

Reports to Child Protection Conferences

Guidance to for practitioners

The guidance below is intended to assist professionals in deciding what information to include in their conference report. Clearly it is not exhaustive and does not give examples for all possible service areas. If unclear about what to include, please contact your named professional/designated lead or the Conference Chairperson.

Overview:

Explain how your service is involved with the family and any historical information. Comment if you have been involved in a CAF/Early Help Assessment/CIN Plan previously.

If the child has complex needs, please detail any additional support services that have been offered or provided.

1. What are you worried about?

This might be obvious if you have been involved already in a CAF/Early Help/CIN plan previously and you have been concerned about lack of progress. If this is the case, please summarise what you see as being the impact of the lack of progress on the child and the reason you feel there has been no progress.

For schools, this section should include attendance figures if, if you are concerned about poor attendance and why efforts to improve this have not worked.

If there is a concern that a child's educational or behavioural development is being affected by the family situation, comment on how the child is affected and why efforts to improve this have not worked.

Please include information about the child's behaviour, social skills and presentation and parental engagement with the school if these are a concern.

For Health, this section should include gaps in immunisation record, appointments not kept, parental response to health issues, a high number of A&E attendances.

Please include information about growth and development, emotional and behavioural development, presentation, hygiene and home conditions, if seen, where these issues are of concern.

For Adult service providers, this section should include any information you have about the parents behaviour which could have a negative impact on the child and why efforts to improve this have not worked.

Please include information about presentation, any appointments not attended, and failure to take medication as required etc.

ALL: If your contact with the child or parent so far has not given rise to any concerns, please state, 'no concerns identified', or if you have not yet started working with the family state 'not applicable'.

2. What is going well?

This section should include any information that shows the positives within the family situation and highlights any strengths.

For schools, this section should include good progress with attainment, attendance, presentation, good behaviour and social skills.

Where a child has additional needs and the parent has responded positively to efforts to address needs and worked well with the school, this should be included here.

For health, this section should include immunisations being up to date, that children and there are no concerns about growth, development, presentation, hygiene or home conditions (where seen).

Where a child has additional needs, parents have responded well and kept appointments.

For Adult service providers, this section should include positive engagement with the service, good insight into their own needs and motivation to address any problems.

ALL: Please include in this section any information about positive sources of support, such as extended family support or where you have noted, within a couple relationship, how the couple work well together to resolve difficulties.

3. What do you think needs to happen to reduce the risks?

This section should include the things you think the parents need to achieve to improve the situation.

It might be simple things, such as the parents needing to attend health appointments, or make sure the child gets to school.

It might be that you think the parent needs extra help and support to improve their parenting capacity, to that they need to address their emotional/mental health/substance misuse issues.

It might be that you think that a parent needs to stay away from an abusive partner, or if the abusive relationship continues, they need to learn how to manage conflict differently and understand and prevent the negative impact on a child.

It might be that you think that if other family members helped in certain circumstance, this might reduce the risks.

If you feel that the child cannot be safely managed in care of the parent, this is probably not the best place to state that you think the child should be taken into care, unless the parent already clearly understands this will be the case. You might need to state something like: 'the parent would need a very high level of support/supervision and I am not sure that there is a service available that could provide this within the community'.

If you had no concerns or no previous involvement, state 'not known'.

4. What do you think will happen if nothing changes?

This section should be about the likely impact on the child if nothing changes, so should include things like:

- If the child continues to be exposed to domestic abuse, this could affect the child's long term emotional development; this is likely to increase low self-esteem and self-harming behaviour.
- If the child continues to be parented in this way, the child is likely to fall further behind in his education, so affecting his chances of success in life.
- I am worried that if the child keeps coming to school like that, he will be rejected by other children and be bullied. He will have no friends and no one will play with him.
- I am worried that next time the child is ill and the mother doesn't seek help in time, the child could become really seriously ill or even die.
- I am worried that if supervision in the home does not improve, the child might have a serious accident, such as....
- These should be realistic things which have an actual likelihood of happening, based on the sorts of things you have already seen.

If you had no concerns or no previous involvement, state 'not known'.