

Family Services

Document control

Document title	Barnet Local Assessment Protocol
Document description	Assessment protocol for professionals who come into contact with children and families living in Barnet and have a concern about their welfare.
Document author	Tina McElligott, Interim Assistant Director, Children's Social Care

Version control

Document production date	8th February 2017
Document currency	As required

Clearance process

Quality approver	Date
Name of person and title responsible for the quality and appropriateness of the document – this should be Head of Service or above –	Tina McElligott February 2017
Release approver	Date
Name of person who approves the document to be added to the Document Bank – this should be the Head of Service or above	Tina McElligott February 2017





Contents

1. Introduction.....	4
2. Assessment Principles	4
3. Barnet Pathway Domains.....	6
4. Referrals	7
5. Multi-Agency Safeguarding Hub (MASH)	8
6. Early Help - Common Assessment Framework	8
7. Barnet Family Services Single Assessment.....	9
8. Section 47 Enquiries Children Act 1989 Child Protection Investigations.....	10
9. Revised Public Law Outline	11
9.1. PLO Requirements	11
10. Assessing and Planning for Permanence	12
11. 0-25 Disability Service.....	12
11.1. Children with disabilities	12
11.2. Adults with disabilities.....	13
12. Other Assessments	13
12.1. Children with Special Educational Needs: Education, Health and Care needs assessments.....	13
12.2. Education, Health and Care (EHC) Plan.....	14
12.3. Outcomes.....	14
12.4. Personal Budgets	15
12.5. Young Carers.....	15
12.6. Children and Young People involved in the Criminal Justice System.....	16
12.7. Unaccompanied Asylum Seeking Children & Age Assessments	17
12.8. Channel/Prevent	18
12.9. Safeguarding children at risk of abuse through female genital mutilation	18
12.10. Children at risk of Sexual Exploitation.....	20
12.11. Multi-Agency Sexual Exploitation Meeting (MASE).....	21
12.12. Children who Return Home from Care	22
12.12.1 Planned return	22



13. Compliments and Complaints 23

13.1. Comments and Compliments23

13.2. What is a complaint?.....23

13.3. Contacts.....24

Appendix A – The Legal Framework 25



1. Introduction

This document is for professionals who come into contact with children and families living in Barnet and have a concern about their welfare. The document sets out how services are organised around children's differing needs for support, help and protection and provides a framework for agencies to work together to achieve best outcomes for children and young people.

This document should be read alongside Barnet's threshold of need document, the London Child Protection Procedures (revised September 2016), Working Together to Safeguard Children: A Guide to interagency working to safeguard and promote the welfare of children (March 2015), The international Child Abduction and Contact Unit (Guidance 2016) and Working with Foreign Authorities: Child Protection Cases and Care Orders (Departmental Advice for local authorities, social workers, service managers and children's services lawyers).

2. Assessment Principles

The Department of Health, Department of Education and Employment and Home Office Framework for the Assessment of Children in Need and their Families (2000) sets out a framework for assessment to analyse, understand and record what is happening to children within the context of their families and communities and aims to assist practitioners to make professional judgments as to whether the child is in need or at risk of harm

The Assessment Triangle sets out three domains for assessment:

- The developmental needs of children
- The capacities of parents or caregivers to respond appropriately to those needs
- The impact of wider family and environmental factors on parenting capacity on children



In Barnet, assessment activity is underpinned by a resilience perspective which recognises that whilst people may face adversities they also find ways to thrive. Our practitioners will always seek to identify and build upon family resilience as part of the assessment process and any resulting plan for intervention. It is our common expectation that:

All assessments should:

- Be timely, transparent and proportionate to the needs of individual children and their families;
- Be concise and written in plain English
- Identifying areas that build upon family resilience by recognising what they do well, engaging their support systems and identifying their successful coping strategies
- Put the child at the centre and examine the child's lived experience within the family
- Clearly set out any worries or concerns as directly expressed by the children and young people in the household
- Include the whole family, including non-resident fathers
- Be undertaken transparently and in partnership with families
- Be informed by the views of other professionals involved with children and adults in the family
- Include the assessing social workers analysis of risk and need
- Set out what needs to change to improve outcomes for the child(ren) and when this needs to happen
- Be shared with parents, and children where appropriate



3. Barnet Pathway Domains

Professionals in Barnet describe services using pathway domains based on assessment of needs:

- **Universal Services** (Blue)

All children have a right to a range of services; professionals will assess families to make sure their general needs are met.

What we mean: Schools-Nurseries-Childminders-Children Centres-Youth Projects-Local Police-Midwifery- Family GP-Health Visitors-Job Centre-Housing Officer-Mentors-Voluntary Sector-Floating Support

- **Universal Plus** (Light Blue)

Requiring a response within universal settings and/or signposting to other support that doesn't need a co-ordinated multi-agency plan.

What we mean: early identification with additional help through universal services to keep children safe from harm and help build resilience so that they can achieve their full potential.

- **Targeted** (Green - low priority need but needs a coordinated approach using a CAF)

Requiring a co-ordinated, multi-agency plan (CAF) due to the complexity of needs.

What we mean: Additional Help – Lead Professional –Family Support Worker –Accessible Family Support Process –Multi-agency Co-ordinated Services

- **Specialist** (Amber: medium priority need likely to be a child in need via a section 17. Red: High priority need likely to be a child protection enquiry via a section 47)

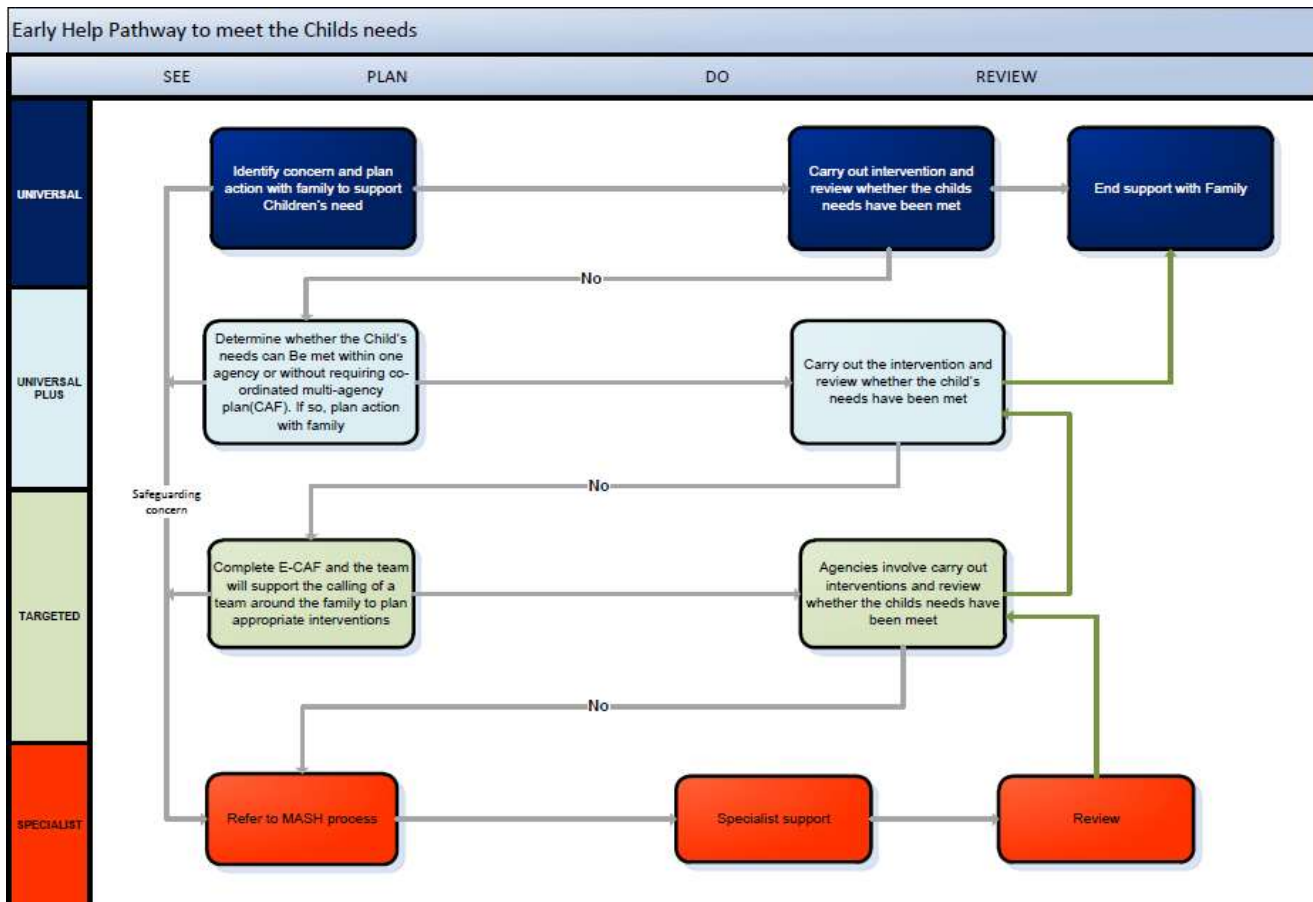
Requiring a specialist response where the child is suffering, has acute health needs or at risk of suffering significant harm or impairment. This will be the main area of difference between services e.g. Council services equals children social care, health services equals CAMHS or consultant.

What we mean: Complex Needs –Social Worker –Assessment - Child in Need plan –S17 interventions Significant Harm –S47 enquiry - Child Protection Conference – Multi-agency Core Group meetings – Specialist Police teams –Child Protection –Legal Action



High-level Pathways

All Services within the Council and our key partners to use this high-level pathways plan to base their approach.



4. Referrals

Common Assessment Framework (CAF)

If a child's needs cannot be met by universal services and require a coordinated multi-agency approach, a CAF should be initiated.

All other referrals will be considered by the Multi-Agency Safeguarding Hub (MASH). Early intervention and prevention referrals will almost always be referred on to other services to enable help to be provided without the need for statutory intervention.



5. Multi-Agency Safeguarding Hub (MASH)

Barnet MASH operates as the 'front door' to children's services and comprises of co-located professionals from Children's Social Care, Police, Education and Health Services. The MASH also works in partnership with the National Probation Services (NPS), Community Rehabilitation Company (CRC), Westminster Drug & Alcohol Project, Solace Women's Aid, Barnet Homes and Early Intervention Services.

When children are identified as having additional needs or there are concerns about their welfare, the MASH partnership work collaboratively to understand the 'whole picture' by sharing information and ensuring children are connected to the right services to meet their needs first time.

Professionals within the MASH will ensure that where appropriate and necessary, consent will be obtained to share information and that information will only be shared with the people who need to have it. MASH will ensure that information is accurate and up to date, shared securely and in a timely fashion. Even with consent, it may not be appropriate to share all information that is available and based upon the type and level of concern, practitioners will make a decision about what is necessary, proportionate and relevant to ensure a balanced response to risk and need. All decisions to share information without consent will be clearly recorded.

6. Early Help - Common Assessment Framework

The CAF provides a consistent method of assessment across Barnet's early help services and ensures a whole family approach to identify early help services that meet a child and families identified needs. The CAF is a process to facilitate early identification of needs and to recognise emerging issues that cannot be met by universal or universal plus services. It is a multi-agency approach where the Team Around the Child meeting identifies and involves other appropriate agencies who may be able to support the child and/or provide targeted interventions. This way of working reduces duplication and seeks to ensure coordinated provision of services with an identified lead professional so the child and family are held close and tell their story only once. Central to its development is the principle that the CAF is child/young person centred, holistic and can be shared across professionals as appropriate.

The CAF will be used to assess a child and family's needs when:

- There are concerns about how well a child is progressing in terms of their health, welfare, behaviour, progress in learning or any other aspect of their well-being
- The child's needs are unclear or broader than a single universal service can address
- A CAF should be completed when a professional in any agency has concerns that a child will not progress towards meeting key outcomes without additional services



- A child with a disability who is subject to a SEN statement may still also benefit from a CAF in order to assess and coordinate the wider family needs
- For information about cross-boundary working between London boroughs in relation to the CAF process, please refer to the *Integrated Working Without Boundaries – The London Common Assessment Framework (CAF) Protocol (April 2009)*
- A range of early help services are available provided by voluntary, statutory and health agencies. This includes a range of evidenced-based parenting and family support interventions, Children's Centres, youth support services and child care support packages such as Free Education for two year olds (FEE2) and Early Years Vulnerable Families

www.barnet.gov.uk/wwcib/eyvf and www.barnet.gov.uk/wwcib/2yearold

7. Barnet Family Services Single Assessment

When a child is referred to Children's Social Care Services for a statutory assessment of need they will have a Single Assessment in accordance with Working Together to Safeguard Children 2013.

All single assessments are undertaken by qualified social workers under the supervision of experienced Team Manager(s).

Assessments will involve a visit(s) to the child's home and where appropriate, the child's school. During the assessment the social worker will gather information from the child, his/her parents/carers, siblings, wider family and support systems and professionals involved in the child or family's life. Children may be seen alone and together with their parent(s) and siblings.

At initial allocation the Duty and Assessment Team social worker, in consultation with the Team Manager, will consider the following as part of the planning process for a Single Assessment:

- The reason for the referral and any alleged or suspected concerns
- The information that will be shared with the child's parents/carers and key agencies
- Obtaining consent, where appropriate for agency checks to be undertaken
- The child and family's linguistic, cultural and communication needs
- Access to the child and how the child's views will be obtained
- Engaging non-resident parents
- Which professional agencies will be required to contribute to the assessment
- Effective communication with parents with learning disabilities



- Signs of Safety
- Violence in the home
- The specific needs of unborn children
- Contingency arrangements for emerging information, changing or new circumstances that increase risk to the child
- Social and environmental factors affecting risk i.e. Group Offending/ Gang-involvement
- Non-resident children of adults in the household
- Obtaining the family history and involvement with services
- Any services that are required to immediately alleviate need

The assessment should take no longer than 45 working days to complete, unless there are justified reasons for the assessment to take longer. Team managers will make a record of the reasons delaying the completion of an assessment and maintain oversight of the timeliness of the assessment in supervision with the social worker.

Completed assessments will determine:

- If the child is in need of services provided under s17 Children Act 1989
- If the child is need of accommodation under s20 Children Act 1989
- What actions, if any, are required to safeguard the child in the immediate or longer term
- The type and level of services that are required to improve the child's outcomes

The Single Assessment will be used to formulate the child's Plan and will be used as the social work report for Initial Child Protection Conferences, including updated assessments for subsequent Review Child Protection Conferences

8. Section 47 Enquiries Children Act 1989 Child Protection Investigations

Enquiries under s47 Children Act 1989 will be triggered if a child is taken into Police Protection, is the subject of an Emergency Protection Order or there are reasonable grounds to suspect that the child is suffering or likely to suffer significant harm i.e. the child has made a serious allegation of abuse, has incurred an unexplained injury or is suffering neglect.

In accordance with Working Together to Safeguard Children and the London Child Protection Procedures, all child protection investigations in Barnet will:



- Be planned through an initial (or review) Strategy Discussion or Meeting with the Police and Health, and other agencies as relevant
- Be undertaken either jointly with the Child Abuse Investigation Team (CAIT) or solely by Children's Social Care Services (single agency)
- Be informed by MASH checks/information
- Be completed within 15 working days of the initial Strategy Discussion
- Identify what needs to happen to ensure the child is safe for the duration of the investigation i.e. safety planning or temporary living arrangements away from the source of risk or harm with a relative, family friend or foster carer
- Initiate a Single Assessment, in which the child will be met with alone
- Where a crime has been committed against the child, obtain the child's evidence by undertaking a video-taped interview carried out by a CAIT police officer and a specially trained social worker
- Where necessary, include a physical examination of the child by a pediatrician
- Determine whether an Initial Child Protection Conference is required to develop a multi-agency safeguarding plan (Child Protection Plan) for the child(ren)

9. Revised Public Law Outline

The revised Public Law Outline (PLO) 2010, provides a framework for local authority care proceedings applications to ensure that assessments to determine arrangements are made in the best interests of the child and are completed and finalised in the Family Court within 26 weeks.

9.1. PLO Requirements

With exceptions to emergency situations, the court expectation is for the local authority to complete the requirements of the Pre-proceedings Checklist ahead of initiating court proceedings including:

- A Court statement
- A family Genogram
- A Chronology
- Current assessments of the child and his or her family
- A proposed Care Plan
- A threshold statement (setting out the concerns regarding Significant Harm to the child)

The time frame limits time during court proceedings to undertake specialist assessments so the expectation is for social workers to undertake or arrange for assessments to be conducted within the PLO and/or set out the services the family must engage with to enable them to achieve positive change.



A Legal Planning Meeting held between the social worker and local authority legal department will determine if threshold is met to issue Court Proceedings, once determined, the local authority will send the parents a 'letter before proceedings' which triggers the availability of public funding for the parents to obtain legal advice. The letter before proceedings will set out the local authorities concerns and the outline plan for completing specific assessments within timescales. A meeting will be held with the parents family and their legal representative(s) to ensure that they are clear of the expectations. The pre-proceedings plan will be reviewed at agreed intervals.

10. Assessing and Planning for Permanence

Assessments of a child's needs in relation to his or her Permanence Plan must:

- a. Focus on outcomes; and
- b. Consider stability issues, including the child's and family's needs for long-term support and the child's needs for links, including contact, with his or her parents, siblings, and wider family network.

Social workers must ensure the child's Permanence Plan is clearly linked to previous assessments of the child's needs in full consultation with family and community networks to establish the child's attachments, support networks and the child's wishes and feelings. The assessment process must ask how stability for this child will be achieved;

By the time of the second Looked After Review, the child must have a Permanence Plan that supports:

- Reunification with birth or extended family
- Adoption
- Special Guardianship Order/ Child Arrangements Order
- Long Term Fostering

11. 0-25 Disability Service

Barnet's 0-25 service aims to provide a service where the assessment of need produces the necessary support and intervention into early adulthood that will strengthen transition planning and consistency is assessment.

11.1. Children with disabilities

Children with disabilities are 'children in need' and therefore require assessment of their needs to establish what kind of help and support they require, if any.



A non-statutory Early Help assessment may be sufficient on its own to establish the kind of help and support needed for children with disabilities but in some cases, a specialist assessment may be required (for example an Occupational Therapy assessment or a health assessment). Some children with disabilities may also need a statutory social work Single Assessment because of concerns about their safety and welfare. The majority of such Single Assessments will be undertaken by the Family Service 0-25 Disability Service.

11.2. Adults with disabilities

The Care Act 2014 came into force in April 2015 and sets out revised responsibilities of Local Authorities on when and how people who need care and support should be assessed and supported.

The assessment must involve the individual and their carers or others who have an interest in their welfare. The needs of carers who provide or intend to provide care to a person must also be assessed.

The assessment is how a local authority decides whether a person needs care and support to help them live their day-to-day life.

The assessment must be carried out by an appropriately trained assessor, for instance a social worker, who will consider a number of factors, such as:

- the person's needs and how they impact on their wellbeing – for instance, a need for help with getting dressed or support to get to work
- the outcomes that matter to the person – for example, whether they are lonely and want to make new friends
- the person's other circumstances - for example, whether they live alone or whether someone supports them.

The aim is to get a full picture of the person and what needs and goals they may have. After carrying out the assessment, the local authority will then consider whether any of the needs identified are eligible for support.

12. Other Assessments

12.1. Children with Special Educational Needs: Education, Health and Care needs assessments

Parents/carers or the young person can ask for an Education, Health and Care (EHC) needs assessment, if they believe one is needed and anyone at the child/young person's school, such as a teacher, can also ask for an assessment to be carried out. Information on the Education and Health Care Plan (EHCP) process can be located using the link [EHCP](#). Useful Information on the Barnet Local Offer and SEN is available on the council website



An EHC assessment can be requested by contacting the Barnet Special Educational Needs Team on senadmin@barnet.gov.uk or 020 8359 7007

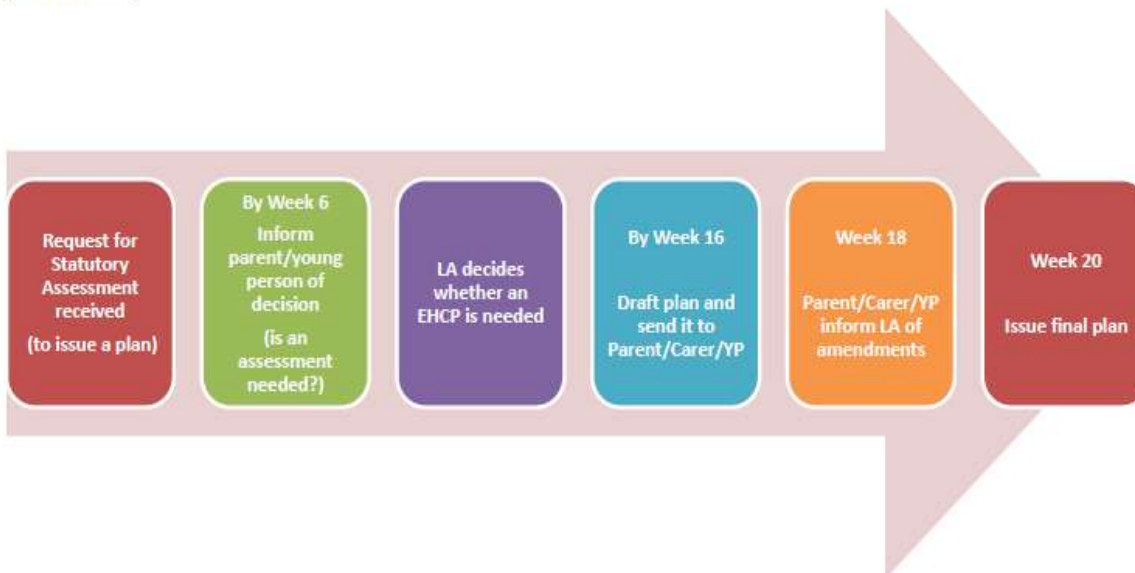
The SEN Team will want to see evidence that the pupil needs more support than what is ordinarily available in a mainstream education setting. Once a request has been made, they will advise if agreement has been reached to complete an EHC Needs assessment. If an EHC Needs assessment is agreed, the SEN team will gather information from the parent/carer and the child/young person and a range of other professionals.

12.2. Education, Health and Care (EHC) Plan

An EHC Needs assessment might lead to an EHC Plan. This is a legal document that describes a child's or young person's special educational, health and social care needs.

An EHC assessment does not always lead to a child or young person receiving an EHC plan. The EHC Needs assessment process can take up to 20 weeks from the request being received to a final Education, Health and Care Plan being issued if it is necessary.

Timeline:



12.3. Outcomes

The Special Educational Needs and Disability (SEND) Code of Practice 2015 is designed to help children and young people to work towards their aspirations by focusing on Outcomes. The [outcomes explanation document](#) provides more detail on the definition of outcomes, and how they are developed and reviewed. Outcomes underpin the detail of EHC plans and describe what parents hope their child can achieve, or what children want to achieve for themselves, especially as they move towards adulthood.



The Outcomes in an EHC Plan will usually come from discussion with the child/young person, their family, the setting and any outside professionals involved with the child/young person – they are co-produced

12.4. Personal Budgets

Parents, carers and young people have the right to request a Personal Budget when agreement has been reached to issue an EHC Plan. The policy can be found on www.Barnet.gov.uk. Children with disabilities are 'children in need' and therefore require assessment of their needs to establish what kind of help and support they require, if any.

12.5. Young Carers

A young carer is defined as a child or young person (under 18 years old), who gives regular care and emotional support to a parent, brother, or sister, or someone else in the family who is ill, has a disability or mental illness or is affected by substance abuse (including alcohol) or other debilitating illness.

The Care Act 2014 and the Children and Families Act 2014 together provide a framework to ensure inappropriate caring for young people is prevented or reduced and whole family needs are met. The Acts give young carers similar rights to assessment as other carers have under the Care Act. For the first time carers are being recognised by law in the same way as those they care for and are eligible for assessment and support.

When the need for a young carer's assessment has been identified, a decision will be made about the most appropriate person to lead the assessment. If the family is not currently open to Barnet Family Services a referral should be made to the MASH who will consider with other professionals involved with the family who will lead the assessment.

The assessment will consider whether it is appropriate for the child/young person to provide on-going care by considering their age and the impact of the caring responsibilities on their social and educational development, the assessment will also take into account the child/young person's wishes. The assessment will include the young person, their parent/carer and any other person the young person identifies as significant.

Many young people are proud to be carers for their family members and support is available to them Barnet Young Carers and Siblings ([BYCAS](#)) project which has friendly, helpful workers who are there to offer support and advice to any young carers in Barnet, aged from 5 to 18 years old.



[BYCAS](#)

Telephone [020 8343 9698](tel:02083439698)

Barnet Carers Centre
3rd Floor, Global House
303 Ballards Lane, North Finchley N12 8NP

Please contact the team on [020 8359 5281](tel:02083595281) for further details or complete the referral form and e-mail this to youthteamreferrals@barnet.gov.uk.

12.6. Children and Young People involved in the Criminal Justice System

Young people who have committed an offence will receive support to help make positive changes in their lives so they do not re-offend or cause further harm to the community.

In order to understand the type and level of support required to address offending behaviour an assessment will be undertaken by a member of the Youth Offending Team (YOT), which is a multi-agency Team comprising of Youth Offending Team workers, some of who may be, social workers, probation officers, police, family support workers and a restorative justice/victim worker. The team is also supported by professionals with expertise in education, speech, language and communication, child and adolescent mental health and substance misuse. The team works closely with community volunteers, Housing, Community Safety, Family Services including Children's Social Care, and the local community and voluntary sector.

The team work together and support holistic assessment, and interventions using the AssetPlus tool. The assessment will determine current and previous offending or anti-social behaviour and the current or future risk of harm, serious risk of harm and risk to the young person. The assessment is informed by personal, family and social factors such as living arrangements, parenting, family and relationship, learning, education, training and employment, patterns and attitude, resilience, goals and attitudes, opportunities, engagement and participation and factors affecting desistance.

The assessment will consider potential future behaviour, its likelihood and impact, determine the likelihood of reoffending rating and Risk of Serious Harm, making a professional judgement about the likelihood and impact of adverse outcomes in relation to the young person's safety and well-being.

The assessment can be used to inform court at the sentencing stage and to develop a plan to reduce further offending by taking into account the nature of the offending, the young person's personal circumstances and their attitudes and beliefs.



Youth Offending Teams also:

- Help young people at the police station if they're arrested
- Help young people and their families at court
- Supervise young people serving a community sentence
- Stay in touch with a young person if they're sentenced to custody and help them to prepare for when they are released
- Arrange for young people to make amends for their behaviour
- Provide support for parents of young people who are in trouble
- Encourage young people to lead a positive and healthy lifestyle which involves going to school, college or finding work
- Support young people to access support to deal with substance misuse, and their emotional or mental health.

12.7. Unaccompanied Asylum Seeking Children & Age Assessments

Barnet Family Services may need to undertake an age assessment if there is uncertainty about the age of a person seeking asylum as an unaccompanied or trafficked child. Often, the Home Office will request this is undertaken but a social worker can decide to complete one if there is significant reason to doubt that the claimant is a child. Age assessments are not a routine part of Barnet's assessment of unaccompanied or trafficked children but are used to ensure age appropriate services are offered.

[*\(Guidance to assist social workers and their managers in undertaking age assessments in England, October 2015\)*](#)

In undertaking assessments of children from abroad, our Social workers will consider if the child has been trafficked, their emotional, physical, educational and mental health needs, their life and family in their country of origin and their journey to the UK, their immigration status and accommodation needs.

Children who may have been trafficked to the UK will be referred to the National Referral Mechanism (NRM), some may require a Section 47 enquiry and the development of a robust safety plan.

All unaccompanied children will be accommodated under s20 Children Act 1989 for the duration of the age assessment, in parallel a child in need assessment will be undertaken to assess their full range of needs.

Two qualified and Health and Care Professions Council (HCPC) registered children's social workers will undertake the assessment with an interpreter and an independent appropriate adult age assessments should be completed within 28 days and in accordance with guidance.

Children and young people will be given a full copy of the age assessment. The Home Office will be advised of the outcome through the agreed 'Model Information Sharing Pro Forma – Outcome of Age Assessment'.



12.8. Channel/Prevent

Local authorities have a statutory duty to have ‘*due regard, in the exercise of its functions, to prevent people from being drawn to terrorism*’ under the provisions of the Counter-Terrorism and Security Act 2015. In complying with this duty, Barnet Council is working in partnership with a range of statutory partners including the police, prisons and the probation service, the health service, as well as schools and education providers.

Barnet’s strategy is framed around four pillars, all of which are essential to the successful delivery of Prevent as well as to the implementation of the CONTEST strategy more generally:

- **Countering extremist ideology:** How to strengthen institutions and provide local and national counter-narratives to contest and undermine extremism ideology within communities and online.
- **Building a partnership with all those opposed to extremism:** The need to develop effective partnerships between statutory partners and within communities – including the key need to develop local networks of individuals and groups to act as mainstream voices against extremism.
- **Disrupting extremists:** Early sight of new legislative proposals to increase the powers available to target individuals and groups involved in promoting or supporting extremism or terrorism in the UK, including new powers to ban extremist organisations and restrict the harmful activities of the most dangerous extremist individuals.
- **Building cohesive communities:** Recognition that isolation, division, and inequity within communities can exacerbate an individual’s vulnerability to grooming by extremism and increase the appeal of extremist narratives. The government sets out a number of tools to improve community cohesion and social integration and emphasis the importance of this work within a local context.

The strategy aims to detect, deter and divert vulnerable people from the radicalisation process and tackle extremist groups forming or operating in the borough.

For children and young people at risk, or vulnerable to radicalisation, a referral can be made to Channel to assess the risk; Channel is a multi-agency panel that aims to prevent vulnerable individuals from being drawn into extremist or terrorist ideologies. All referrals for children are managed through the MASH. Imminent threats of harm must be reported directly to the Police or anti-terrorist Hotline.

12.9. Safeguarding children at risk of abuse through female genital mutilation (FGM)

Definition

The World Health Organisation (WHO, 1996) defines female genital mutilation as: all procedures (not operations) which involve partial or total removal of the external female genitalia or injury to the female genital organs whether for cultural or other non- therapeutic reasons”.



Under the Female Genital Mutilation Act 2003 it is an offence in England, Wales and Northern Ireland for anyone (regardless of their nationality and residence status) to:

- perform FGM in the UK
- assist the carrying out of FGM in or outside of the UK
- assist a girl to carry out FGM on herself in or outside of the UK
- assist FGM on a UK national or permanent resident by a either a UK or non-UK person – this would cover taking a girl abroad to be subjected to FGM. Even in countries where the practice is not a criminal offence.

The Serious Crime Act 2015 introduced a legal duty for specific professional groups to report to the police any girl who has had FGM. This duty applies when a girl informs the professional that FGM has been carried out on her and/or the professional observes physical signs on the girl appearing to show that FGM has been carried out. The duty applies to all teachers and all regulated health and social care professionals in England and Wales.

If FGM is suspected or identified by any professional or member of the public a referral to MASH must be made, this includes health professionals who identify expectant mother's who have experienced FGM. A decision will be made as to whether a referral for a statutory social work assessment is required to assess risk, prevent a crime from taking place or investigate a crime that has already taken place (FGM Act 2003).

If a child is at risk or has been exposed to harm, Children's Social Care will hold a Strategy Meeting within 2 days to agree a joint investigation with the Police under Section 47 Children Act 1989. This may occur on the same day depending on risk levels. Consideration will be give to all female children in the household including unborn female children.

If immediate protection is required the local authority will consider alternative care arrangements, in consent with parents or under police protection powers or by an application for an emergency protection order.

A child protection conference or long term alternative care arrangements will only be considered necessary if there are unresolved child protection issues once the initial investigation and assessment have been completed.

In accordance with DOH guidance for health professionals on FGM, there is a requirement for health professionals to refer directly to both the police and the MASH if they identify a child under the age of 18 years who has had FGM performed or who is perceived to be at significant risk of having the procedure



Women over the age of 18 years identified as having had FGM, in particular pregnant women, are risk assessed by health professionals. Only if a pregnant woman or a woman with female children requires assessment or support from Children's Social Care will a referral be made. All women will be informed of the illegality of the procedure and their GP notified of their FGM status.

12.10. Children at risk of Sexual Exploitation (CSE)



Sexual exploitation of children and young people under 18 (CSE) involves exploitative situations, contexts and relationships where the young person (or third person/s) receive “something” (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or others performing on them sexual activities.

CSE can occur through the use of technology without the child’s immediate recognition, e.g. being persuaded to post images on the internet or mobile phone without immediate payment or gain.

Violence, coercion and intimidation are common. Involvement in exploitative relationships is characterised by the child or young person’s limited availability of choice as a result of their social, economic or emotional vulnerability.

A common feature of CSE is that the child or young person does not recognise the coercive nature of the relationship and does not see themselves as a victim of exploitation, as they consider they have acted voluntarily. The reality is they have not consented and their behaviour is not voluntary. As the Pan London CSE Protocol points out, a child cannot consent to his or her own abuse.

When children and young people are considered to be at risk of child sexual exploitation a CSE stage 1 Initial Screening and Assessment Tool (ISAT) should be used by professionals to assess risk. Professionals can discuss their concerns with their designated child protection officer, CSE champion or MASH before completing the stage 1 ISAT, the form can be found on the [Barnet Safeguarding Children Board](#) website.

The risk assessment should consider what type of exploitation the young person may be experiencing based on the information known:



- **Inappropriate relationship:** the young person is in a relationship with an older partner who exerts a great deal of influence and control over them due to an imbalance of power. The young person is likely to believe they are in a serious adult relationship and not recognise its exploitative nature.
- **Peer exploitation:** the young person is in a relationship with another young person who is coercing them into sexual activity with their friends. This is the model that gang related exploitation follows.
- **Organised exploitation:** the young person is being groomed or sexually exploited by a network of perpetrators and may be being coerced into sexual activity with different men. Some may be used to recruit others.

Children can be at an increased risk when the following factors are present:

- Under 13 years of age
- Looked After Child
- Missing from school or excluded/NEET
- Missing from home or care
- Gang involved or Offending behaviours
- Learning Difficulty or Disability
- Mental Health needs
- Difficult family background or estranged from family
- Sexually active - repeat sexually-transmitted infections, pregnancy and terminations
- Physical injuries
- Drug or alcohol misuse
- Change in physical appearance
- Evidence of sexual bullying and/or vulnerability through the internet and/or
- Social networking sites
- Receipt of gifts from unknown sources
- Recruiting others into exploitative situations
- Self-harm - thoughts of or attempts at suicide

12.11. Multi-Agency Sexual Exploitation Meeting (MASE)

MASE will maintain robust oversight of all CSE cases assessed as level 1,2,3 risk in Barnet, inform prevention strategies, identify emerging trends, intervene and inform disruption strategies, secure support for victims, and work closely with the police to prosecute perpetrators. In most cases there will have already been a strategy meeting or a Multi-agency planning meeting prior to any referral being completed for MASE.



Social workers and partners can book time at CSE surgery which takes place fortnightly between Police and CSE Coordinator to discuss existing cases prior to MASE referral or for those cases that do not meet threshold for MASE.

12.12. Children who Return Home from Care

When a child is voluntarily in care (Section 20) and the decision is made for him / her to return home, a Care Plan must be drawn up in order to support the child once they return home with the primary aim of reducing the likelihood of the child returning to the care system in the future. The Care Plan should be agreed between the child, the child's family and any involved professionals at a planning meeting.

The following process relates to young people for whom the plan is long term care, not those where the plan was always rehabilitation.

12.12.1 Planned return

The social worker will complete an assessment when the question of possible rehabilitation is identified and this will need to address the level of support that would be required should the child return home. Such an assessment will must be authorised by the social worker's team manager and service manager.

If the outcome of the assessment is positive – it identifies that the child can return home - the change in the plan for the child will need be agreed at the next Looked After Children Review which may need to be re-arranged so as to take place sooner than planned.

If the child is the subject of a Section 31 Care Order, a 'placement at home agreement' will need to be signed by the Assistant Director, CSC. This will take the form of a child and family assessment with a covering confirmation sheet. A rehabilitation plan will be agreed at the next Looked After Child Review, including increased overnight stays at home as a precursor to a full return. However, if the child is the subject of a Care Order, any overnight stays must not take place until the Assistant Director has signed the 'placement at home agreement'.

If the child is the subject of a Care Order, the Looked After Child Review following the return home, and all subsequent Looked After Child Review, must consider the revocation of the Order.



13. Compliments and Complaints

Barnet Council takes feedback about our services seriously.

13.1. Comments and Compliments

Compliments regarding individual staff members will be sent to their line manager and details will be recorded on file. It is helpful to let professionals know when they have done a good job.

We will use your feedback to help improve the services that we provide.

13.2. What is a complaint?

A complaint is any expression of dissatisfaction of our services. You may consider that:

- You have not been treated with courtesy and fairness
- You are unhappy about the standard of service you have received
- We have failed to provide a service to which you are entitled
- You are unhappy about the action taken by us

If you wish to make a complaint to Barnet Council, please let us know:

- What has gone wrong giving us as much detail as possible because it helps us to understand the situation better
- What you would like us to do to put things right.

There are three stages within the council's Corporate Complaints Policy. Each stage has a different response time, as follows:

- At Stage 1, complaints will be responded to within 10 working days.
- At Stage 2, complaints will be responded to within 20 working days.
- At Stage 3, complaints will be responded to within 30 working days.

If you are not satisfied with the investigation and response to your complaint you can contact the Local Government Ombudsman who looks at complaints about councils as well as some other authorities and organisations. It is a free service: their job is to investigate complaints in a fair and independent way, and they do not take sides.



13.3. Contacts

Customer Services

North London Business Park (NLBP), Oakleigh Road South, London N11 1NP

Tel: 020 8359 2000

FAX: 0871 911 6188



Appendix A – The Legal Framework

Definitions

Section 17 : A child in need is defined under the Children Act 1989 as a child who is unlikely to achieve or maintain a reasonable level of health or development, or whose health and development is likely to be significantly or further impaired, without the provision of services; or a child who is disabled.

Section 47: Local authorities, with the help of other organisations as appropriate, have a duty to make enquiries under section 47 of the Children Act 1989 if they have reasonable cause to suspect that a child is suffering, or is likely to suffer, significant harm, to enable them to decide whether they should take any action to safeguard the child's welfare.

‘**Harm**’ means ill treatment or the impairment of health or development and includes witnessing harm being caused to others

‘**Development**’ means physical, intellectual, emotional, social or behavioural development

‘**Health**’ means physical or mental health

‘**Ill treatment**’ includes sexual abuse and forms of ill treatment that are not physical

Harm can be one or more episodes of physical abuse, sexual abuse, emotional abuse or neglect which impair or damage the child’s development.

London Child Protection Procedures (revised 2016)

<http://www.londoncp.co.uk>

Working Together to Safeguard Children (2015)

<https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>

Barnet Safeguarding Children Board

<https://www.barnet.gov.uk/bscb/>

To be reviewed annually.