



Barking, Havering and Redbridge 
University Hospitals
NHS Trust

London Borough of Barking & Dagenham Children's Services Multi-Agency Safeguarding Meetings Matrix 2016

MULTI AGENCY SAFEGUARDING MEETINGS MATRIX 2016

Purpose

This document is to be used as Guidance for staff where there are meetings held to discuss the welfare of children. The matrix clarifies which meetings would be appropriate and who is responsible for organising, sending invitations and recording minutes of the meeting. In addition to this list there are also meetings held that are referenced in conversations across organisations and may form part of any decision making – see appendix 1.

Background

This document was created in response to a recommendation in Child B Serious Case Review (SCR) (June 2016).

The Meetings Matrix identifies

- the title of the meeting
- the legislative authority for the meeting
- the purpose of the meeting and who has departmental or statutory responsibility for making decisions in the meeting
- who is responsible for convening the meeting
- minimum requirements for conducting the meeting
- how the meeting will be recorded

Purpose of the Meetings

Whatever legislation the child is assessed under, the purpose of the assessment is always:

- to gather important information about a child and family
- to analyse their needs and/or the nature and level of any risk and harm being suffered by the child
- to decide whether the child is a Child in Need (CIN) (section 17) and/or is suffering, or likely to suffer, significant harm (section 47)
- to provide support to address those needs to improve the child's outcomes to make them safe
- to develop a robust multi-agency/multi-professional plan to effectively safeguard the child

Resolution of Professional Disagreements

Reference should be made to London Child Protection Procedures and the Barking & Dagenham Safeguarding Children Board Escalation Protocol. Where there is a conflict between the needs of the child and their parents/carers, decisions should be made in the child's best interests (Working Together 2015 Page 23).

It is essential that records of all meetings are an accurate, contemporaneous record of the discussion, decisions and actions agreed at the meeting, and copies of that record are provided to all professionals attending/invited. All meetings should include and demonstrate:

- a review of information from all partner agencies i.e. Health, Social Care, Police etc.
- have an identified Chair
- demonstrate the level of discussion and action points resulting from the meeting, or a review of actions from previous meetings

Voice of the Child

Every meeting must be informed by the views of the child as well as the family. Children should, wherever possible, be seen alone, and Local Authority Children's Social Care has a duty to ascertain the child's wishes and feelings regarding the provision of services to be delivered. It is important to understand the resilience of the individual child when planning appropriate services. 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.

| MEETING NAME | ACT / REGULATION | PURPOSE | MINIMUM REQUIREMENTS | CONVENED BY | RECORDING |
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| Initial Child Protection Conference (ICPC) | S47 Children Act 1989/2004 Working Together 2015 | Following a Section 47 enquiry, an initial child protection conference brings together family members (and the child where appropriate) with the supporters, advocates and professionals most involved | Local Authority Children's Social Care and at least two other professional groups or agencies which have had direct contact with each child who is the subject of the conference. In addition, attendees may also include those whose contribution relates to | Local Authority Children's Social Care. Should take place within 15 working days of the 1 st Strategy meeting/discussion | Local Authority Children's Social Care. Minutes distributed to attendees/staff who submitted reports via Local Authority. Minutes |

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| | London Child Protection Procedures (2016) Section 4.1 | with the child and family, to make decisions about the child's future safety, health and development. If concerns relate to an unborn child, consideration should be given as to whether to hold a child protection conference prior to the child's birth. | <p>their professional expertise or responsibility for relevant services. In exceptional cases, where a child has not had relevant contact with three agencies (that is, Local Authority Children's Social Care and two others), this minimum quorum may be breached. (London Child Protection Procedures 4.3.8)</p> <p>Attendees may include</p> <ul style="list-style-type: none"> • Conference Chair (Local Authority Representative, and this person should chair subsequent child protection reviews), a professional who is independent of operational or line management responsibilities for the case as Chair. The status of the Chair should be sufficient to ensure multi-agency commitment to the conference and the child protection plan. • The child or their representative. | <p>when section 47 enquiries were initiated.</p> <p>A professional observer can only attend with the prior consent of the Chair and the family, and must not take part in discussions or decision-making.</p> <p>A social worker should be the lead professional.</p> <p>The first review should be held within 3 months of the initial conference and further reviews at intervals of no more than 6 months for as</p> | placed in child's records (Health) |

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| | | | <ul style="list-style-type: none"> • Parents and those with parental responsibility. • Family members (including the wider family). • Foster carers (current or former). • Residential care staff. • Suitably qualified, Health and Social Care Professionals (HCPC registered), Domestic Violence Advisor, Local Authority Children's Social Care professionals who have led and been involved in an assessment of the child and family along with their first line manager. • Professionals involved with the child (e.g. health visitor, school nurse, paediatrician, GP, school staff, CAMHS, early years staff, education welfare officers). • Professionals with expertise in the particular type of harm suffered by the child or in the | <p>long as the child remains subject of a child protection plan.</p> | |

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| | | | <p>child's particular condition (e.g. a disability or long term illness).</p> <ul style="list-style-type: none"> • Those involved in investigations (e.g. the Police). • Involved third sector organisations. | | |
| Pre Birth Conference | <p>Children Act 1989/2004</p> <p>London Child Protection Procedures (2016) Section 4.1.11</p> | <p>This is an initial child protection conference concerning an unborn child.</p> <p>Such a conference has the same status and must be conducted in a comparable manner to an initial child protection conference.</p> <p>Held in circumstances where:</p> <ul style="list-style-type: none"> • A pre-birth assessment gives rise to concerns that an unborn child may have suffered, or is likely to suffer, significant harm. • A previous child has died or been removed from | <p>As per Initial Child Protection Conference.</p> <p>Minimum requirements:</p> <ul style="list-style-type: none"> • Local Authority Children's Social Care. • Relevant Midwife/Representative. • Parent/s • Health Visitor | <p>Local Authority Children's Social Care.</p> <p>The pre-birth conference should take place as soon as practical, and at least ten weeks before the due date of delivery, so as to allow as much time as possible for planning support for the baby and family. Where there is a known likelihood of a premature birth, the conference should be held earlier (4.1.16</p> | <p>Local Authority Children's Social Care.</p> <p>Minutes are distributed to attendees and any staff that have provided information.</p> <p>Where the Local Authority is considering proceedings shortly after birth, the timing of the sending of the pre-proceedings letter or letter of issue should take account of the risk of early birth and help to ensure that discussions</p> |

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| | | <p>parent/s as a result of significant harm.</p> <ul style="list-style-type: none"> A child is to be born into a family or household that already has children who are subject(s) of a child protection plan. An adult or child who is a risk to children resides in the household or is known to be a regular visitor. | | London Child Protection Procedures 2016). | and assessments are not rushed. Ideally the letter should be sent at or before 24 weeks (4.1.11. London Child Protection Procedures 2016) |
| Review Child Protection Conference | <p>Section 47 Children Act 1989</p> <p>Working Together 2015</p> | <ul style="list-style-type: none"> To provide information to enable informed decisions about what action is necessary to safeguard and promote the welfare of the child who is the subject of the child protection plan, and about the effectiveness and impact of action taken so far. Share the conference information with the child | <p>As per Initial Child Protection Conference.</p> <p>The Local Authority will notify as a minimum all agency representatives who were invited to attend the initial child protection conference that led to the plan and consider whether support services are still required, and discuss with the child and family what might be needed, based on a re-assessment of the child's needs.</p> | Local Authority Children's Social Care. | Local Authority Children's Social Care responsible for inviting, recording and distribution of minutes and sending notifications to -agencies on outcome. |

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| | | <p>and family beforehand, where appropriate.</p> <ul style="list-style-type: none"> Record conference outcomes. Decide whether to initiate family court proceedings if the child is considered to be suffering significant harm (all the children in the household should be considered, even if concerns are only expressed about one child). Discontinue the Child Protection Plan if necessary. <p>The child should no longer be the subject of a child protection plan if:</p> <ul style="list-style-type: none"> It <i>is judged that the child is no longer continuing to, or is likely to, suffer significant harm</i> and therefore no longer | <p>All professionals involved are required to:</p> <ul style="list-style-type: none"> Attend, when invited. Provide details of their involvement with the child and family. Produce reports for the child protection review. <p>This information will provide an overview of work undertaken by family members and professionals, and evaluate the impact on the child's welfare against the planned outcomes set out in the child protection plan.</p> | | |

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| | | <p>requires safeguarding by means of a child protection plan.</p> <ul style="list-style-type: none"> • The child and family have moved permanently to another Local Authority area. In such cases, the receiving Local Authority should convene a child protection conference within 15 working days of being notified of the move. Only after this event may the original Local Authority discontinue its child protection plan. • The child has reached 18 years of age (to end the child protection plan, the Local Authority should have a review around the child's birthday and this should be planned in advance), has | | | |

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| | | died or has permanently left the United Kingdom. | | | |
| Transfer In Conference | Section 47 Children Act 1989 Working Together 2015 London Child Protection Procedures (2016) Section 4.1.17 | Takes place when a child, who is the subject of a child protection plan, moves from the original Local Authority area to another Local Authority area to live there permanently, e.g. for a period of more than 3 months. Children's Social Care, designated health professionals and the Police should be notified promptly. | Local Authority Children's Social Care representatives and other relevant agencies as per ICPC. The transfer conference should receive reports from the original Local Authority and the original Local Authority should be invited to attend the conference. Such a conference has the same status and purpose and must be conducted in a comparable manner to an initial child protection conference | Local Authority Children's Social Care. Should take place within 15 working days of the notification. | Local Authority Children's Social Care are responsible for recording and distributing of minutes |
| Core Group Meeting | Children Act 1989 Section 47 Working Together 2015 | Further develop the outline child protection plan, based on assessment findings, and set out what needs to change, by how much, and by when in order for the child to be safe and have their needs met. | As agreed by the Child Protection Conference members. | Local Authority Chair of Initial Child Protection Conference and subsequent conferences. | Local Authority Children's Social Care are responsible for recording and distributing of minutes |

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| | | <p>To decide what steps need to be taken, and by whom, to complete the in-depth assessment to form decisions about the child's safety and welfare.</p> <p>To implement the child protection plan and take joint responsibility for carrying out the agreed tasks, monitoring progress and outcomes, and refining the plan as needed</p> | | <p>This meeting should be held within 10 working days from the initial child protection conference if the child is the subject of a child protection plan. After that the core group should meet within six weeks of the first meeting and at a minimum frequency of once every two months following the first review conference.</p> | |
| Child In Need (CIN) Meeting | <p>Children Act 1989 Section 17</p> <p>Chronically Sick and Disabled Persons Act (CSDPA) 1970 Section 2</p> | <p>To bring together the family, child and all of those professionals involved with them to:</p> <ul style="list-style-type: none"> • Collate and analyse in an inter-agency setting, the information about the child's health and | <p>Team Manager Children's Social Care or Senior Team Manager.</p> <p>Professionals involved with child/family.</p> | <p>Local Authority Children's Social Care</p> | <p>Local Authority Children's Social Care.</p> <p>Minutes will be recorded by the Team Manager and a copy of the Child in Need plan should be sent, with the minutes of the</p> |

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| | Working Together 2015 (Page 18) | <p><i>development and the parental capacity to promote the child's welfare.</i></p> <ul style="list-style-type: none"> • <i>Judge if the child is unlikely to achieve or maintain, or have the opportunity to achieve or maintain, a reasonable standard of health or development without the provision of services.</i> • <i>Judge if the child is likely to suffer Significant Harm.</i> If this is a decision of the meeting, a Strategy Discussion should be arranged immediately following the meeting. • <i>Decide what future actions are required to promote the child's welfare and what the intended outcomes are, including the</i> | | | meeting, to parents, child, and all involved professionals. |

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| | | <i>completion of the Single Assessment.</i> This would form the Child in Need Plan | | | |
| Partnership Meeting (Under Child In Need) | Children Act 1989 | Inter-agency meeting with parents/carers to consider concerns or issues that do not meet child protection thresholds and plan work with the child and family | Agency identifying issues responsible for identifying minimum requirements. Other professionals involved in the child/young person's care as appropriate. | Agency identifying issues requiring the meeting | Minutes by Agency convening the meeting |
| Professionals Meeting | Children Act 1989 | Provide the opportunity for professionals involved with the family to come together, not only to share information but also to help determine the direction of a case and plan for a child. This may be where there are concerns that the family is undermining attempts to understand the potential risks to the child, or where there is uncertainty about what steps are needed to protect the child. It may be appropriate to | Any agency that is involved with a child/young person can call a Professionals meeting. The meeting should bring together all those who can provide relevant information about the child/young person and family. | Any Agency who has safeguarding concerns | The convening agency is responsible for recording and ensuring the minutes are distributed to all attendees and, where appropriate, the family |

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| | | <p>inform the family in advance of the meeting; however, professional judgment will be needed as to whether this is appropriate in all situations.</p> <p>The meeting should focus on the outcomes for the child and family and form part of a continuous process of assessment, planning and implementation, and review across all levels of need, including early help.</p> <p>It is important that these meetings should not supplement nor replace existing good practice of engaging families with the aim to work in partnership.</p> | | | |
| Family Group Conferences (FGC) | Not covered by legislative authority, | A FGC is offered to any family referred by Tier 2 or 3 services, to help resolve a variety of | Family Group Conference Co-ordinator, Social Worker, child/ren, | FGC Co-ordinator from Local Authority Children's Social Care | It is the referrer's responsibility to agree the plan. Once agreed |

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| | however, the Children Act 1989 strongly reflects the key principles that underpin the FGC process and provides the impetus for using FGC in practice | family issues. The process focuses on the child. The conference looks at extended family and friends to provide support for families who are struggling to manage the care of their children. The family look at what they can do to resolve the issues/concerns. The group of people are given 'private time' to reach a plan to facilitate the safe care and protection of the child/ren in need. Ultimately the process sets out to empower the family to make decisions and take back responsibility. | parents, extended family and even significant friends and neighbours. Other professionals involved in the child/young person's care as appropriate. | | the Co-ordinator should distribute the plan to those who participated in the conference. |
| Legal Planning Meeting | Children Act 1989 Section 31 | When a Social Worker holds concerns about a child and believes that the threshold criteria might be met for an application for a Care or | Local Authority Representative, i.e. Social Worker/Team Manager Local Authority Solicitor/Legal Advisor | Local Authority Social Worker | The solicitor will provide minutes of the discussion at some point after the meeting. Parents or the Court are not entitled to minutes of |

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| | | Supervision Order under Section 31 of the Children Act 1989 | | | these discussions as they are considered “legally privileged” and remain confidential between the Social Worker and the solicitor. |
| Public Law Outline pre-proceedings meeting/review meeting | Public Law Outline April 2010 – Guide to Case Management in Public Law Proceedings | The Public Law Outline requires the Local Authority to arrange a meeting with the parents and their solicitor to see if it is possible to reach agreement about what needs to happen to protect a child from harm, so that court proceedings can be avoided | Parents, Parents Legal Advisor, Social Worker and their line manager, Legal Services Children’s Social Care | Local Authority following the issuing of PLO letter (letter before proceedings) to parents. | Local Authority. Minutes are taken outlining agreed action points, each with an agreed timescale and the identity of the person responsible for carrying them out |
| Multi-Agency Public Protection Arrangements (MAPPA) | MAPPA Guidance 2012 Criminal Justice Act 2003 Section 325(3) | Multi-Agency Public Protection Arrangements, or MAPPA, is the process through which the police, probation and prison services work together with other agencies to assess and manage violent and sexual offenders in order to protect the public from harm. | Police. Multi-agency professionals as per invite. Parents are invited. | Police and/or Probation Services | Police or Probation Services. Confidential minutes produced outlining agreed risk levels, action points, each with an agreed timescale and the identity of the person |

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| | Criminal Justice and Court Services Act 2000 Section 67 and Section 68 | <ul style="list-style-type: none"> Share information on convicted sexual and violent offenders returning to and living in the community, with a focus on identifying risk of re-offending, risk of serious harm issues and their imminence, which forms a multi-agency risk assessment. Assist to develop an effective MAPPA risk management plan. Make decisions about disclosure of information where appropriate. Ensure agency accountability. | | | responsible for carrying them out. Actions and minutes will be circulated to all invitees. |
| Multi-Agency Risk Assessment Conference (MARAC) | Not covered by legislative authority | A conference to discuss highest risk cases of Domestic Abuse which need multi-agency support, and puts plans in place for the victims (survivors). | Police representative. Health representatives. | Police with attendance of full multi-agency format. | Police. Restricted minutes produced which records |

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| | | <p>It addresses the safety and protection of the most at risk. This may be those at risk from serious assault or at risk of domestic homicide and high risk domestic abuse.</p> <ul style="list-style-type: none"> • Victims in an intimate partner relationship aged 16+ can be referred. • Share information to enhance the safety, health and well-being of victims both adults and their child/ren. • Agree a risk management plan. • Reduce repeat victimisation. • Improve support for staff involved in high risk domestic violence cases. | <p>Local Authority Children's Social Care representative.</p> <p>Housing representative.</p> <p>Probation Services.</p> <p>Independent Domestic Violence Advocate (IDVA)</p> | | <p>decision making and plan where appropriate.</p> |

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| | | <ul style="list-style-type: none"> Ensure agency accountability. | | | |
| Initial Strategy Discussion | <p>Working Together 2015 Page 31</p> <p>Chapter 4 of Court orders and pre-proceedings: For local Authorities (April 2014)</p> <p>London Child Protection Procedures (2016)</p> | <p>Local Authority Children's Social Care should convene the strategy discussion to determine the child's welfare, and to plan rapid future action if there is a reasonable cause to suspect the child is suffering, or is likely to suffer, significant harm.</p> <p>Where a single agency has to act immediately, a strategy discussion should take place as soon as possible after action has been taken.</p> <p>The discussion should be used to:</p> <ul style="list-style-type: none"> Share available information. Agree the conduct and timing of any criminal investigation. | <p>Local Authority Social Worker and their manager, Health Professional and a Police representative, as a minimum, should be involved in the strategy discussion.</p> <p>Other professionals will depend on the nature of the individual case but may include the professional or agency which made the referral, the child's school or nursery, and any health services the child or family members are receiving.</p> <p>Attendees should be sufficiently senior to make decisions.</p> <p>Parents are not invited</p> | <p>Local Authority Children's Social Care.</p> <p>Police.</p> | <p>Local Authority Children's Social Care.</p> <p>The social worker should ensure the discussions/decisions of the meeting are recorded on their databases immediately.</p> |

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| | | <ul style="list-style-type: none"> Decide whether enquiries under S47 of the Children Act 1989 should be undertaken. | | | |
| Strategy/Planning Meeting in relation to allegations against adults who work with children and young people | Children Act 1989/2004 Section 11 London Child Protection Procedures (2016) | Held when there is an allegation or concern that any person who works with children, in connection with their employment or voluntary activity, has: <ul style="list-style-type: none"> Behaved in a way that has harmed a child, or may have harmed a child. Possibly committed a criminal offence against or related to a child. Behaved towards a child or children in a way that indicates they may pose a risk of harm to children. | Local Children's Safeguarding Board Named Senior Officer. Designated Officer (DO), formally known as LADO. Police Detective Sergeant. Parents are not invited. | Local Authority Designated Officer or Police. The employer must inform the Designated Officer within one working day when an allegation is made and prior to any further investigation taking place. If an allegation requires immediate attention, but is received outside normal office hours, | Local Authority Designated Officer Information should be restricted to those who have a need to know in order to protect children, facilitate enquiries, manage related disciplinary or suitability processes |

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| | | The meeting should identify a lead contact manager within each agency and ensure that investigations are sufficiently independent, and agree dates for future strategy meetings/discussions | | <p>the designated senior manager should consult the Local Authority Children's Social Care Emergency Duty Team or local Police and inform the Designated Officer as soon as possible.</p> <p>Local Authority Children's Social Care should inform Ofsted of all allegations made against a foster carer, prospective adopter, or member of staff in a residential child care facility.</p> | |
| Round Table Meeting (BHRUT) | None – Best Practice | A BHRUT internal meeting where an incident occurs, risk is identified, and staff meet to discuss a particular subject, i.e. allegation against a member of | Deputy Chief Nurse, Lead for Safeguarding and Harm Free Care. Associate Director of Workforce. | All Safeguarding Round Table meetings are convened by Safeguarding Lead or | Minutes completed by Safeguarding Administrator. Minutes Restricted. |

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| | | <p>staff (see next section) or an incident.</p> <p>Participants agree on a specific topic to discuss and debate.</p> <p>Each person is given equal right to participate, as illustrated by the idea of a circular layout referred to in the term round table.</p> | Matron/Divisional Nurse/Divisional Manager. | representative of Safeguarding Team | |
| Round Table Meeting (BHRUT) in relation to Allegations against Staff/Volunteers who work with Children and Young People | <p>Children Act 1989/2004 Section 11</p> <p>London Children Protection Procedures (2016) Chapter 7</p> | <p>Meeting is held to explore circumstances surrounding the concern/allegation as per Trust Managing Allegations against Staff/Volunteers who work with Children/Young people Policy.</p> <p>Discuss the allegation and consider the risk to the child/ren and the organisation/public.</p> | <p>BHRUT Designated Senior Officer (Deputy Chief Nurse)</p> <p>BHRUT Named Nurse Safeguarding Children</p> <p>Line Manager of staff member</p> <p>Employee Relations Advisor</p> | BHRUT Designated Senior Officer (Deputy Chief Nurse) | <p>BHRUT Administration Staff.</p> <p>Information should be restricted to those who have a need to know in order to protect children, facilitate enquiries, manage related disciplinary or suitability processes.</p> |

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| | | Information should be restricted to those who have a need to know in order to protect children, facilitate enquiries, manage related disciplinary or suitability processes. | | | |
| Multi-Agency Maternity Partnership Meeting | None – Best Practice | Meeting to discuss individual cases to consider the impact of drug/alcohol misuse, domestic violence and associated activities on the unborn child, and whether there are any resultant concerns for the child’s welfare or safety. To discuss any protective factors that are present. To share findings of assessments informed by multi-agency collaboration to enable appropriate support package to be provided for the mother and unborn child/family. | As per Terms of Reference. | Named Midwife Safeguarding Children BHRUT | Named Midwife Safeguarding Children BHRUT. Restricted minutes produced which records decision making and plan where appropriate. |

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| Psychosocial Meeting | None – Best Practice | <p>The meeting provides a forum for multi-agency representatives to review potential safeguarding issues in children who have presented for care in the Trust in the preceding week.</p> <p>Representatives consider clinical risk in children, whether appropriate referral/follow-up has been made and if/what further action is required, with the aim of improving outcomes for children and young people.</p> <p>Regular multi-agency reviews take place to ensure the continued development of the service and that there are robust systems and processes in place to safeguard children.</p> | <p>As per Terms of Reference:</p> <ul style="list-style-type: none"> • Named Doctor Safeguarding Children • Named Nurse Safeguarding Children • Paediatric Liaison Nurse Safeguarding Children • ED Consultant (Representative) • Paediatric Wards/NICU • Psychotherapist • Local Authority Representatives, i.e. Social Worker/Early Intervention Worker (Tri Borough) • Interact MH Service representative • Subwise Substance Misuse Service representative | Safeguarding Team BHRUT | <p>Safeguarding Team BHRUT.</p> <p>Restricted minutes produced which records decision making, actions taken, and plan where appropriate.</p> |

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| | | Issues of concern about procedure/process raised at the meetings will be addressed by the Safeguarding Team by liaising directly with staff in clinical areas involved, via education/training/support, and/or by further escalation as required. Good practice/documentation also acknowledged. | | | |
| Discharge Planning Meeting (Hospital) | None – Best Practice | A Discharge Planning Meeting must be held whenever a professional or agency has raised child protection concerns for a child admitted to hospital, or when the child/unborn baby are the subjects of a Child Protection Plan (CPP). This should be convened within 24 hours of it being called. In the event of a child being “out of area” consideration will be given to a telephone conference | All agencies working with the family should be invited, i.e. Health Visitor, School Nurse, Midwife if applicable. Chaired by Ward Sister/Senior Nurse/Safeguarding Team Representative or Social Care if requested by them. | Maternity – Social Worker if child subject to Child Protection Plan. Department of Paediatrics – Ward Sister/Senior Nurse if Child Subject to Child Protection Plan. | Minutes recorded on the BHRUT Meetings Template (Paediatric & Maternity) available on the Intranet, and placed in child records immediately after meeting Actions from meeting will be recorded within the meeting template. Each |

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| | | <p>call; flexibility and co-operation is required of all agencies.</p> <p>It is held to:</p> <ul style="list-style-type: none"> • Consider the cause of concern. • Share information about any assessments undertaken by each of the agencies; this will include the outcome of any home visits by other agencies. • Consider the needs/risks in relation to other children in the family. • Share information about on-going medical care. • Identify support needed for those caring for the child once discharged. • Agree a multi-agency plan on discharge from hospital to address the risks/concerns raised in | | | <p>agency is responsible for recording its own actions.</p> |

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| | | respect of the child and what support is required to reduce risks; this risk assessment must be concluded before discharge. | | | |
| Team Around Child (TAC) Meeting | Common Assessment Framework (Every Child Matters, Change for Children) HM Government 2006 | To build a network of agencies to monitor and review agency action/s for children who are identified at Tier 2. | Parents (Mandatory) Lead Professional (CAF – Common Assessment Framework) All Universal Services – Health, Speech and Language Services, Early Intervention. | Lead Professional | Minutes are recorded by the Lead Professional. Minutes are restricted on the request of the parent. |
| Multi-Agency Panels (MAPs) | None – Best Practice | To provide a more effective, faster and local response to supporting children with additional needs. To provide direct practitioner to support services available within the community including parenting programmes. | MAP Co-ordinator. Family Support Workers. Information Sharing and Assessment Practice Advisor. Primary Mental Health Worker. | MAP Co-ordinator | MAP Support Officer is responsible for completing minutes and sharing with professionals in attendance. |

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| | | Strengthen links between services within the community. Support the Team Around the Family approach. | 14-19 Carers Advice Service Personal Advisor. Education Inclusion Officer. Crime prevention worker. MAP Support Officer | | |

APPENDIX 1

| MEETING NAME | ACT / REGULATION | PURPOSE | MINIMUM REQUIREMENTS | CONVENED BY | RECORDING |
|------------------------------------|--|---|---|--|--|
| Child Protection Plan (CPP) | London Child Protection Procedures 2016 Working Together 2015 | Develop the outline child protection plan as identified at the Initial Child Protection Conference (ICPC) meeting into a more detailed inter-agency plan, and circulate to relevant professionals (and family where appropriate). | The review conference procedures for preparation, decision-making and other procedures should be the same as those for an initial child protection conference | Local Authority Children's Social Care | Local Authority Children's Social Care |

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| | | <p>Aim of the Plan is to:</p> <ul style="list-style-type: none"> • Ensure the child is safe from harm and prevent him or her from suffering further harm. • Promote the child's health and development. • Support the family and wider family members to safeguard and promote the welfare of the child, provided it is in the best interests of the child. | <p>Social Worker / Managers / Professionals involved with the child/family</p> | | |
| Section 47 Enquiries | Children Act 1989 Section 47 | Enquires undertaken by Children's Social Care to decide whether and what type of action is required to safeguard and promote the welfare of a child who is suspected of, or likely to be, suffering significant harm. | <p>Representative from the Local Authority Children's Social Care.</p> <p>Police.</p> <p>Health Representative – Paediatrician/Specialist, i.e. Orthopaedics/Surgery/Emergency Medicine.</p> | Local Authority Children's Social Care | <p>Local Authority Children's Social Care.</p> <p>All involved professionals should consider, in conjunction with the Police and the appointed conference Chair, whether the report can and should be shared</p> |

Barking, Havering and Redbridge 
University Hospitals
NHS Trust

| MEETING NAME | ACT / REGULATION | PURPOSE | MINIMUM REQUIREMENTS | CONVENED BY | RECORDING |
|--------------|------------------|---|---|-------------|--|
| | | <p>If Local Authority Children's Social Care decides not to proceed with a child protection conference then other professionals 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 Local Safeguarding Children's Board should have in place a quick and straightforward means of resolving differences of opinion (Working Together 2015 Page 41.)</p> <p>Where concerns of significant harm are substantiated and the child is judged to be suffering, or likely to suffer, significant</p> | <p>Where issues have significant medical implications, or a paediatric examination has taken place or may be necessary, a paediatrician should always be included. If the child is receiving services from a hospital or child development team, the meeting/discussion should involve the responsible medical consultant and, in the case of in-patient treatment, a senior ward nurse.</p> <p>A professional may need to be included in the strategy meeting/discussion who is not involved with the child, but who can contribute expertise relevant to the particular form of abuse or neglect in the case (London Child Protection Procedures 2016 3.4.14)</p> | | <p>with the parents and if so when, and attend the conference and take part in decision making when invited.</p> |

| MEETING NAME | ACT / REGULATION | PURPOSE | MINIMUM REQUIREMENTS | CONVENED BY | RECORDING |
|--------------|------------------|---|----------------------|-------------|-----------|
| | | <p>harm, Social Workers should convene an initial child protection conference. The timing of this conference should depend on the urgency of the case and respond to the needs of the child and the nature and severity of the harm they may be facing. The initial child protection conference should take place within 15 working days of a strategy discussion, or the strategy discussion at which section 47 enquiries were initiated if more than one has been held.</p> | | | |