, parents and carers to interact with agency and service providers.
50. The core group will report back to the CPCC on progress on the Child Protection Plan. Where a core group identifies a need to make significant changes to the Child Protection Plan, they should notify the CPCC chair **within three calendar days**.

Appendix 1 - Case Conference Chair Details

Clackmannanshire Council

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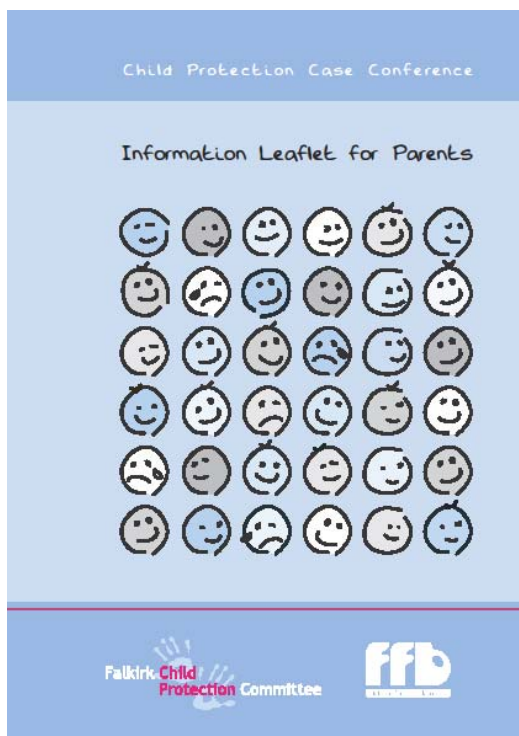
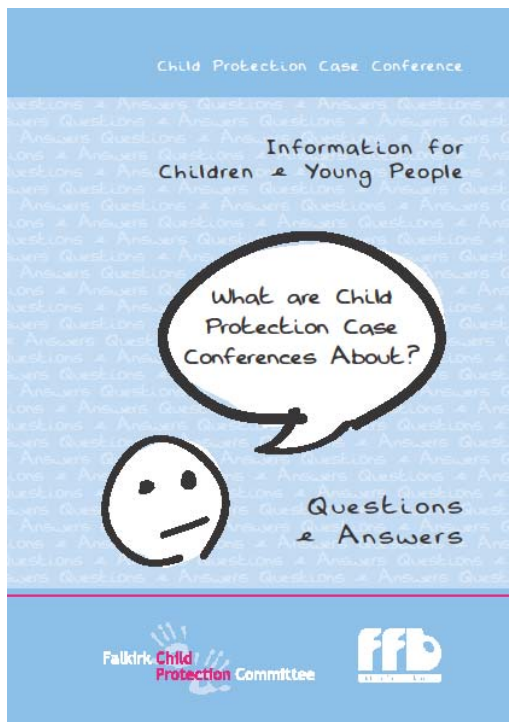
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Stirling Council

For further information regarding Stirling Council Child Protection Leaflet please follow the attached link

<http://www.stirling.gov.uk/index/life/supportforfamilies/childprotection.htm>

Falkirk Council



To view these leaflets in full please follow the attached link

http://www.falkirk.gov.uk/services/social_work/children_and_family_services/child_protection/child_protection.aspx