

PAN MERSEYSIDE

POLICE AND CHILDREN'S SOCIAL CARE

JOINT WORKING PROTOCOL

-where a child may be at risk of significant harm-



Knowsley Safeguarding Children Board



Community
first

1. Introduction

This protocol has been developed to promote good practice and improve joint working between the Police and Children's Social Care where it is believed a child/ren may be at risk of significant harm.

Aims of the joint protocol:

- 1) To conduct timely and effective child protection investigations
- 2) To promote positive relationships between the Police and Social Care
- 3) To ensure consistency in practice
- 4) To implement the Achieving Best Evidence Guidance
- 5) To make the best use of the skills of both social workers and police officers

2. Section 47 Enquires

Where there is reasonable cause to suspect that a child is suffering or likely to suffer significant harm, the local authority is required under s47 of the Children Act 1989 to make enquiries, to enable it to decide whether it should take any action to safeguard and promote the welfare of the child.

Children's Social Care has the statutory duty to make, or cause to be made, enquiries when the circumstances defined in Section 47 of the Children Act 1989 exist.

The Police's responsibilities include to undertake criminal investigations of suspected or actual crime and also, to protect life and limb. Where both Children's Social Care and the police have responsibilities with respect to the child, they must coordinate to ensure the parallel process of a section 47 enquiry and a criminal investigation is undertaken in the best interests of the child to ensure better outcomes for children and young people.

The Children Act 1989 places a statutory duty on health, education and other services to help the local authority carry out its social services functions under Part 3 of the Children Act 1989 and section 47 enquiries. All agencies then have a duty to assist and provide information in support of child protection enquiries.

An enquiry under s47 of the Children Act 1989 can only be initiated following a decision from a strategy discussion.

3. Strategy discussion

Wherever there is reasonable cause to suspect a child is suffering or is likely to suffer significant harm there should be a strategy discussion including social care, the police, health, the referring agency and any other professional as appropriate.

A strategy meeting can take place following a referral or at any other time including during an assessment or on an open case. It should be convened for immediate risk on the same day, or as soon as is possible, preferably within **24 hours** of the decision to hold it.

The purpose of the strategy discussion is to: (Working Together 2018 P40)

- Share information.
- Agree a safeguarding plan for the child/ren.
- Agree the conduct and timing of any criminal investigation;
- Decide whether enquiries under section 47 of the Children's Act should be undertaken by whom and when.
- Decide whether a medical should be undertaken.

The discussion should be chaired by a CSC/ Team Manager or Assistant Team Manager and fully recorded including a clear action plan and timescales for completion. The decision of the strategy discussion will be circulated by CSC within 24 hours for actions to be agreed and recorded on ICS.

4. Criteria for Section 47 Enquiries

- There is reasonable cause to suspect that a child is suspected to be suffering, is suffering or likely to suffer significant harm.

5. The threshold for Section 47 Enquiries

The threshold criteria for an s47 enquiry may be identified during an assessment, due to increasing concerns on an open case but may also be apparent at the point of referral, during the interagency checks and information gathering stage, or at any other point in the assessment.

A Section 47 Enquiry will almost certainly be indicated where the following apply; this list covers the main categories of child protection concerns but is not exhaustive:

- Physical harm to a child through a deliberate act, neglect or domestic violence;
- Any injury, however minor, to a non-mobile baby or child;
- Allegation/suspicion of sexual abuse or of child being groomed for sexual purposes;
- Risk of Female Genital Mutilation;
- Significant developmental delay due to neglect/poor parenting;
- Significant emotional/psychological problems due to neglect/poor parenting;
- Persistent emotional ill treatment of a child;
- Very poor home conditions/physical care due to lack of parental care e.g. no food, warmth, bedding, appropriate clothing, hygiene, stimulation;
- Serious neglect and standards of living for adults are markedly better than for the child;
- Repeat of neglect after family support services have been given previously.
- Lack of medical/dental care endangering/impairing child's life;
- Forced Marriage;
- Sexual exploitation and missing from home;

- Incident involving the discharge of a firearm;
- Risk of criminal exploitation;
- Radicalisation;
- The child is a victim of human trafficking.

6. The primary focus of the section 47 enquiry will be on the safety, welfare and needs of the child/ren

- Child/ren will be seen as part of the section 47 enquiry. Such contact will be recorded on the child's file, and will include the record of the child's demeanour, issues discussed, what the child said and any worries the child may have.
- Child/ren will be interviewed in accordance with the multi-agency child protection procedures, and the Achieving Best Evidence Guidance, and records will be kept accordingly, (see below).
- The child's communication needs and abilities, age and developmental level and understanding, and any special needs they may have, will be given full consideration in all aspects of the investigation.
- Children will only be removed from their place of residence if it is assessed as not safe for them to remain living there.
- Consideration will always be given to removing the alleged abuser/s from the household before the removal of the child/ren.
- Support/advice and guidance will be given to the non-accused carer to enable children, wherever possible, and when it is deemed safe to do so, to stay at home.

7. Video – recorded interviews with children under ‘achieving best evidence’ (ABE)

Any video – recorded interview serves two primary purposes:

- Evidence gathered for use in the investigation and in criminal proceedings; and,
- The evidence in chief of the witness.

In addition, any relevant information gained during the interview can also be used to inform enquires regarding significant harm (Section 47) and any subsequent action to safeguard and promote the child's welfare including civil proceedings.

8. The Investigation Team

At a minimum, the investigative team should consist of a police officer and social worker and any professional with knowledge about the child/ren. The police will always lead the criminal investigation. In terms of the ABE it should be the person who has or is likely to establish the best rapport with the child who should lead the interview.

The ABE interview should be conducted as soon as is practical, ideally within 24 hours of the Strategy Discussion / Meeting. Where there is a delay in the ABE taking place the rationale for the delay should clearly be recorded on the Child's record and the police recording system.

9. Planning

An ABE planning meeting will take place as soon as practical. This meeting will decide who the most appropriate person is to lead the interview. Any delays should be clearly documented, with the reason for the delay on the child's record and police recording system.

(See Achieving Best Evidence in Criminal Proceedings planning and preparation).

10. Choice of Lead interviewer

Should be in accordance with the ABE Guidelines and the child's welfare should be paramount.

11. Seeing the child

'Seeing the child' includes observing and communicating with them, as appropriate given their age and understanding, ascertaining their wishes and feelings about the concerns that have been expressed, and taking those wishes into account. Wherever possible, the child must always be seen alone.

Exceptionally, a joint enquiry/investigation team may need to speak to a suspected child victim without the knowledge of the parent of caregiver. The Strategy Discussion will have decided on the most appropriate way to handle this, using specialist professional help or professionals who know the child well where necessary. The kinds of circumstances that may require such an interview with the child would include:

- The possibility that the child would be threatened or otherwise coerced into silence;
- A strong likelihood that important evidence would be destroyed;
- Forced marriage concerns;
- When the child did not wish the parent(s) to be involved at that stage, and is assessed by Children's Social Care as being competent to take that decision under Gillick competency guideline's, it should always recorded in the strategy meeting / discussion document;
- Children's Social Care should always seek the parents' co-operation with Section 47 Enquiries, but if the parents refuse access to a child – and where concerns about that child's safety do not require an urgent response for example an Emergency Protection Order – the local authority may consider applying to the court for a Child Assessment Order.

12. Medical examination (Physical injury/neglect)

- Consideration should always be given to the need for a medical assessment of each child about whom there are concerns.
- If the referral concerns physical injury or severe neglect a medical assessment of all the children in the household should be considered.

- Medical examinations must be conducted by a doctor who has timely referrals.

13. Medical Examination (Sexual)

In all alleged sexual abuse cases, The Rainbow Suite at Alder Hay hospital should be contacted to discuss the need for a medical (see appendix 1- Pathway).

14. The use of emergency powers

Please also see Wirral Police Powers of Protection Protocol: wirralsafeguarding.co.uk/ppp

Both the police and social care can exercise emergency powers to protect children who are deemed to be at risk of significant harm. The police have powers under Section 46 of the children Act 1989 to protect children judged to be at risk of immediate significant harm and remove children to a place of safety. This is called taking a child into 'Police Protection' but is often referred to as a 'Police Protection Order (PPO)' - an erroneous term as no order is in fact being made. The Children's Act only facilitates the making of any order via an application to a court.

Social care have the power under Section 44 of the Children's Act 1989 to apply to the Courts for an Emergency Protection Order (EPO) when there is evidence that a child is in "imminent" danger and the Order is necessary and appropriate to the level of risk to the child.

The use of Police powers in terms of taking a child into 'Police Protection' should be employed after consultation between Senior Officers in the Police and Children's Social Care, within the day and out of hours. This constitutes best practice as the benefits of Social Care's safeguarding expertise can assist the police in managing the response to any child protection incident effectively. It is recognised, however, that any police officer attending an incident may have to employ these powers spontaneously in order to offer immediate protection to a child and as such they should not be discouraged from doing so.

A Senior Officer in the Police for the purposes of this section means the officer of the rank of Inspector or above, efforts should always be made to consult the PVPU or duty D/Insp, if it is practicable. A Senior Officer for Children's Social Care means one of the Social Care Child Protection Teams or the Head of Service for Child Protection during office hours. Police duty Inspectors should contact the MASH during office hours or duty (PVPU) Detective Inspector if consideration is being given to taking a child into 'Police Protection' and MASH staff will identify an appropriate Manager from Social Care with whom the matter can be discussed. Outside of office hours the Senior Officer for Social Care is the Emergency duty social worker and duty Inspectors should always consult with the Coordinator prior to utilising police powers.

In an emergency situation legislation allows any Police Constable to make the decision to remove a child to a place of safety under the powers granted by Section 46 of the Children's Act. The Constable effectively places the child in 'police protection' when

making this decision. The duty Inspector must always be advised in these cases and should consideration be given to the child remaining in 'Police Protection' consultation should take place with Social Care in order to discuss the best safeguarding options in respect of the child. Further explanation in respect of the application of police powers under the Children's Act can be found in Home Office Circular 17/2008 and this section should be read in consultation with that document. The document is available via the PNLD (Police National Legal Database) portal on the Police Intranet.

Social care should always consider the use of an EPO if a child is found at risk of imminent harm during office hours i.e. court is open. Social Care should only request the Police to take a child into 'Police Protection' during office hours when it is felt that any delay in removal would place the children at further risk of harm. If Social Care feel immediate removal of a child is necessary to ensure the child is safeguarded outside of office hours they should always contact the duty Police Inspector to discuss the use of police emergency powers.

In Wirral the local protocol designated 'Our Safe Place: The Bungalow' at Solar Campus as the police supervised safe place. Further detail and guidance about the local protocol to be followed is available here: wirralsafeguarding.co.uk/ppp

15. Joint Visits (See section 11)

There will be occasions when it is appropriate to conduct a joint visit with social care and the police both during a Section 47 enquiry and on an open case. Each situation must be considered on a case by case basis and there must be agreement between the police and social care that a joint visit is necessary in order to achieve one or more of the following objectives:

1. To safeguard the child/ren and adults.
2. To be certain if a criminal offence has been committed. To provide evidence that a child's needs have been neglected.
3. In order to assess and record any physical evidence of physical or sexual assault against a child.
4. In order to help children and families understand the risk posed by criminality or threat that may emanate from outside the home e.g. guns and gangs or organised crime based threats, Child Sexual Exploitation, Criminal Exploitation, radicalisation etc.;
5. In order to prevent assault to Social Care and a breach of the peace.
6. Generally, if police or social care feels that joint engagement of a family or children will make a significant contribution to achieving effective safeguarding, investigation or assessment a joint visit should be carried out.

16. Joint visits and Section 47

The decision to conduct a joint visit can be made during a strategy meeting or strategy discussion during the day-time and also out of hours.

17. Joint visits and open cases

When an open case is running alongside a criminal investigation in respect of an offence committed against the child the social worker holding the case and the investigating officer allocated to the case should conduct any joint visits together as required. In the event that either party is unavailable or there is an urgent requirement for a joint visit to take place supervisors in each organisation should nominate a suitable member of staff to carry out the visit.

18. Joint working and on-going Investigations

Police officers and Social Workers working together in respect of Section 47.

Investigations should ensure that communication is maintained by both agencies in respect of any new information that they are in receipt of that may:

1. Impact on the child or family's safety either in terms of creating additional risk or adding further protective factors;
2. Contain new evidence relevant to the investigation of the crime.

As part of the meeting the requirements of points 1&2 above (and as a minimum expectation) police should always update Social Care when there has been a significant event in the investigation such as arrest, charge, finding of guilt or sentence made in respect of the suspect. The suspect's bail conditions should also be shared with Children's Social Care and any changes to bail should be discussed before bail consideration and change. Similarly, if a decision is made to take no further action in respect of a case this should always be communicated to Children's Social Care immediately.

As part of meeting the requirements of points 1&2 above (and as a minimum expectation) Social Care should always advise the police officer in the case the outcome of an assessment is completed. Reports commissioned by the Family Court (such as psychological reports) may also be important to progression of a criminal case and may need to be made available to the Crown Prosecution Service when an investigation is on-going. Social Workers should always advise the police officer in the case if any such reports are commissioned.

Police officers in charge of a case and the allocated Social Worker should ensure that any communication in relation to points 1&2 above is recorded on respective case management systems. Supervisors/managers in both agencies are responsible for checking single-agency case management systems to ensure that this has been done as part of their quality assurance process.

19. Escalation

The Safeguarding Children Board (LSCB) Escalation policy applies to any disagreement arising from interpretation of or adherence to this protocol. In the first instance the policy encourages practitioners to resolve issues between themselves (particularly if a matter is urgent) moving on to discussions between first-line managers if the issue remains unresolved. The needs of the child should remain paramount throughout any discussions held and subsequent decisions made. A full copy of the policy can be found on the WSCB website here:

<https://www.wirral safeguarding.co.uk/procedures/10-2-multi-agency-escalation-procedure/>

20. Compliance

The compliance of the protocol will be monitored via quarterly Police and Children's Social Care Working Together meetings.

21. Review Date


This protocol will be reviewed in September 2020 unless there is a need to do so sooner, i.e. change in Working Together 2018 or Legislation.

Appendix 1

[CSA MA Care Pathway at Alder Hey Hospital \(AH\)](#)

Signatories to the Protocol

This protocol is provided to meet the needs of MACSE meeting and the management of associated intelligence and information. It is intended that signatories will use the protocol for this purpose.

<p>Liverpool Safeguarding Children Board/ Partnership</p> <p>Signed</p> <p>Name</p> <p>Title: Chair Liverpool LSCB</p>
<p>Wirral Safeguarding Children Board/ Partnership</p> <p>Signed </p> <p>Name <i>Maggie Atkinson</i></p> <p>Title: Chair Wirral LSCB</p>
<p>St Helens Safeguarding Children Board/ Partnership</p> <p>Signed</p> <p>Name</p> <p>Title: Chair St Helens LSCB</p>
<p>Knowsley Safeguarding Children Board/ Partnership</p> <p>Signed</p> <p>Name</p> <p>Title: Chair Knowsley LSCB</p>
<p>Sefton Safeguarding Children Board/ Partnership</p> <p>Signed</p> <p>Name</p> <p>Title: Chair Sefton LSCB</p>