Checklist - Child Protection Conference

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| Date of Call to CPCT |  | Completed by |  |  |  |
| Social Worker |  | Strategy Meeting Date |  | Area | Choose an item. |
| Venue |  | Initial Conference Date |  | Time | Choose an item. |

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| TO BE COMPLETED BY SOCIAL WORKER | |
| **Do any of the parents have their own Personal Advisor or Social Worker? (If so please provide name & email address)**  **Are Probation involved with any of the adults (if so please give Probation Officer’s name/email address on invitation list)** |  |

Please return this form completed on the same day as the request for an ICPC to the Child Protection Conference team: [scsreports@gloucestershire.gov.uk](mailto:scsreports@gloucestershire.gov.uk)

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| Date form sent |  | Date form returned |  |

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| Names of Child(ren) to be considered at this Conference | DOB | Identifier | | Address | Has Legal Advice been sought? | | TO BE INVITED  (Y/N) |
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| Parents | DOB | Relationship | PR  (Y/N) | Address | Police research required (Y/N) | | TO BE INVITED  (Y/N) |
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| Significant Others | DOB | Relationship | | Address | Police research required (Y/N) | | TO BE INVITED  (Y/N) |
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| PLEASE ENSURE THAT WHERE THERE ARE STEP PARENTS/PARTNERS WITHOUT PR FOR THE CHILD(REN), THEIR ATTENDANCE AT THE CONFERENCE IS PROPORTIONAL TO THEIR INVOLVEMENT IN THE CHILD(REN’S) LIVES. | | | | | | | |
| Older or Previous Children | DOB | Identifier | | Address | | Police research required (Y/N) | TO BE INVITED  (Y/N) |
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| Reason(s) why a Child Protection Conference is being requested  Please note the information typed here will be copied verbatim into the professionals invite to conference |
| *“Following a Strategy Discussion Meeting held on 22 May 2018 it was agreed that an Initial Child Protection Conference is being held as the above named child/ren are likely to be at risk of significant harm. For further clarification/information please contact Kat Conway (Social Worker).”* |

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| **Who needs to be invited?** | | |
| **Role** | **Name** | **CONTACT EMAIL ADDRESS (WE DO NOT POST INVITATIONS)** |
| **HEALTH** |  |  |
| Hospital Trust (Emergency duty, Paediatricians and Midwife) |  |  |
| Together Trust (CYPS, Mental Health Services adult and child) |  | [GLCCG.GCSSafeguardingChildren@nhs.net](mailto:GLCCG.GCSSafeguardingChildren@nhs.net) |
| GP Care (GP and Dentist)  Invitations must only be sent to GP Safeguarding lead for Surgery and to the Practice Manager. |  |  |
| Care Services ( Health Visitor, school health nurse, Community nurse, Occupational therapist, speech and language therapist and Physiotherapist) |  | [ghn-tr.safeguarding.children@nhs.net](mailto:ghn-tr.safeguarding.children@nhs.net) |
| SWAS (Ambulance service) |  |  |
| **POLICE** |  |  |
| Police CRU | Generic email address | [cruenquiries@gloucestershire.pnn.police.uk](mailto:cruenquiries@gloucestershire.pnn.police.uk) |
| Probation Service | Designated email address | [richard.temple@workinglinkssecure.co.uk](mailto:richard.temple@workinglinkssecure.co.uk) |
| Youth Offending Team |  |  |
| **EDUCATION** |  |  |
| School/s |  |  |
| Nursery/ Pre-school |  |  |
| **CHILDREN SERVICES** |  |  |
| Team Manager - current |  |  |
| Social Worker - current |  |  |
| Team Manager receiving transfer |  |  |
| Social Worker – receiving transfer |  |  |
| Parent(s) Social Worker or Personal Advisor |  |  |
| Early Help Services (Families First, Targeted Support Team) |  |  |
| **VOLUNTARY SERVICES** |  |  |
| Domestic Abuse Services (GDASS) |  |  |
| Drug & Alcohol Staff (Turning Point, CGL) |  |  |
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| **CHILDREN CENTRES** | **CHILDREN’S CENTRE MUST BE INVITED TO CONFERENCES WITH CHILDREN UNDER AGE OF 5** |  |
| Children Centre / Early Years Staff |  |  |
| **INTERPRETERS** |  |  |
| AA Global |  |  |
| **LOOKED AFTER SERVICES** |  |  |
| Foster Parent(s) |  |  |
| Adoption & Fostering S/W |  |  |
| **ADVOCACY** | **ADVOCATES MUST BE INVITED TO ALL CONFERENCES WITH CHILDREN OVER THE AGE OF 11 THIS IS THE RESPONSIBILITY OF THE SW** |  |
| Advocate – Barnardo’s / CCP  Telephone Number 01684 850586 |  |  |
| GDAS |  |  |

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| **Reminder of issues to consider when booking in a Conference** | | |
| **Issue** | **CONSIDERED**  **(Y/N)** | **CHAIR ALERTED**  **(Y/N)** |
| Details of adults attending conference to provide emotional support must be shared with the CP Conference team so that necessary police checks are undertaken |  |  |
| Special considerations e.g. disability, language |  |  |
| Childcare - is this needed? how will it happen? |  |  |
| Issues that impact upon conference functioning and invitations to family members’  e.g. risk of violence, domestic abuse, issues that require consultation with the Chair |  |  |
| Has the attendance of the child(ren) been considered?  (If 11 years or over and prepared for conference. If not, how will their views be sought?) |  |  |

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| **Columns A-F completed on Initial Conference Performance Monitoring spreadsheet 🞎**  **S:\GENERAL\Performance Monitoring\2014\Initial Conference Performance Monitoring monthly spreadsheet *Tick*** |
| **Completed by:** |

**Admin Use Only**