

# NEWHAM MULTI-AGENCY REPORT TO CHILD PROTECTION CONFERENCE



## Guidance for Completing the Child Protection Conference Report

Reports from the professional network are key to effective decision making at the child protection conference, and will be included as part of the conference record. As such, professionals are expected to provide timely, clear, succinct and risk-led reports in advance of the conference. A separate report for each child is required for all initial, pre-birth and review child protection conferences.

Partnership with parents/carers, children and young people is key. It is the responsibility of the professional completing the report to ensure it is shared with the parents/carers and the child where appropriate prior to the conference.

Reports must be sent to the social worker and conference chair at least 2 working days before an initial child protection conference and 5 working days prior to a review child protection conference. Sufficient copies of reports should also be brought to the conference.

Professionals should address the following issues in their report to conference:

- Summary of agency involvement, including the agency's 'safety goals' for the child and family
- Views of child/young person, parents/carers, including their 'safety goals'
- Strengths
- Risks
- Agencies contributions to the plan
- Indicators of progress – What would 'safety' look like?

If there is additional information you would like to provide to the conference, please attach as an addendum.

|                        |  |                        |  |
|------------------------|--|------------------------|--|
| <b>CONFERENCE DATE</b> |  | <b>CONFERENCE TYPE</b> | Initial/Review/Pre-Birth<br><i>(delete as appropriate)</i> |
| <b>FAMILY NAME</b>     |  |                        |  |

|                     |            |                       |                         |
|---------------------|------------|-----------------------|-------------------------|
| <b>CHILD'S NAME</b> | <b>DOB</b> | <b>NURSERY/SCHOOL</b> | <b>AGENCY ID NUMBER</b> |
|                     |            |                       |                         |

|                           |            |
|---------------------------|------------|
| <b>PARENT(S)' NAME(S)</b> | <b>DOB</b> |
|                           |            |
|                           |            |
|                           |            |

**FAMILY ADDRESS:**

**CHILD'S ADDRESS (if different from above)**

| <b>PROFESSIONAL COMPLETING REPORT</b> |             |                     |                                |
|---------------------------------------|-------------|---------------------|--------------------------------|
| <b>NAME</b>                           | <b>ROLE</b> | <b>ORGANISATION</b> | <b>CORE GROUP MEMBER (Y/N)</b> |
|                                       |             |                     |                                |

**SUMMARY OF CURRENT INVOLVEMENT**

*Please give an overview of how and when the family came to be involved with your agency/service. What provision have you been offering and how do the child and family engage with this?*

**SAFETY GOALS**

*What outcomes are the agency working towards with the family? When can the agency be confident that the child is safe?*

**VIEWS OF CHILD/YOUNG PERSON, PARENT(S)/CARER(S)**

*Please describe how the child/young person and parents have offered their views on their current situation. What do they find helpful/unhelpful? What are their goals in relation to safety of the child(ren)?*

|   |  |
|---|--|
|   |  |
| <b>RISKS/INDICATORS OF HARM</b>   |  |
| <i>Please describe all factors that could be an indicator of harm/maltreatment.</i>   |  |
|   |  |
| <b>STRENGTHS</b>  |  |
| <i>What are the strengths within the family? Is there a way that these strengths could be fostered and built on?</i>              |  |
|   |  |
| <b>AGENCY CONTRIBUTION TO THE PLAN</b>  |  |
| <i>What can your agency offer for the child and or parent? How will the agency engage with the family and track any outcomes?</i> |  |
|   |  |
| <b>PROGRESS</b>   |  |
| <i>Please note indicators of progress.</i>  |  |
|   |  |

|  |  |
|--|--|
| <b>DATE COMPLETED</b>  |  |
| <b>DATE REPORT SHARED WITH PARENTS</b>                       |  |
| <b>DATE REPORT SHARED WITH CHILD<br/>(where appropriate)</b> |  |
| <b>SIGNATURE OF REPORT AUTHOR</b>                            |  |

*This report is confidential and may not be reproduced or distributed to persons other than those attending the child protection conference, except with the permission of the author.*

\*Please ensure this report is sent via secure email to [CPRT.minutes@newham.gov.uk](mailto:CPRT.minutes@newham.gov.uk) or post to the social worker and conference chair 2 working days prior to an initial child protection conference and 5 working days prior to a review child protection conference.