



Keeping Bristol Safe Partnership

**Children's Strategy Discussion
Guidance**

2024



CONTENTS

1	INTRODUCTION	2
2	PURPOSE	3
3	THE MEETING	4
4	INVITES/ATTENDEES.....	4
5	MINUTES	6
6.	OUT OF HOURS.....	7
7.	CONTEXTUAL/COMPLEX	7
8.	THE DISPUTE RESOLUTION	10

1 INTRODUCTION

- 1.1 The purpose of a strategy discussion is to determine the child’s welfare and plan rapid future action if there is reasonable cause to suspect the child is suffering or is likely to suffer significant harm.
- 1.2 The ambition of this guidance is to promote consistently good quality strategy meetings across all teams in Bristol and to ensure that strategy meetings are effective in making multi agency immediate safety plans and planning joint or single agency section 47 investigations.
- 1.3 This guidance is informed by Working Together to Safeguard Children 2023 and the 2024 Child Safeguarding Practice Review which examined the quality of child protection investigations in Bristol.

2 PURPOSE

- 2.1 Whenever there is reasonable cause to suspect that a child is suffering or is likely to suffer significant harm, there should be a strategy discussion involving local authority children's social care, the police, health, and other bodies such as the referring agency, education, early help, or other practitioners involved in supporting the child.
- 2.2 The discussion should be used to:
 - Share, seek and analyse available information to determine the child's safety and wellbeing.
 - Determine whether enquiries and assessment under section 47 of the Children Act 1989 (will be referred to as section 47 throughout) should be undertaken, and if this should be a single investigation led by children's social care or a joint investigation with the police and/or health.
- 2.3 Where there are grounds to initiate an investigation under section 47, decisions should be made as to:
 - What immediate and short-term action is required to support/ safeguard the child and who will do what by when, including a plan for a social worker to see the child within at least two working days.
 - Whether any further information is required, and which agency will obtain it.
 - The conduct and timing of any criminal investigation.
 - What information should be shared with the child and family, when and by whom (information should not be shared if this may jeopardise a police investigation or increase risk of harm).
 - Whether a follow up strategy discussion is required and if so by when.
 - Whether legal advice is required.
- 2.4 If it is determined that there are not grounds to initiate an investigation under Section 47, decisions should be made as to:
 - Whether an assessment is required under Section 17.
 - Whether support can more appropriately be provided through other agencies, including early help services, education and Youth Justice Service.
 - Inform the Local Authority Designated Officer (if the alleged perpetrator is a professional working with children).
 - Whether to continue with the current plan.
 - No further action is required.
- 2.5 The strategy discussion is not the forum to decide if a case conference should be held. This is a decision made by the manager following the Section 47 investigation. The strategy discussion however is the multi-agency meeting that which can inform this decision.

- 2.6 A strategy discussion can take place following a referral or at any other time, including during the assessment process and when new information is received on an already open case.

3 THE MEETING

3.1 Strategy discussion meetings should take place either online (such as Teams meetings) or in person. In exceptional circumstances, the Chair may complete a strategy discussion through a series of separate conversations with partner agencies (known historically as a telephone strategy) when the child's immediate safeguarding does not allow sufficient time to arrange such a meeting (e.g., due to immediacy of risk, late/ out of hours referrals or lack of professional availability). Under such circumstances, the rationale should be documented and a decision should be made as to whether a follow up strategy meeting is necessary to ensure risk and planning has been robustly considered.

3.2 A strategy meeting should be held on the **same working day** if:

- This request relates to allegations of serious harm to a child (serious physical injury, serious neglect and sexual abuse where immediate safeguarding actions are required).
- There may be a limited timeframe to gather forensic evidence (e.g., penetrative sexual abuse).

Otherwise, a strategy meeting should be held **within 2 working days** of the risk being identified. In very exceptional cases, a delay can be justified, where the benefits of professional attendance and a more measured approach outweigh the need for immediate safeguarding. In such circumstances the Chair should add a case note explaining the rationale of delay.

3.3 Consultant Social Worker/Practice Lead/Team Manager/ Service managers/ Consultant Frontline Social Workers/Deputy Team Managers are responsible for chairing the strategy discussion. Strategy discussions will follow the good practice agenda (Appendix 1).

4 INVITES/ATTENDEES

4.1 All strategy discussions will be requested through the Bristol City Council strategy request form (Appendix 2).

4.2 A local authority social worker, health practitioner (either Community Paediatrician, Sirona Specialist safeguarding nurse or SARC) and a police representative (either Decision Maker, Lighthouse Safeguarding Unit or CID) should, as a minimum, always be involved in the strategy discussion.

4.3 Other relevant agencies will depend on the nature of the individual child's circumstances but may include those who have concerns about the child and/or those involved in the child's life, including, but not exclusively:

- The practitioner or agency which made the referral/who the allegation was made to.
- The child's school, college, or nursery.
- CAMHS and Be Safe.
- Youth Offending Service and Probation.
- Adult social care, adult mental health, substance misuse and/or domestic abuse specialist.
- Housing.
- BACE and Safer Options (contextual safeguarding).
- Any social care or support professionals the child or family are already involved with (e.g., Families in Focus, Children's Centres).
- Other health professionals (e.g., midwives, health visitors, school nurse etc.).

4.4 Children's Social Care should:

- provide and co-ordinate any specific information from relevant social care records
- consider the child's welfare and safety and identify whether the child is suffering or likely to suffer significant harm
- decide what information should be shared with the child and family
- agree what further action is required, and who will do what by when
- record agreed decisions and follow up actions to make sure what was agreed gets done

4.5 Health practitioners should:

- advise about the appropriateness or otherwise of medical assessments
- provide and co-ordinate any specific information from relevant practitioners regarding family health, maternity health, school health mental health, domestic abuse and violence, and substance misuse to assist strategy and decision making.
- secure additional expert medical advice and support for more complex cases
- undertake appropriate examinations, observations, investigations, or tests to determine how the child's health or development may be impaired

4.6 The Police should:

- discuss the basis for any criminal investigation including the timing and methods of evidence-gathering.
- lead the criminal investigation.

4.7 All attendees should be sufficiently senior to make decisions on behalf of their organisation. They should be sufficiently skilled and experienced to prepare for and engage with the strategy discussion and be able to critically assess and challenge their own and others' input. Agencies should not send multiple attendees unless professionals are specifically invited/agreed by the Chair. Where there are multiple members of staff working with the family, the lead professional of that agency should collate all the information to bring to the meeting.

4.8 Agency representatives will be responsible for making sure any actions agreed regarding their agency are either acted upon or delegated and the social work team be updated once completed.

5 MINUTES

5.1 All strategy discussions will be recorded on LCS. The Chair will be supported by a CSCA or other minute-taker whenever possible. The Chair is ultimately responsible for verifying the minutes.

5.2 The minutes will include a record of which professionals were invited and attended, the children the strategy discussion involved, the reason for the strategy (in line with the strategy request form), and a summary of each agency's contribution. The minutes will also include an analysis of risk, the decision as to if a section 47 investigation will be undertaken and set out immediate and longer-term safeguarding actions. All actions will identify who does what by when. The minutes will also record if there is any agency dissent.

5.3 The minutes are not a verbatim recording of who said what, but a summary of information provided, analysis and smart plans. The Chair will ultimately decide as to any exclusion of irrelevant information from the minutes. The CSCA/minute-taker will be provided with specific training around taking strategy minutes to improve quality and consistency. (see training plan) CSCAs are also encouraged to clarify directly with professionals if there is any uncertainty from the meeting.

5.4 A copy of the minutes should be sent to each agency/professional that was invited to the strategy meeting **within a maximum of 5 working days**. (a copy does not need to be sent to any professional with access to LCS). Copies should also be sent to:

- The **child's GP**.
- The **Named Nurse Community Child Health Partnership** (through the Sirona Safeguarding Team). Bristol Community Health will then ensure that the Health Visiting Team (if child is under 5), and school nurse receives a copy of the notes.
- The **Designated Safeguarding Lead in the education provider** that the child attends: Early Years; Primary; Secondary and post 16.

Consideration should also be given to which other professionals, involved with the family, that should receive a copy of the minutes.

A copy should also be sent to the team's service Manager/ Deputy Service Manager.

6 OUT OF HOURS

- 6.1 Strategy discussions are undertaken out of hours, overnight and at weekends by the Emergency Duty Team (EDT). This usually includes a social worker, police and the on-call Community Pediatrician. The discussion should be recorded and emailed to either First Response or the Consultant Social Worker/Practice Lead/Team Manager responsible for the child. The recording of an out-of-hours Strategy discussion must be sent before the start of the next working day.

6 CONTEXTUAL SAFEGUARDING (including complex strategy guidance)

Contextual Safeguarding is an approach to understanding, and responding to, young people's experiences of significant harm beyond their families. Traditional approaches to protecting children/young people from harm have focussed on the risk of violence and abuse from inside the home, usually from a parent/carer or other trusted adult and don't always address the time that children/young people spend outside the home and the influence of peers on young people's development and safety.

Contextual safeguarding recognises the impact of the public/social context on young people's lives, and consequently their safety. Contextual safeguarding seeks to identify and respond to harm and abuse posed to young people outside their home, either from adults or other young people. It's an approach that looks at how interventions can change the processes and environments, to make them safer for all young people, as opposed to focussing on an individual.

Contextual Safeguarding

Contextual Safeguarding is applicable to a wide range of risks which can potentially cause significant harm to children and young people where the prime cause of harm is outside of the family. This list isn't exhaustive but includes:

- peer on peer and relationship abuse
- criminal/ sexual exploitation/ online abuse
- missing episodes
- children being harmed through violence (outside the home)
- risks associated with gangs
- risks associated with radicalisation
- safeguarding risks in public spaces
- trafficking and modern slavery

A strategy discussion should be held whenever there is reasonable cause to suspect that

a child is suffering or is likely to suffer significant harm due to extra-familial harm. Extra familial harm is a safeguarding issue and will require consideration for threshold for strategy meeting / Section 47.

- Extra-familial harm strategy meeting is the same as any other strategy meeting, but will focus on issues relating to contextual harm/exploitation.
- Manager will take a view about whether strategy meeting needed.
- An extra familial harm strategy meeting will be for those where there is some evidence to suggest a risk of significant harm, e.g. incident, disclosure, injury, patterns or length of missing episodes.

Definition of complex abuse

Complex abuse can occur both as part of a network of abuse across a family or community, and within institutions such as residential homes or schools. Such abuse can be significantly traumatic for the children involved. Investigations can be time-consuming and requires specialist skills from police, social work staff and wider agencies. They become even more complex at times due to number of places and people involved, and the period of abuse. Complex abuse is defined in Working Together to Safeguard Children as, 'abuse involving one or more abusers and a number of related or non-related abused children and young people (3 or more). The abusers concerned may be acting in concert to abuse children, sometimes acting in isolation, or may be using an institutional framework or position of authority to recruit children for abuse.'

When is a complex strategy discussion required?

A complex strategy discussion is of the same statutory status as a strategy discussion. If any professional identifies that there is complex or organised abuse, a complex strategy discussion should be completed. This should be in line with Bristol's Threshold document. For children open to Bristol children's social care discussion with relevant manager should be undertaken to agree the complex strategy meeting. If agreed a request for a complex strategy discussion must be convened. If child(ren) are not open to Bristol children's services the referring agency needs to send a referral to First Assessment for progression.

Who must the discussion include and who Chairs?

The complex strategy meeting must be chaired by a senior social work manager at a grade no lower than a Deputy Service Manager or Social Work Team Managers who have proven experience and expertise in this area.

All identified professionals should be invited; this may include professionals from other local authorities as well as external agencies. You will need to consider the non-traditional safeguarding partners when planning a strategy/complex strategy meeting for extra familial harm.

Discussion and planning

The strategy discussion should have a clear safety plan about how a child(ren) is/are going to be safeguarded during the enquiry. The Home Office disruption plan should form part of the overall safety plan. It should also identify what actions are to be taken by whom and when and in addition, what support is required. In terms of planning for the safety of the child the strategy discussion should consider all areas that form a part of any strategy discussion and in addition

- Clear description of the concerns (avoidance of victim blaming language) including themes and patterns.
- Mapping in terms of locations, buildings, peers and include safe spaces.
- Any peers (negative or positive) and/or any peer on peer abuse.
- Children who may be alleged perpetrators should also be discussed to understand the impact of contextual issues on their safety and welfare.
- The children who may be in current contact with possible perpetrators of abuse and Children who were, but no longer are, in contact with possible abusers.
 - Possible victims who are now adults (we will need to consider children preparing for adulthood up to age 25).
- Consider any immediate protective action required (reference application to the National Referral Mechanism).
- Consider wider safeguarding risks within the community.
- A clear plan that includes diversion tactics to disrupt the perpetrators and who is taking what action and by when. Consider any other actions which may disrupt harmful activities, e.g. any relevant Orders to be served on perpetrators of abuse or where licensed operations are involved, suspension of licenses or contracts, pending further enquiries.
- Identify any police action that may be taken (reference to the Home Office disruption toolkit). 4 V3/Original January 2020
- Parents' role in safeguarding their child and when the child will be seen.
- Any information stemming from a return home interview.
- The exploitation screening tool should also be referenced to within the strategy discussion.
- Any social media sites or activity of concern.
- Plan should also discuss whether any media activity/alerts are required.
- The outcome of any strategy discussion (complex or not) should conclude whether there is a need for an individual assessment and/or commencement of s.47 investigations, and rational.
- If a N2K notification is required



8 THE DISPUTE RESOLUTION

- 8.1 This strategy meeting process is designed to provide a framework for a constructive relationship and minimise the likelihood of dispute arising between services. However, it is acknowledged that it cannot cover every eventuality and wherever possible any disputes should be resolved in the spirit of co-operation and partnership at the level closest to the area of dispute. In the event that it cannot be resolved at that level, please refer to the Escalation Procedure - Resolution of Professional Disagreements in Work Relating to the Safety of Children [kbsp-childrens-escalation-procedure.pdf \(bristolsafeguarding.org\)](#)