Introduction

The University of Edinburgh/NSPCC Centre for UK-wide Learning in Child Protection (CLiCP) is a research centre based within the School of Education at the University of Edinburgh. It conducts research and provides analysis and commentary on child protection policy across the UK: in each jurisdiction and UK-wide.

A major focus of CLiCP’s work involves the tracking and analysis of the content and direction of child protection policy and developments across the UK. We intend to build incrementally towards a general overview of child protection in the UK over a two year period (2008 – 2010) by producing a series of papers, each based on analysis of a key aspect of child protection.

Overview

An important component of the overview will be comparative analysis of core UK child protection policy documents. A central plank of child protection policy is guidance on interagency working. This paper provides initial comparative information about the inter-agency child protection guidance current in each area of the UK at the time of writing (June 2008), as shown in Table 1 below. It provides a ‘snap-shot’ of the child protection procedures contained in each of the guidance. It is a baseline from which to develop a deeper and more complete picture of child protection systems and processes across the UK.

UK comparative information is provided on: the principles underlying the inter-agency guidance; where the locus of responsibility for child protection lies; the grounds for investigating concerns; referral processes and emergency procedures; measures for investigation; case conferences, case management and review processes; procedures to deal with appeals and complaints. It also briefly covers: guidance on individuals who pose a risk of harm to children:

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<th>Inter-agency Guidance</th>
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<td>N. Ireland: Department of Health, Social Services and Public Safety, Co-operating to Safeguard Children, 2003</td>
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information sharing, record keeping and confidentiality; and guidance on procedures to be followed if a child dies or is seriously injured. Appendix 1 provides the comparative information in table form.

Inter-agency guidance for Northern Ireland, Wales and England has been updated within
the last five years. In England and Wales guidance was updated to take account of new statutory duties introduced under the Children Act 2004, and in response to the recommendations of the Laming Inquiry. Northern Ireland and Scotland have not introduced new legislation. The Children (Northern Ireland) Order 1995 remains the key piece of legislation in relation to the protection of children; inter-agency guidance there was updated in 2003, again to take account of Lord Laming’s recommendations. In Scotland the Children (Scotland) Act 1995 remains the key piece of legislation. Despite a three year programme of child protection reform, Scotland’s inter-agency guidance has not yet been updated and is 10 years old.

Principles

All four guidance documents are based on a set of underlying principles. They have in common principles relating to: the child’s welfare being paramount; the child’s right to be involved in the process; and the need for agencies to work together (the principles are set out in full in Appendix 1).

The Northern Ireland guidance has a number of principles not found in the other three documents; including (1) that:

‘A proper balance must be struck between protecting children and respecting the rights and needs of parents and families; but where there is a conflict the child’s interests are paramount’.

(2) that ‘Children and families have equal access to services across the region’; attempting to ensure that children in need of protection receive the same response regardless of where they live in Northern Ireland.

Responsibility for Child Protection

The Children Act 2004 requires each local authority in England and Wales to establish a Local Safeguarding Children Board (LSCB). LSCBs are key mechanisms for agreeing how relevant organisations will co-operate to safeguard and promote the welfare of children and for ensuring the effectiveness of what these organisations do. The English and Welsh guidance includes guidance on the role of LSCBs.

In Northern Ireland there is a requirement for there to be an Area Child Protection Committee (ACPC) in each Health and Social Services Board. Their role is to determine the strategy for safeguarding children and to develop and disseminate policies and procedures. In addition, each Health and Social Services Trust should have a Child Protection Panel (CPP) to facilitate practice at a local level. The guidance provides information on the role of ACPCs and CPPs.

In Scotland, Child Protection Committees (CPCs) are responsible for local inter-agency procedures. The guidance on the operation of Child Protection Procedures stated in Protecting Children - a Shared Responsibility: Guidance on Inter-Agency Co-operation, 1998 no longer applies; new guidance was produced as part of the work of the Child Protection Reform programme.

The English and Welsh guidance covers agencies with statutory responsibilities for child protection and services contracted by them; including chief officers, managers and practitioners in bodies named in the Children Act 2004 and services contracted out by them as follows:

- Local authorities
- NHS trusts
- All health services and health service providers in the NHS and independent settings
- The police including British Transport Police
- Probation and prison services
- Youth offending teams
- Bodies providing secure care for children and young people and in England, connexions.

The guidance also covers other agencies with no statutory responsibilities under the Children Act 2004, but who may have a key role to play in child protection. This includes education services (all schools including independent and maintained schools and FE institutions), early years and child care services, housing services, youth services, cultural and leisure services, alcohol and drug services, the voluntary and
independent sector, the armed services, faith communities etc.

The Northern Ireland guidance outlines the roles and responsibilities of: Health and Social Services Boards and Trusts; social services staff, health professionals and agencies, including those in the private sector; education services, independent schools, youth service, day care/after school services; the police, probation service, prison service; the voluntary and community sector, NSPCC; housing agencies, the Northern Ireland Guardian Ad Litem Agency, the wider community, local government and the armed services.

The Scottish guidance outlines the roles and responsibilities of all agencies working with children and families in the statutory, voluntary and independent sector including local authority social work services and criminal justice services, the police, the Children’s Reporter, the Procurator Fiscal, health professionals, education professionals and school staff, and staff in other local authority departments such as housing, and leisure and recreation. It also covers churches and voluntary organisations, the armed services and day care services.

Grounds for Child Protection Investigation

Definition of a child

In all four documents, the definition of a child is someone up to the age of 18. The child protection procedures relate to a person under 18 of whom there are concerns.

Significant harm

In England, Wales, Scotland and Northern Ireland legislation stipulates that if statutory services have reasonable cause to suspect that a child is suffering, or likely to suffer, ‘significant harm’ they have a duty to make child protection enquiries. If statutory services do not suspect a child is suffering or likely to suffer significant harm they may still have a duty to assess the child’s level of need and provide him or her with services - but the case will not be investigated under child protection procedures.

Significant harm is not well defined in legislation. While the concept of significant harm is discussed in all four inter-agency guidance documents, each of the guidance also states that there are no absolute criteria upon which to rely when judging what constitutes significant harm. The Northern Ireland guidance provides a useful diagram outlining significant harm criteria; and all four documents conclude that the concept will involve ill treatment, harm or lack of care which impacts on a child’s health and development.

Definitions of abuse and neglect

All four documents use the categories and offer definitions of: physical abuse (in Scotland physical injury); emotional abuse; sexual abuse; and neglect (in Scotland physical neglect). The definitions are similar across the four documents with minor variations:

- In the English and Welsh guidance the definition of physical abuse specifically mentions that a parent or carer may fabricate or induce illness in a child; this is not covered in the definition of physical abuse in the guidance for Scotland or Northern Ireland.

- The guidance for Northern Ireland and Wales (but not England or Scotland), specifically states that domestic abuse, parental mental health problems and parental substance misuse may expose children to emotional abuse. Although the English definition of emotional abuse does not specifically refer to these issues, it does include procedures to be followed in relation to domestic abuse and parental substance misuse (see section below on protecting children in specific circumstances).

- Unlike the other three, the English guidance specifically mentions involving children or young people in prostitution within its definition of sexual abuse. The guidance for Wales and Northern Ireland do however, outline procedures to be followed in relation to exploitation through prostitution (see section below).

- The English guidance states that neglect may occur during pregnancy as a result of maternal substance misuse; this is not referred to in definitions of neglect in the other three documents although the guidance for Wales and Northern Ireland...
provides guidance on parental substance misuse (see below).

- The Scottish guidance includes ‘non-organic failure to thrive’ as a category for registration – where children fail to meet developmental milestones and physical and genetic reasons have been eliminated.

Child Protection and Safeguarding

The English and Welsh inter-agency guidance provide definitions of the concepts of (1) ‘child protection’ and (2) ‘safeguarding and promoting the welfare of children’.

‘Safeguarding and promoting the welfare of children’ is defined in both as:

‘Protecting children from maltreatment; preventing impairment of children’s health or development and ensuring that children are growing up in circumstances consistent with the provision of safe and effective care and undertaking that role so as to enable those children to have optimum life chances and to enter adulthood successfully’.

Child protection is defined in both as:

‘a part of safeguarding and promoting welfare’. It ‘refers to the activity that is undertaken to protect specific children who are suffering, or are at risk of suffering, significant harm’.

The inter-agency guidance for Scotland and Northern Ireland do not include definitions of either ‘child protection’ or ‘safeguarding and promoting the welfare of children’.

Protecting children in specific circumstances

In addition to categories and definitions of abuse and neglect, the four inter-agency guidance documents also provide guidance about specific circumstances where children may be considered to be particularly vulnerable. Table 2 below compares these specific circumstances. Unlike the section above which highlighted that variation was minor across the documents with regard to the protection of children in specific circumstances, variation in relation to specific circumstances was more considerable.

Child Protection Processes

All four documents outline the procedures for
handling individual cases. The broad stages of the process – referral, investigation and assessment, case conference, case management and review - are the same in each of the jurisdictions in the UK. Within these stages, however, there are some distinctive features.

Referral

The first phase of the child protection process is the referral stage. Referral processes are broadly similar across the UK; any person with concerns about a child (whether a professional or member of the public) can report their concerns to the statutory services - in England and Wales this is local authority social care services; in Northern Ireland, social services, and in Scotland social work. In Scotland, a professional or a member of the public is also able to refer to the Children’s Reporter. The Reporter will make enquiries into the concern and if a decision is made that the child is in need of compulsory measures of care, the case will be referred to a children’s hearing.

No area in the UK has yet introduced a mandatory reporting system. However, professionals are subject to child protection policies and procedures within their own organisation.

Following referral, Local Authority social care/services/work services, screen referrals. Legislative grounds for intervention define the circumstances and the threshold at which the statutory child protection system is legally required to intervene to protect a child (grounds outlined above). Referral may result in a number of routes being followed, including: no further action; emergency action to protect the child; further investigation. Or, where the child is considered to be in need, but not considered to be at risk of significant harm, it may lead to referral to another part of the service for family support.

Referrals are most often made by telephone. In Northern Ireland telephone referrals from professionals must be followed up in writing within 24 hours. In England and Wales guidance states this should be done within 48 hours. Guidance in Scotland does not specify that referrals from professionals should be followed up in writing.

There are minor differences between UK areas about when and how to inform and involve police:

- The Northern Ireland guidance states that where the concern may constitute an offence, police should be informed immediately
- The England and Wales guidance states that where the concern may constitute an offence, police should be informed at the earliest opportunity
- The Scotland guidance states that police should be informed where the level of concern is sufficient to warrant consideration of child protection procedures. No timescale is given for this.

Emergency procedures

Emergency procedures to protect children believed to be in immediate danger exist in all four countries. These may be invoked at any point in the process. Emergency procedures are similar across the UK. All four countries have Emergency Protection Orders (in Scotland - Child Protection Orders), Exclusion Orders/requirements and Police protection powers.

In Northern Ireland, England and Wales the guidance states that emergency procedures should normally be taken following legal advice and a strategy discussion between the police, social services/social care and other agencies as appropriate. In Scotland, the need for legal advice or a strategy discussion is not mentioned in the guidance.

Investigation

Once a decision has been made that a child may have suffered or is at risk of suffering significant harm, the next stage of the process is investigation. The initial investigation process is similar in all four UK areas.

In all areas, initial inquiry normally involves joint police/Social care/services/work investigation. In Northern Ireland, England and Wales the NSPCC also has power to investigate. In Scotland the Scottish Children’s Reporters Administration has power to make enquiries.

Timescales: In England and Wales LA Social/services/care must decide and record their
next steps of action within one working day following discussion with other agencies. The Scottish guidance states that local authorities should make initial enquiries and consult with other agencies but no timelines are given.

In Northern Ireland, England and Wales, initial assessment must be completed within seven days to determine whether or not a child is in need and whether there is reasonable cause to suspect the child is suffering or likely to suffer significant harm.

Further, in Northern Ireland an initial plan should also be developed and where necessary a second stage of assessment should be completed within 15 days. Further assessment is also required in England and Wales where LA social care may have a duty to undertake a more in depth care assessment depending on the results of the initial assessment (see case management and review section below).

**Involvement of children and families:** In Northern Ireland the guidance stipulates that the child should be spoken to within 24 hours. The guidance also states that the parents’ or child’s permission should be sought, where appropriate, before discussing referral with other agencies.

In England and Wales the guidance states that when conducting the initial assessment the child must be spoken to as well as other family members as appropriate; also that information must be obtained from other agencies.

In all four areas the guidance states that reasonable efforts should be made to persuade parents to co-operate with enquiries. If parents refuse access to the child for the purposes of assessment, the local authority may apply for a Child Assessment Order. The Order does not take away the child’s own right to refuse to participate in an assessment.

**Strategy discussion:** The guidance for England, Wales and Northern Ireland stipulates that whenever there is reasonable cause to suspect a child is suffering or likely to suffer significant harm, a strategy discussion involving LA social care/social services, the police, and other bodies as appropriate, should be initiated by LA social care/social services at the earliest opportunity. The strategy discussion may be in person or by phone and more than one strategy discussion may be necessary. The Scottish guidance states that local authorities should consult other agencies. There is no specific mention of a ‘strategy discussion’.

**Case conference**

Following initial investigation, if the child is still considered to have suffered, or to be at risk of suffering, significant harm, the next stage is to convene an initial child protection case conference. This is the same in all four UK areas. In Northern Ireland, England and Wales, a child protection case conference must be convened within 15 days of the first strategy discussion. In Scotland the guidance states that a case conference should be called following a planning meeting. No time lines are specified.

There are some variations in guidance in terms of how the case conference should operate in practice. Procedures for England and Wales are identical. In all four areas the guidance states that the chair must be senior and trained; in addition in England and Wales he or she should be independent of operational and line management responsibilities for the case. In Scotland the chair should not have first line management responsibility for decision making about the case.

There are slight differences concerning provision of written reports:

- In Northern Ireland the guidance states that all invited to the case conference should provide a written report
- The English and Welsh guidance states that a report should be submitted by those invited but unable to attend, and by LA children’s social care staff. Other contributors should provide a report where possible
- The Scottish guidance states that those unable to attend should send information, normally in writing.

There are slight variations in guidance about minuting case conferences:

- In England, Wales and Northern Ireland the guidance states that minutes should be
taken by a trained note taker; the Scottish guidance does not mention this

- In England and Wales the guidance states that a copy of the minutes must be sent to everyone invited as soon as possible; the conference decisions must be shared within one day. The Northern Ireland guidance states that the minutes must be sent to all invitees within 14 days. Scottish guidance does not mention when minutes should be sent out

- The English and Welsh guidance state that the minutes are confidential and not to be shared with third parties without the consent of the chair or key worker; this is not covered in the Northern Ireland or Scottish guidance.

There is some variation in what happens if the case conference decides a child has suffered or is at risk of suffering significant harm. In all four areas a child protection plan must be developed. The category of abuse must be determined (see definitions of physical abuse, emotional abuse, sexual abuse and neglect above). In Northern Ireland and Scotland the child’s name must also be placed on the child protection register. England and Wales no longer have child protection registers and a child is ‘registered’ if he or she has a child protection plan.

Case management and review

The case management process is essentially the same across the four areas of the UK. There are minor differences in timescale and procedures for review. Procedures for case management responsibility are broadly similar, again with minor differences:

- In England and Wales the case conference must appoint a lead statutory body to manage the case; plus a key worker and a core group which can consist of family members as well as professionals

- In Northern Ireland the chair must appoint a case co-ordinator and identify a core group; the guidance does not specify whether family members can be part of the core group

- In Scotland a key worker should be appointed by the social work service, plus a core group of professionals

- In England and Wales the guidance states that the first meeting of the core group must take place within 10 days; timelines are not given in the guidance for Scotland or Northern Ireland

- In England, Wales and Northern Ireland the key worker/coordinator has responsibility for developing the child protection plan into a comprehensive inter-agency plan; the Scottish guidance does not state that the child protection plan must be developed into a more detailed plan.

In all four areas the guidance states that the key worker/coordinator must also complete a detailed assessment of the child’s needs - a comprehensive assessment in Northern Ireland and Scotland; a core assessment in England and Wales. In England and Wales the guidance states the assessment must be completed within 35 working days; no timelines are given for Scotland or Northern Ireland.

In relation to processes of review, all four documents state that the first review should take place within three months. Subsequent reviews should take place at intervals of no more than six months in all cases.

Appeals and complaints

Appeals and complaints procedures are similar in England, Wales and Northern Ireland. In England and Wales, parents and children can appeal against becoming the subject of a child protection plan and all case conference participants have a right to complain if they are unhappy with the procedures.

In Northern Ireland parents can appeal against registration. Case conference participants have a right to complain if they feel procedures have not been followed or information is incorrect.

Procedures are somewhat different in the Scottish guidance. This states that parents who are concerned about accuracy of information on the register can discuss concerns with the manager of the social work service. The guidance also states that if parents refuse to cooperate with the child protection plan they should be informed of the complaints procedure; they also mention that Child Protection Committees should consider a
mechanism for parents to challenge decisions taken at a conference. Nothing is included about a right to complain for professionals attending the case conference.

**Individuals Who Pose a Risk of Harm to Children**

In England, Wales and Northern Ireland, the inter-agency guidance contains a chapter on adults who may pose a risk to children in the community; it also addresses issues of risk assessment and management. In England and Wales Multi Agency Public Protection Arrangements (MAPPA) are discussed.

Scottish guidance does not include a separate chapter on individuals posing a risk to children in the community. However, it does state that local authority criminal justice services have responsibilities for the supervision and management of risk from adults who have committed offences against children.

**Information-sharing, Record-keeping and Confidentiality**

All four documents contain guidance on information sharing, record keeping and confidentiality. All include information on procedures to be followed if a child moves. The English and Welsh guidance also provides guidance on children who go missing from education.

The English and Welsh guidance states that each local authority should designate a manager responsible for ensuring that the records of children who have a child protection plan:

- Are kept up to date; ensuring enquiries about children for whom there are concerns or who have a child protection plan, are recorded
- To manage notifications of movement of children into or out of the local authority area
- To manage notifications of people who may pose a risk of significant harm to children
- To manage requests for checks to be made to ensure unsuitable people are prevented from working with children.

Uniquely in Northern Ireland, the custodian of the child protection register is responsible for instigating action to trace families on the register who go missing.

In Northern Ireland and Wales there are separate chapters on information sharing. The guidance covers medical and nursing information, social work information and disclosure of information about sex offenders. The Welsh guidance covers all staff and volunteers working with children and young people including health, education, early years and childcare, social care, youth offending, police, advisory and support services and leisure.

**Guidance on Procedures to be Followed if a Child Dies or is Seriously Injured**

In Northern Ireland, England and Wales Inter-agency guidance includes guidance on procedures to be followed if a child dies or is seriously injured. In England and Wales it is the role of Local Safeguarding Children Boards (LSCBs) to conduct a serious case review if a child dies and abuse or neglect is suspected to be a factor in the death. A serious case review should also be considered in other circumstances, for example: where a child sustains life threatening injury or serious impairment of health and development through abuse or neglect; where they have been subjected to particularly serious sexual abuse; where a parent has been murdered and a homicide review is being initiated; where a child has been killed by a parent with a mental illness; where the case gives rise to concerns about inter agency working to protect children from harm.

In Northern Ireland, the Area Child Protection Committee has responsibility to undertake a case management review. The circumstances under which a case management review should take place are similar to those in England and Wales. However, the Northern Ireland guidance does not list where children have been subject to particularly serious sexual abuse, where a parent has been murdered and a homicide review is being initiated, or where a child has been killed by a parent with a mental illness.
The child death review process is not yet covered in the Scottish inter-agency guidance.

**Other Areas Covered by the Guidance**

All four documents include chapters or sections on staffing issues and training of staff. The English and Welsh guidance has chapters on the principles of working with children and families. The Northern Ireland guidance has a section on involving children. The English and Welsh guidance also includes an Appendix on the framework for the assessment of children in need and their families and one on the use of questionnaires and scales to evidence assessment and decision making. It also has sections on allegations of harm arising from under age sexual activity. The Welsh guidance also has a chapter on the impact of abuse and neglect. The English guidance has a chapter on lessons from research and inspection and requests for a change of worker.

**Conclusion**

This paper demonstrates broad similarities between each area’s response to child protection concerns; England and Wales have almost identical procedures. The core child protection activities being undertaken by practitioners - referral, investigation, assessment, case management and review are very similar across the UK. The scope of the paper did not enable a detailed comparison of models of child protection service delivery in the UK, however, and a more detailed investigation of each area’s policies and procedures is now required.

This paper has provided a ‘snap shot’ of child protection policy and processes across the UK in order to provide base line information for policy makers, practitioners and researchers. Some of the issues such as the role of LSCBs/ACPCs/CPCs, procedures to be followed where a child dies or is seriously injured, procedures in relation to individuals who pose a risk to children, the process of assessment, information sharing, record keeping and confidentiality and workforce issues, have only been briefly mentioned and will be explored in more depth in future CLiCP papers.
## Appendix 1: Inter-agency Child Protection Guidance: A UK Comparison

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<th>Northern Ireland</th>
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| Principles | - The child’s welfare must be paramount and this overrides all other considerations  
- A proper balance must be struck between protecting children and respecting the rights and needs of parents and families; but where there is a conflict, the child’s interests are paramount  
- Children have a right to be heard, to be listened to and to be taken seriously. Taking account of their age and understanding they should be consulted and involved in all matters and decisions which may affect their lives  
- Parents/carers have a right to respect and should be consulted and involved in matters which concern their families  
- Children and families have equal access to services across the region  
- Actions taken to protect a child, including investigation, should not cause the child harm | Work to safeguard and promote the welfare of children should be  
- Child-centred  
- Rooted in child development  
- Focused on outcomes for children  
- Holistic in approach  
- Ensuring equality of opportunity  
- Involving of children and families  
- Building on strengths as well as identifying difficulties  
- Multi and inter agency in approach  
- A continuing process not an event  
- Providing and reviewing services  
- Informed by evidence. | The guidance states that three main themes appear in Scottish children’s legislation  
- The welfare of the child is the paramount consideration when his or her needs are considered by courts, children’s hearings and local authorities  
- No court should make an order relating to the child and no children’s hearing should make a supervision requirement unless the court considers that to do so would be better for the child than making no order or supervision requirement at all  
- The child’s views taking appropriate account of age and understanding should be taken into account where major decisions are to be made about his or her future.  
The guidance also states that  
- In acting to protect a child, including making inquiries into allegations that a child has | Welsh Assembly Government has 7 core aims for CYP to ensure  
- “Flying Start”  
- Education  
- Best health, “free from abuse, victimisation and exploitation”  
- Access to play, cultural activities  
- Listened to and respected  
- Safe home and community  
- “not disadvantaged by poverty.” |
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| unnecessary distress or add to any damage already suffered | - Intervention should not deal with the child in isolation; the child must be considered in a family setting, with the impact of concerns also informing an assessment of the needs of other children within the family.  
- Where it is necessary to protect the child from abuse, alternatives should be explored which do not involve moving the child and which minimise disruption of the family.  
- Actions taken by agencies must be considered and well informed so that they are sensitive to and take account of the child’s age, gender, stage of development, physical or mental disability, religion, culture, language, race and, in relation to adolescents, sexual orientation.  
- All agencies concerned with the protection of children must work together on an inter-agency basis in the best interests of children and their families.  
- Each agency must have an understanding of each other’s professional values and accept their relative roles. | been harmed, agencies should avoid causing the child undue distress or adding unnecessarily to any harm already suffered by the child.  
- Agencies should make sure that children who may be at risk of significant harm receive the highest priority and a speedy response to their problems.  
- All agencies providing services and support to children and their families should have an understanding of the other agencies’ roles, responsibilities and legal powers, and should share information about the circumstances and needs of any child and the family where necessary.  
- They should have regard to a child’s religion, race, culture and linguistic background, stage of development, gender, age and any disability, when deciding what help or services to give a child. | Assembly Government and its partners, and between those partners and children, young people and their families and communities. The aim is to move to a position, both locally and nationally, where:  
- The well-being of children and young people is at the heart of the Welsh Assembly Government’s policy for children and their families as set out in Children and Young People: Rights to Action (2004), which aims to make sure that all key people and bodies working in partnership to achieve shared outcomes;  
- Clear overall accountability exists for services;  
- Key local services are integrated, where appropriate, around the needs of children and young people; and children and young people are actively involved in developing and evaluating the services which are provided for them;  
- Key people and bodies work well individually and together through universal, targeted and specialist services to safeguard and promote the welfare of children; and  
- Children, young people and their families receive effective support at the first sign of difficulties.” |
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<td>Definition of a child</td>
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<td>Definitions of abuse, neglect etc</td>
<td>Definitions of child abuse, physical abuse, emotional abuse, sexual abuse and neglect; discussion of significant harm.</td>
<td>Definitions of safeguarding and promoting the welfare of children, child protection, abuse and neglect; physical abuse, sexual abuse, emotional abuse and neglect; discussion of significant harm.</td>
<td>General definition of abuse plus definitions of physical injury, sexual abuse, non-organic failure to thrive, emotional abuse and physical neglect; no discussion of significant harm.</td>
<td>Definitions of abuse, emotional abuse, neglect, physical abuse, sexual abuse child in need; child protection; safeguarding and promoting the welfare of children, significant harm.</td>
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<td>Scope - agencies covered by guidance</td>
<td>Health and Social Services Boards; Health and Social Services Trusts; Social Services; Health (all health professionals and agencies including those in the private sector - hospital services, community services, forensic medical officers and paediatricians, GPs and the primary health care team, midwives and health visitors, mental health services); Education; Youth Service; Day care/after school services; Police; Probation Service; Prison Service, Voluntary and Community Sector; NSPCC; Housing agencies; Guardian and Litmus agency; Wider community; Local Government; the Armed Services.</td>
<td>Table A page 223 outlines bodies covered by statutory duties; Local authorities that are children’s services authorities; County level LA’s, unitary authorities, district councils; All health services and health service providers in the NHS and independent healthcare settings; NHS bodies - Strategic Health Authorities, designated Special Health Authorities, Primary Care Trusts, NHS Trusts and NHS Foundation Trusts, Mental Health Trusts, Ambulance Trusts and NHS Direct sites; GPs, dental teams, school nurses, maternity services, child and adolescent mental health services, adult mental health services, clinical psychologists, staff in pento-urinary medicine services, obstetric and gynaecological staff, occupational therapists, physiotherapists, staff in sexual health services, speech and language therapists,</td>
<td>All agencies working with children and families in the statutory, voluntary and independent sector; social workers, medical and nursing staff and other health professionals - GPs, hospital and community based doctors and nurses, health visitors, school nurses, teachers; Educational and clinical psychologists; Community education workers; Children’s Reporter; Procurators Fiscal; Police; staff of voluntary organisations; the Armed Services; day care services including out of school care and holiday clubs; child minders; housing and leisure and recreation; churches.</td>
<td>Those with statutory responsibilities - Chief Officers and all managers and practitioners in bodies named in sections 25 and 31 of the Children Act 2004 and services contracted out by them, e.g. local authorities, health authorities, NHS trusts with all or most of facilities in Wales, Police Authority and chief officer of police, British Transport police Authority, Local probationary board, Youth offending team, Governor or prison or secure training centre in Wales or Director of such services contracted out, “any person to the extent he is providing services pursuant to arrangements made by a children’s services authority in Wales under section 120(1)(b) of the Learning and Skills Act 2000 (c. 21) (youth support services) Also included in the guidance but not in the Children Act 2004.</td>
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<td>optometrists, pharmacists, other professionals allied to medicines; the police (including the British Transport Police); probation and prison services; The secure estate for children and Young People; Youth Offending Teams; Secure Training Centres; Connexions. Also included in the guidance but not in the Children Act 2004 are: Education including maintained (state schools), FE colleges, sixth form colleges, independent schools, academies and technology colleges; childcare services: The Children and Family Court Advisory and Support Service (CAFCASS); NSPCC; Housing authorities and registered social landlords; Sport, culture and leisure services; Youth services; Alcohol and Drug services; the Armed Services; the Voluntary and private sector; Faith communities.</td>
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<td>Education Services - all schools, including independent schools, non-maintained schools and FE institutions; Youth services; Cultural and leisure services; Early years and childcare including family centres; children’s centres, nurseries (including workplace nurseries), childminders, playgroups and holiday and out of school schemes; Licensing authorities Housing authorities and registered social landlords including housing and homelessness staff; Environmental health officers; the fire service, the Welsh Joint Education Committee and FE and HE bodies; the Voluntary and independent sector that provide services to CYP; Immigration service; National Asylum Support Service; Armed services; The Children and Family Court Advisory and Support Service (CAFCASS); The Care Standards Inspectorate for Wales; The Children’s Commissioner for Wales; Faith communities: The wider community.</td>
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<td>Role of LSCBs/ACPCs</td>
<td>There should be an ACPC in each Board area to determine the strategy for safeguarding children and to develop and disseminate</td>
<td>The Children Act 2004 requires each LA to establish a Local Safeguarding Children’s Board (LSCB) which is the key statutory mechanism for agreeing how CPCs prepare and review local inter-agency procedures. Circular SMWG 14/97 is attached at Annex A, but has been replaced by</td>
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<td>The Local Safeguarding Children’s Board (LSCB) is the key statutory mechanism for agreeing how the relevant organisations will co-operate to</td>
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<td>policies and procedures. In each community based trust there should be a Child Protection Panel (CPP) to facilitate practice at a local level. The ACP C and its chair are accountable to the HSS Board.</td>
<td>the relevant organisations will co-operate to safeguard and promote the welfare of children, and for ensuring the effectiveness of what they do.</td>
<td>new guidance for CPC's.</td>
<td>safeguard and promote the welfare of children in that local authority area, and for ensuring the effectiveness of what they do.</td>
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<tr>
<th>Child protection processes</th>
<th>Diagram of process on page 60</th>
<th>Diagrams of process on pages 142-146</th>
<th>No diagram</th>
<th>Diagrams of process on pages 215-219</th>
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<td>Key stages:</td>
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<td>Referral to social services</td>
<td>Referral to LA children's social care</td>
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<td>Child Protection Case Conference</td>
<td>Child protection plan - a lead statutory body should be appointed plus a key worker and a core group</td>
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<td>Child Protection Plan - case co-ordinator and core group.</td>
<td>Comprehensive assessment</td>
<td>Case review.</td>
<td>Children's Hearing</td>
<td>Child protection plan - lead statutory body should be appointed plus a key worker and a core group</td>
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<p>| Guidance in relation to specific circumstances | Stranger abuse; children living away from home; allegations of abuse by a professional carer or volunteer; organised abuse; abuse of children with disabilities; children who sexually abuse others; bullying; domestic violence; substance abuse; commercial sexual exploitation of children; the role posed by developments | Children abused through prostitution; fabricated or induced illness; investigating complex (organised or multiple) abuse; female genital mutilation; forced marriage; allegations of abuse made against a person who works with children; children living away from home; abuse of disabled children; abuse by children and children and families affected by disability; abuse by organised networks or multiple abusers; children living away from home; abuse by children or young people; child abuse outwith the family (i.e. stranger abuse); children on international visits. | Children living away from home; Race and racism; Bullying; Foster care including Private Fostering; Organised or Multiple Abuse; Children in hospital; Children in custody; Disabled children; Abuse by children and young people; Lack of parental control; Domestic Abuse; Sexual exploitation of children; Child abuse images, the internet and | |</p>
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<td>in communications technology; Sudden Unexpected Death in Infancy; Visiting of psychiatric patients by children; children of prisoners; children in prison and children in custody.</td>
<td>young people (includes bullying); children whose behaviour indicates a lack of parental control; race and racism; domestic violence; children of drug missing parents; child abuse linked to belief in ‘possession’ or ‘witchcraft’ or in other ways related to spiritual or religious belief; child abuse and information communication technology (ICT); children and families who go missing (includes missing from education); children living in temporary accommodation; migrant children; child victims of trafficking; unaccompanied asylum-seeking children; Visiting of psychiatric patients by children; babies in prison; safety of children who are privately fostered.</td>
<td>Information technology; Fabricated or induced illness; Children of substance missing parents; Child abuse linked to belief in ‘Possession’ or ‘witchcraft’ or in other ways related to spiritual or religious belief; Children and families who go missing - looked after children who runaway or go missing from their care placement; Children who go missing from education; Children of Families living in temporary accommodation; Migrant children; Child victims of trafficking; Unaccompanied Asylum seeking children; Female genital mutilation; Forced marriage; Allegations of Abuse or Causes of Concerns about a person who works with children.</td>
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Guidance in relation to the management of individuals who pose a risk of harm to children

There is a chapter on offenders against children.

There is a chapter on managing individuals who pose a risk of harm to children.

No separate chapter/section but states that local authorities; criminal justice services have responsibilities for the supervision and management of risk from adults who have committed offences against children; states there may need to be a separate child protection plan for work with perpetrators of abuse and that professionals working with perpetrators of abuse should cooperate with the keyworker in preparing the...
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<td>Guidance on record keeping, confidentiality and information sharing</td>
<td>There is a chapter which includes sections on record keeping, record retention and destruction and guidance on confidentiality and information sharing covering medical and nursing guidance, social work guidance and disclosure of information about sex offenders. There is a section on children and families who move setting out the responsibilities of both areas and handover procedures.</td>
<td>The chapter on handling of individual cases mentions information sharing. It states that each LA should designate a manager with responsibility for ensuring the records of children who have a child protection plan are kept up to date, ensuring enquiries about children about whom there are concerns, or who have a child protection plan, are recorded, to manage notifications of movement of children into or out of the LA area, managing notifications of people who may pose a risk of significant harm to children, and managing requests for checks to be made to ensure unsuitable people are prevented from working with children. There is guidance in relation to sharing information re the IT system. There is also a section on recording and information about the Integrated Children’s System (ICS) for children for whom there is a children’s plan.</td>
<td>There is a section on agencies’ responsibilities to share information about children’s hearings and supervision requirements. There is a section on sharing information and a section on recording. There is information about transfer of records when a child moves.</td>
<td>There is a chapter on information sharing which covers confidentiality and record keeping aimed at all services working with children and young people. The guidance also states that each LA should designate a manager with responsibility for ensuring the records of children who have a child protection plan are kept up to date, ensuring enquiries about children about whom there are concerns, or who have a child protection plan, are recorded, to manage notifications of movement of children into or out of the LA area, managing notifications of people who may pose a risk of significant harm to children, and managing requests for checks to be made to ensure unsuitable people are prevented from working with children.</td>
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<td>Guidance on procedures to be followed if a child dies or is seriously injured</td>
<td>There is a chapter on case management reviews - the ACCP has responsibility to undertake a case management review where a child dies, including death by suicide, and abuse or neglect is known or suspected to be a factor in the child’s death; it</td>
<td>There is a chapter on child death review processes - a sub committee of the LSCB should review information on all child deaths and be accountable to the chair. Unexpected child deaths should be investigated and if it is thought the criteria for a serious case review might</td>
<td>There is nothing on this in the guidance.</td>
<td>There is a chapter on serious case reviews. It is mandatory to for the LSCB to conduct a serious case review where abuse or neglect of a child is known or suspected and the child dies or sustains life-threatening injury or serious and permanent impairment of health</td>
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<td>should consider undertaking one where a child has sustained a potentially life threatening injury through abuse or neglect; has sustained serious and permanent impairment of health or development through abuse or neglect, or the case gives rise to concerns about the way in which local professionals and services worked together to safeguard children. The chapter sets out the procedures for undertaking a case management review. There is a diagram of the process on page 106.</td>
<td>apply the chair should be contacted and serious case review procedures followed. There is a separate chapter on serious case reviews which LSCBs are required to undertake where a child dies and abuse or neglect is suspected to be a factor in the death, they should also consider conducting one in other circumstances – where a child sustains life threatening injury or serious impairment of health and development through abuse or neglect, where they have been subjected to particularly serious sexual abuse, where a parent has been murdered and a homicide review is being initiated, where a child has been killed by a parent with a mental illness, where the case gives rise to concerns about inter agency working to protect children from harm. Diagram on page 160 explains the interface between child death and serious case reviews.</td>
<td>and development, or has been subjected to particularly serious sexual abuse; Or where the death is a child suicide; the child’s parent has been murdered and a domestic homicide review is conducted; the child has been killed by a parent with mental illness. The LCSB may also conduct a review if the child suffers harm and there may be concerns about inter agency working, local policies or procedures.</td>
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<tr>
<td>Anything else covered in the guidance</td>
<td>There is a section on involving children; there is a section on staffing issues covering recruitment and selection of staff, supervision and support; there is a section on inter agency training covering those who work directly with children in the voluntary, statutory and independent</td>
<td>There is a chapter on training and development for inter agency work; there is a section on allegations of harm arising from underage sexual activity; there is a section on request for a change of worker; there is a chapter on lessons from research and inspection and a chapter on implanting the</td>
<td>There is a section on staff selection, supervision, support and training.</td>
<td>There are chapters on the principles of working with children and their families inter agency training and development; the impact of abuse and neglect; the use of questionnaires and scales to evidence assessment and decision making is included in an appendix.</td>
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<td>sector.</td>
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<td>principle on working with children and their families which includes a section on family group conferences; Appendix 1 explains the legislation most relevant to work to safeguard and promote the welfare of children; Appendix 3 outlines the use of questionnaires and scales to evidence assessment and decision making.</td>
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