Bromley Safeguarding Children Partnership

MULTI-AGENCY STRATEGY DISCUSSION/ MEETING PROTOCOL

May 2023

www.bromleysafeguarding.org

The purpose of this protocol is to set out the shared responsibility for undertaking multi-agency Strategy Meetings/Discussions in Bromley. The principles of this protocol are based on the requirements as set out in the London Safeguarding Children Procedures and Practice Guidance and Working Together to Safeguard Children 2018.

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Strategy Discussions and Meetings in Bromley – The Fundamentals

Whenever there is reasonable cause to suspect that a child is suffering, or is likely to suffer, significant harm, there should be a Strategy Meeting/Discussion.

This protocol highlights the importance of joint working practices and the shared responsibilities of Children's Social Care (CSC), the Police, Health and other partner agencies to work together to safeguard children.

In the initial stages of an enquiry the sharing of information, the quality of the communication and the willingness to jointly respond are essential in deciding how child protection enquiries should be conducted. Enquiries must be child focused as well as addressing the parallel priorities of agencies.

It is appreciated that it is not possible for protocols to cover all eventualities. The overriding principle must be safeguarding children and compliance with the law and good practice guidance and in consideration of each agency's own child protection procedures.

The terms Strategy Discussion and Strategy Meeting are used interchangeably. Whilst the former is often used to refer to a discussion on the telephone, and the latter for meetings held face to face or virtually, this does not mean there is a two-tier system of meetings. Professionals often refer to these meetings/discussions as 'Strats'.

A Strategy Meeting/ 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.

More than one Strategy Meeting/Discussion may be required. Reconvening a Strategy Discussion should not be a routine process and, if reconvened, there should be a clear rationale for doing so. Reconvened meetings must be timely and the attendance requirements remain the same as for the first meeting. Usually, the need for a further Strategy Meeting/Discussion is considered at the initial meeting, especially when further information is needed. The date to reconvene should be decided at this meeting and should be set for the shortest possible timeframe. For example, in cases of suspected non-accidental injuries in children, a further Strategy Meeting/Discussion may be required to consider results of the medical investigations. In cases of a missing child/young person, further Strategy Meeting/Discussions may be required until they are found[1].

Where there is professional disagreement about Strategy Discussions/Meetings, the BSCP Escalation Procedure should be followed. This can be found on the BSCP website under 'Policies and Procedures'.

[1] See Appendix 5 for specific additional guidance on children/young people missing from care.

1. Convening a Strategy Discussion/ Meeting in Bromley: Decision Making and Who To Invite

a. Children's Social Care

A Children's Social Care Team or Group Manager will decide whether a Strategy Meeting/Discussion will take place. The decision may be based on a recommendation from the Children & Families Hub Manager or other professional, depending on where the current concern has arisen.

Children's Social Care is responsible for co-ordinating and chairing the Strategy Meeting/Discussion.

Working Together 2018 states that "A local authority social worker, health practitioners and a police representative should, as a minimum, be involved in the strategy discussion. Other relevant practitioners will depend on the nature of the individual case." Where children are of school age, the relevant education professionals should always be invited. The invitation should make clear that the meeting is a Strategy Discussion/ Meeting and not be called a 'multi-agency meeting' or 'professionals meeting' as this causes confusion.

TIMING: The decision on when to hold the Strategy Meeting/ Discussion should be made in line with risk and need rather than based on availability of the professional network. Strategy meetings / discussions should be convened within three working days of child protection concerns being identified, except in the following circumstances:

- For allegations / concerns indicating a serious risk of harm to the child (e.g. serious physical injury or serious neglect) the strategy meeting / discussion should be held on the same day as the receipt of the referral;
- For allegations of penetrative sexual abuse, the strategy meeting / discussion should be held on the same day as the receipt of the referral if this is required to ensure forensic evidence;
- Where immediate action was required by either agency, the strategy meeting / discussion must be held within one working day;
- Where the concerns are particularly complex (e.g. organised abuse / allegations against staff) the strategy meeting / discussion must be held within a maximum of five working days, but sooner if there is a need to provide immediate protection to a child.

In Bromley, we always aim to convene a Strategy Meeting/Discussion within 24 hours of child protection concerns that may meet the Section 47 threshold as this represents best practice in planning actions that may need to be undertaken to safeguard children.

Sometimes it is necessary to hold a Strategy Meeting/Discussion at extremely short notice when the risks to the child are too great to wait until the next day. It is acknowledged that these are very difficult for professionals to attend so social workers will only do this when absolutely necessary and this practice must not be routine.

b. Police

The allocated social worker or responsible CSC manager will contact the Police Single Front Door[2] to organise the Strategy Discussion/Meeting. The single point of access for Strategy requests to the police includes the following teams in Bromley: CAIT (familial child abuse), CSE/CCE, Missing, Gangs, Online Indecent Image Abuse, Community Safety Unit, CID and SAPPHIRE.

Form 87A[3] must be sent to:

SNMailbox-.PublicProtectionReferrals@met.police.uk

If the referrer needs to speak to the police SPOC referrals staff they should send an email requesting a call or add that request to the 87A on submission.

If the social worker knows the name of the police officer involved in the case, this should be stated with the request.

South BCU operates a live calendar showing available slots for attendance at Strategy Meetings. Social Workers should obtain the link to this from their Manager.

For out of hours emergency Strategy Discussions (after 5pm), contact the South BCU Operations Room on **SNMailbox.OperationsRoom@met.police.uk** and copy in **SNMailbox-.PublicProtectionReferrals@met.police.uk**

In the case of missing children/young people, additional police forces other than Metropolitan Police Service South BCU, will need to be included if the child has gone missing from a care placement outside Bromley[4].

c. Health

It is important that the most appropriate health professional or professionals attend Strategy Meetings/Discussions. For example, a 'Strat' for a family with an under five and a pregnant mother with concerns about domestic abuse would have to include the Health Visiting Service (Bromley Healthcare) and Midwifery (the hospital where mother is receiving antenatal care). The health visitor has no access to the maternity records and vice versa, as they are in different organisations.

[2] Went live 28th February 2021 and covers Bromley, Croydon and Sutton boroughs. Operational 9am – 5pm.
[3] A copy is included in Appendix 4. This is the revised Form 87A for use from January 2021 onwards.
[4] See Appendix 5 for specific guidance about Strategy Meetings for Children Looked After who are missing.

- **How do I know who to invite from the health economy?**

In the request for a Strategy Meeting, it must be clear whom the Strategy Meeting/ Discussion is for and what the presenting safeguarding issues are.

- **If the child is in hospital:**

For children in hospital, the Paediatric Consultant responsible for the child's care at the relevant hospital should be invited to the Strategy Meeting. There is always a paediatrician on duty. The hospital's Safeguarding Team will assist you if you don't already have the paediatrician contact details as part of the referral.

Contact details for the Safeguarding Team at our local hospital, the PRUH (Princess Royal University Hospital) at Farnborough and Kings Denmark Hill site, both run by Kings College Hospital is **kch-tr.safeguardingchildren@nhs.net** or call 0203 299 1187. If out of hours, contact Switchboard and ask for Paediatrician on duty. PRUH: 01689 863000 /Denmark Hill: 020 3299 9000

Working Together states that if the child is receiving services from a hospital or child development team, the meeting / discussion should involve the responsible medical consultant and, in the case of in-patient treatment, a senior ward nurse.

Be aware of other siblings/other children who may also be at risk. The hospital paediatrician will only make decisions about the child currently in hospital so you may need to invite additional health professionals.

- **If the child is not in hospital:**

The Strat Discussion /CP Referral Form (Appendix 4b) or the 87a (Appendix 4a) form should be sent to:

Bromh.safeguardingchildren@nhs.net

BHC Safeguarding Team, liaising with the Community Paediatrician if required, will consider who is best placed to attend the Strategy Meetings for Community Health.

Where issues have significant medical implications (e.g. child sexual abuse - CSA, anal warts, physical injury, severe neglect, female genital mutilation, fabricated/ induced illness), or a Paediatric Examination has already taken place or may be necessary (because of significant physical harm or neglect), then a Community Paediatrician should always be included in the Strategy Discussion. This is stipulated in Working Together. The BHC Safeguarding Team will contact the Community Paediatrician on **Bromh.safeguardingreferrals@nhs.net** using the form in appendix 4b.

- **Where a case is already open to CSC or known to a Healthcare Professional**:

  A completed 87a referral form (see Appendix 4a) should be sent directly to the health professionals already working with the family, such as the CLA nurse /Health Visitor/ School Nurse/ Midwife etc, as well as the generic email for that service (in case the Practitioner is on leave or sick). Social Workers/Manager should use the health team generic emails as well as individual ones as the specific professional may be unavailable on the day in question. Generic team emails are checked frequently, and attendance cover can be arranged, and records can be checked by whoever is on duty that day. See Appendix 1 for a list of generic teams contact details.

  In the request for a Strategy Meeting, be clear exactly who the Strategy Meeting/Discussion is for and what the presenting safeguarding issues are. In your invitation, highlight when the Strategy Meeting/Discussion will be – date and time, and where (if virtual, send link).

  The allocated social worker or responsible CSC manager can see the relevant health professionals (including Paediatrician) involved with the child to be part of the Strategy Meeting/Discussion on the child's CSC case record (check the 'atom' in Liquid Logic) and should contact them directly. It is likely the SW will already have a professional relationship with the allocated health visitor/ midwife/ CAMHS professional/ GP/ school nurse etc.

- **For missing Children Looked After**, the CLA Nursing Team should also be invited to the Strategy Discussion/Meeting[5].

If there is any doubt which health professionals should be invited, send the Strat Discussion / CP referral form in Appendix 4b or the 87a Form (Appendix 4a) to **Bromh.safeguardingchildren@nhs.net** to ask for support.

d. Other relevant agencies/professionals

- The allocated social worker or responsible CSC manager must invite other relevant agency / professionals to participate in the Strategy Discussion; This could be the child's nursery/ school/ college and/or an out of school setting and/or the early intervention service

[5] See Appendix 5 for specific guidance about Strategy Meetings for Children Looked After who are missing.

currently engaging with the family and/or residential or fostering service if the child is looked-after– whoever holds information relevant to the concerns about the child.

- If the referrer is a professional, they should always be invited to a Strategy Meeting/Discussion.
- Sometimes a professional may need to be included in the Strategy Meeting / Discussion who is not involved with the child, but who can contribute expertise relevant to the particular form of abuse or neglect in the case.

See Appendix 8 for a quick guide for social workers to use as a prompt for who to invite to a Strategy Meeting.

2. Strategy Discussions/ Meetings- EXPECTATIONS of each agency

The Government's expectations of social workers, health practitioners and the police attending a Strategy Discussion/ Meeting are clearly set out in Working Together 2018 (chapter 1). The absence of police or health colleagues makes a Strategy Meeting/ Discussion inquorate. Where either of these professionals are unable to attend within the timeframes set out by WTA 2018 reasons for non-attendance should be clearly recorded and escalated to senior managers.

Working Together is clear that Strategy Discussions/Meetings are for decision making and not simply information sharing. Each agency has a responsibility in this regard and all attendees should be sufficiently senior to make decisions on behalf of their organisation and agencies.

Additional expectations for all agencies in Bromley are:

- Where an agency cannot attend a Strategy Discussion/ Meeting in person[6], then the expectation is that the agency will participate in a conference call[7].
- It is important that all invited partner agencies participate in the Strategy Meeting/ Discussion to ensure that there is good quality information sharing and timely decision making between partner agencies. At times, children / young people will need immediate safeguarding and Strategy Meetings/Discussions are convened at very short notice[8]. This will impact on how much research is completed prior to the meeting. All professionals should endeavor to share as much information as possible and provide fuller information as soon as possible after the meeting. Where professionals are unable to attend in person or join virtually, agencies should provide a written report about the information they hold or wish to be taken in to account. This will need to be emailed to the Team Manager leading the Strategy Discussion/ Meeting.
- All participants contributing to the Strategy Discussion/Meeting are expected to bring relevant family history, curiosity and challenge to the discussion. This will ensure that a robust plan of action is formed with the welfare of the child at its centre.
- All participants of a Strategy Discussion/Meeting should be sufficiently senior to make decisions on behalf of their agencies.
- The Strategy Discussion/Meeting participants will make decisions based on multi-agency information. This will include decisions about the immediate and short-term action to be taken to safeguard the child/ren or young person. It is for this reason that participation in

[6] Following the Covid19 pandemic face to face meetings among professionals are often replaced with online meetings.

[7] The Bromley Conference Calling System: The Bromley R&A Administrator will telephone and/or email invitations to the Strategy Discussion/ Meeting giving a date and time for the Strategy Discussion/Meeting to take place with the telephone and PIN (number) for the partner agency to telephone and join the conference call.

[8] See Appendix 3 – Immediate Response, taken from Working Together 2018.

Strategy Discussion/Meetings is so important – no agency can afford to wait until the ICPC to share information. All Strategy Meetings/ Discussions should conclude with an interim safety plan.

- All children within the household should be considered as part of the Strategy Meeting/Discussion, even if the concerns only relate to one child.
- Where a decision is made that an Initial Child Protection Conference (ICPC) is required, the referral to the Bromley Quality Improvement Service must take place within 24 hours of the decision being made. The QI service will set up a date for the ICPC within 15 working days of the decision.
- It is the responsibility of the Chair of the Strategy Meeting / Discussion to ensure that the decisions and agreed actions are fully recorded. All agencies attending should take notes of the actions agreed at the time of the meeting/discussion. A copy of the Strategy Meeting / Discussion record should be made available for all those, who had been invited, within 24 working hours of the meeting by CSC.
- All agencies attending should record when the Strategy Discussion/Meeting took place and what the agreed actions and decisions were, on their own case recording system.
- A Strategy Meeting in person rather than a conference call will take place for more serious/complex concerns[9].
- Where there is an allegation that a child has abused another child - separate Strategy Meetings should be held for each child. Different workers in different teams should be allocated to ensure there is no conflict of interest.

3. A Strategy Meeting / Discussion should be used to:

- Share available information
- Agree the conduct and timing of any criminal investigation
- Decide whether an assessment under S.47 of the Children Act 1989 (S.47 enquiries) should be initiated or continued if it has already begun.

[9] London CP Procedures state face to face meetings are likely to be more effective than telephone calls where:

- There is concern that the child is suffering complex types of neglect or maltreatment (see **Fabricated or Induced Illness** and **Organised and Complex Abuse**);
- There is an allegation that a child has abused another child - separate strategy meetings should be held for both children (see **Children Harming Others**);
- There are ongoing, cumulative concerns about the child's welfare and a need to share concerns and agree a course of action;
- There are concerns about the future risk of harm to an unborn child.

This list is not exhaustive.

NOTE: During Covid19 pandemic face to face meetings among professionals are replaced with online meetings.

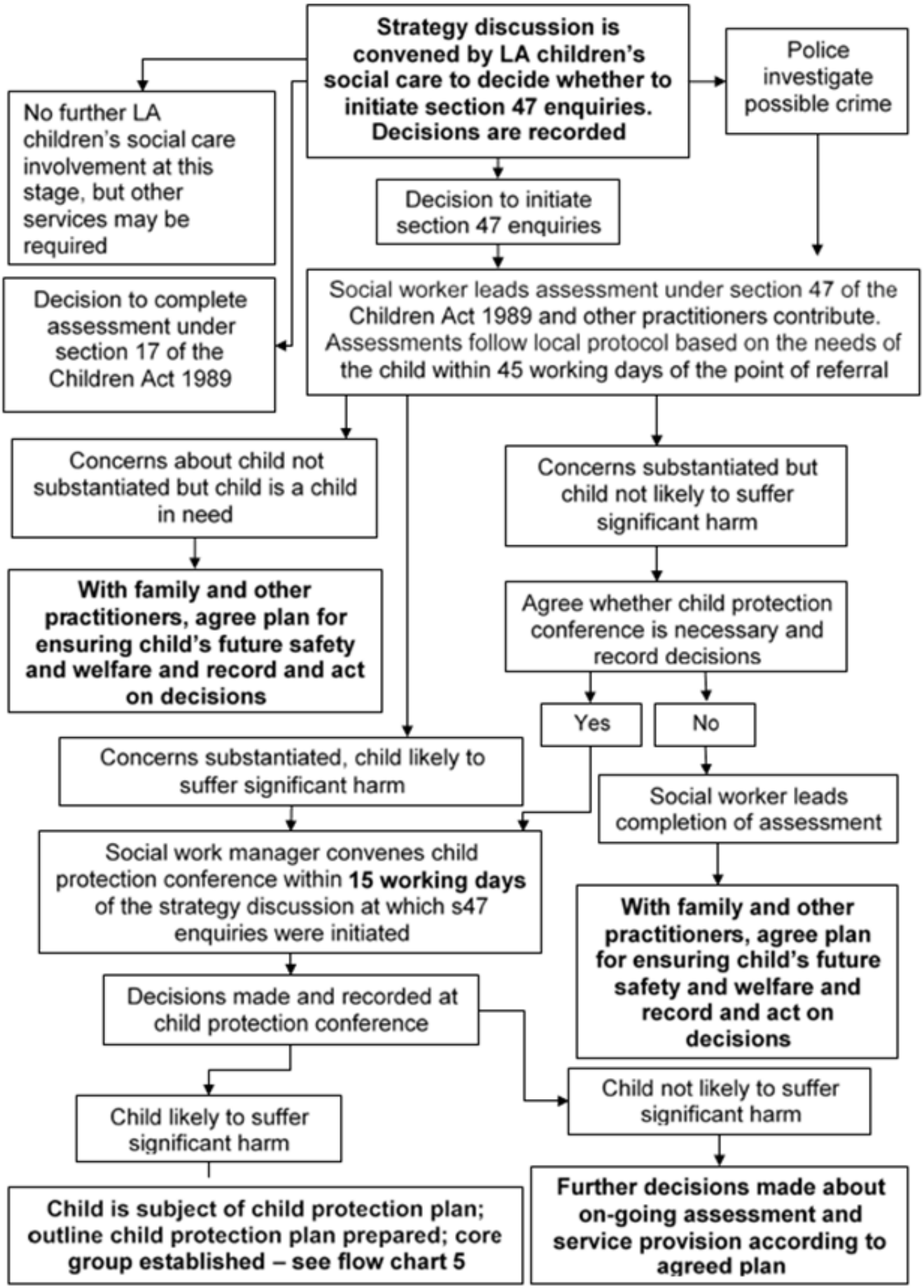
Where it **is** decided that there are grounds to initiate a S.47 enquiry under Children's Act 1989:

- A decision must be made whether this is a Single or Joint Investigation. In cases where a Single Agency investigation is agreed the reasons why the Police are not jointly investigating the concerns should be clearly recorded by CSC and Police.
- Plan how the s47 enquiry[10] should be undertaken, including the need for medical treatment, and who will carry out what actions, by when and for what purpose and whether a social media search should be conducted.
- Agree what action is required immediately to safeguard and promote the welfare of the child, and / or provide interim services and support. For example, if the child is in hospital, decisions should also be made about how to secure the safe discharge of the child; or if an Emergency Protection Order is in place or the child is subject to Police Powers of Protection who will do what, by when.
- Determine what information from the Strategy Meeting / Discussion will be shared with the family, unless such information sharing may place a child at increased risk of significant harm or jeopardise police investigations into any alleged offence/s. The reasons for not informing the parents must be clearly recorded by the Chair.
- Determine if legal action is required.
- Agree who should be interviewed, by whom, for what purpose and when. The way in which interviews are conducted can play a significant part in minimising any distress caused to children, and in increasing the likelihood of maintaining constructive working relationships with families when a criminal offence may have been committed against a child. The timing and handling of interviews with victims, their families and witnesses can have important implications for the collection and preservation of evidence. It is good practice for the social worker to attend Achieving Best Evidence interviews.
- Agree when the child will be seen alone (unless to do so would be inappropriate for the child) by the Social Worker during the course of these enquiries and consider the methods by which the child's wishes and feelings will be ascertained so that they can be taken into account when making decisions under s.47.

[10] Local Authority social workers have a statutory duty to lead enquiries under section 47 of the Children Act 1989. The police, health professionals, teachers and other relevant professionals should support the Local Authority in undertaking its enquiries. A multi-agency assessment is the means by which Section 47 Enquiries are carried out. The assessment will have commenced at the point of receipt of referral and it must continue whenever the criteria for Section 47 Enquiries are satisfied. The conclusions and recommendations of the Section 47 Enquiry should inform the assessment which must be completed within 45 working days of the date when the referral was received. The timeframe for the completion of the assessment will be set by the responsible CSC Team Manager, who will also consider and make decisions about how the assessment under S. 47 will be carried out, what further information is required about the child/ren and family and how it should be obtained and recorded.

- Take account of the child's gender identity, age, sexuality, ability/disability and culture as well as the child and family's language, race, ethnicity and religion. Establish whether an interpreter will be required.
- Consider the needs of other children who may be affected (e.g. siblings and other children, such as those living in the same establishment, in contact with alleged abusers).

The following flowchart (flowchart 4 from Working Together 2018) shows the possible actions following a Strategy Discussion/ Meeting.


Strategy discussion is convened by LA children's social care to decide whether to initiate section 47 enquiries. Decisions are recorded
Police investigate possible crime
No further LA children's social care involvement at this stage, but other services may be required
Decision to initiate section 47 enquiries
Decision to complete assessment under section 17 of the Children Act 1989
Social worker leads assessment under section 47 of the Children Act 1989 and other practitioners contribute. Assessments follow local protocol based on the needs of the child within 45 working days of the point of referral
Concerns about child not substantiated but child is a child in need
Concerns substantiated but child not likely to suffer significant harm
With family and other practitioners, agree plan for ensuring child's future safety and welfare and record and act on decisions
Agree whether child protection conference is necessary and record decisions
Yes
No
Concerns substantiated, child likely to suffer significant harm
Social worker leads completion of assessment
Social work manager convenes child protection conference within 15 working days of the strategy discussion at which s47 enquiries were initiated
With family and other practitioners, agree plan for ensuring child's future safety and welfare and record and act on decisions
Decisions made and recorded at child protection conference
Child not likely to suffer significant harm
Child likely to suffer significant harm
Child is subject of child protection plan; outline child protection plan prepared; core group established – see flow chart 5
Further decisions made about on-going assessment and service provision according to agreed plan

Appendix 1: Contacts to use when convening Strategy Meetings/ Discussions

The generic team emails below should be used when requesting attendance at a Strategy Meeting/Discussion as the specific professional involved with a child/family may be unavailable on the day in question. Generic team emails are checked Monday to Friday, 9am to 5pm. Attendance cover can be arranged, and records can be checked by whoever is on duty that day. Where they exist, out of hours contact details are also included below.

ORGANISATION and TEAM	CONTACT DETAILS
Police	
Single triage front desk (for all Bromley police Strategy requests) 9am – 5pm	SNMailbox-.PublicProtectionReferrals@met.police.uk
Out of Hours SN BCU Police Operations Room (5pm – 9am) for emergency Strategy Discussions overnight	SNMailbox.OperationsRoom@Met.police.uk Also copy in: SNMailbox-.PublicProtectionReferrals@met.police.uk
Bromley Healthcare	
BHC Safeguarding team	Bromh.safeguardingchildren@nhs.net
Community Paediatricians	bromh.safeguardingreferrals@nhs.net 07864 949 564 or 0208 466 8800
Health Visiting Service (for 0-5 year olds)	bromh.bromley0to19@nhs.net 0300 5777 3000
School Nurses (for school aged children attending school in Bromley[11])	Bromh.snsafeguarding@nhs.net
Children Looked After Nursing Team	BROMH.lookedafterchildren@nhs.net
Family Nurse Partnership	bromh.fnpbromley@nhs.net
BHC Child Protection	bromh.safeguardingreferrals@nhs.net

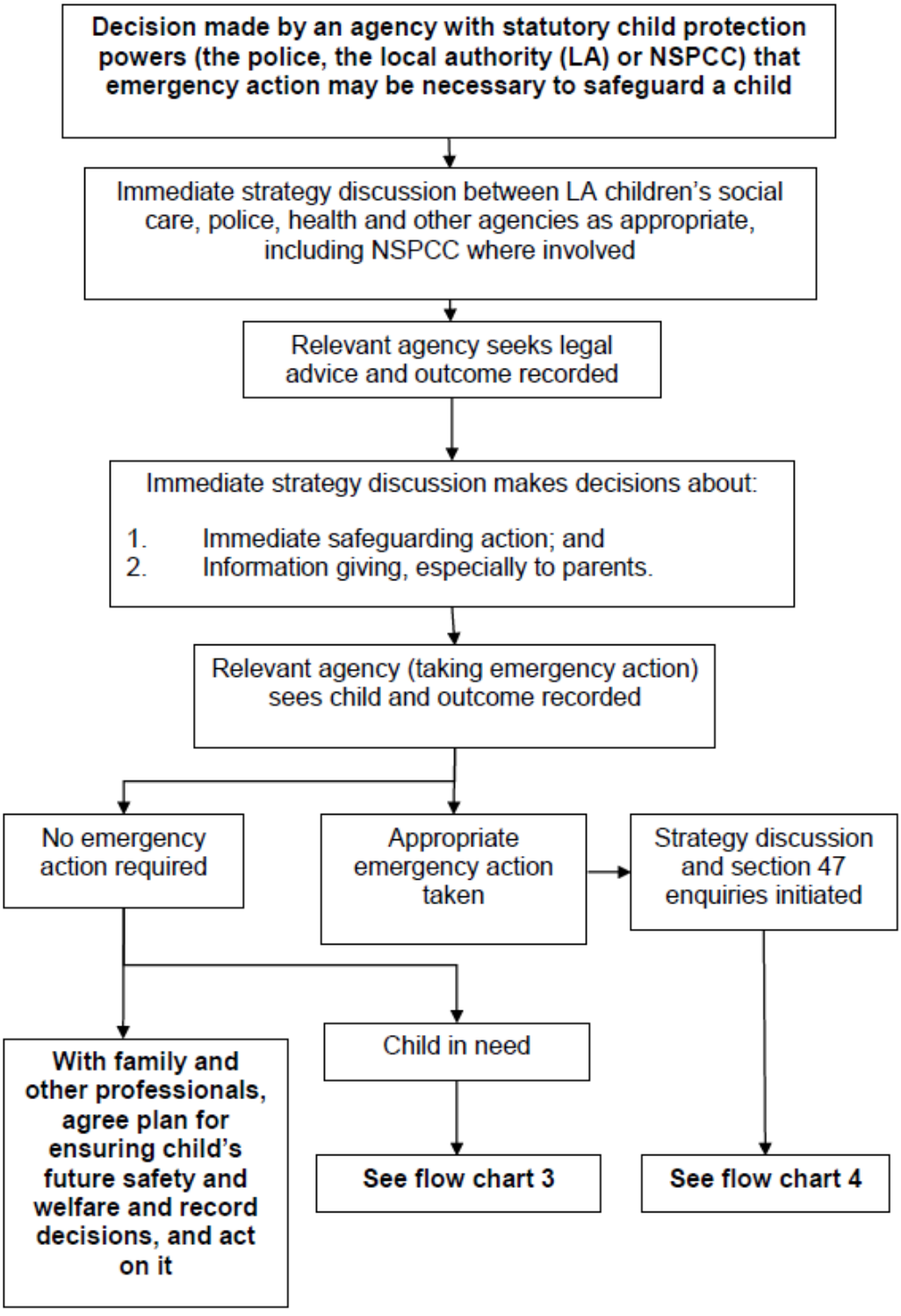
[11] For Out of Borough School Nurse team contact details, please see appendix 6.

	02084669988
Community Nursing Team (CCNT)	bromh.ccntnurses@nhs.net 020 8315 4691
Health C&F Hub inbox	Bromh.mash@nhs.net
Sexual health services	bromh.sexualhealth@nhs.net
Talk Together	0300 003 3000
Oxleas	
CAMHS	oxl-tr.Bromleycamhsadmin@nhs.net
Perinatal Mental Health Service	oxl-tr.oxleasperinatalmentalservice@nhs.net
Adult Mental Health Services	Where referral is for parental mental health: oxl-tr.igteam@nhs.net *See flowchart appendix 6 for information gathering from Adult Mental Health Services.* If in doubt of who to invite, contact the Oxleas Safeguarding Team oxl-tr.safeguardingchildren@nhs.net
Kings College Hospital NHS Trust for Princess Royal University Hospital (PRUH) and Denmark Hill	
Kings Safeguarding Team to find out which hospital paediatrician to contact if unknown	kch-tr.safeguardingchildren@nhs.net 0203 2991187 Out of hours, contact Switchboard and ask for Paediatrician on duty. PRUH: 01689 863000 Denmark Hill: 020 3299 9000
GPs	
All social work teams hold a list of GP contact information which is updated regularly. Where a GP is not known, the Duty GP can be	If GP is not known, this can be checked on the NHS Spine by Bromley Healthcare's Safeguarding Team Bromh.safeguardingchildren@nhs.net

contacted for input although they may not be available immediately.	This team can also access EMIS to see GP patient records.
Urgent Care Centres	
Urgent Care Centres at Beckenham Beacon and the PRUH	The Safeguarding Team can be contacted if you do not know the doctor's contact details totally.safeguarding@nhs.net
Substance Misuse Services	
Change Grow Live (Bromley Drug and Alcohol Services – BDAS, and Bromley Changes, the YP service)	Shared mailbox for general enquiries is referrals.bromley@cgl.org.uk To send confidential information, the secure shared mailbox is admin.bromley@cgl.cjsm.net
Education	
Schools/academies/colleges	A directory of all schools and colleges in Bromley is maintained by the LA (updated termly). This is published on the Education Matters website www.bromleyeducationmatters.uk and the council website www.bromley.gov.uk Each school's office email, office phone number and headteacher's name is included.
Local Authority Education Welfare Team (EWS) *EWS has access to systems checking current school attendance and school admissions information. The EWS MASH worker has access to databases checking addresses.*	Education.welfare@bromley.gov.uk 020 8313 4322

Appendix 2: Immediate Protection

Where there is a risk to the life of a child or a likelihood of serious immediate harm, local authority social workers, the police or NSPCC should use their statutory child protection powers to act immediately to secure the safety of the child. Working Together 2018 (chapter 1) gives clear guidance on this and it is not duplicated here. Practitioners must be aware that Immediate Strategy Discussions are sometimes required. WT2018 flowchart 2:



Appendix 3: Links to key guidance and procedures

London Safeguarding Children Procedures
https://www.londonsafeguardingchildrenprocedures.co.uk

Working Together to Safeguard Children
http://www.workingtogetheronline.co.uk/index.html

Bromley Procedures online (Bromley Council Staff Only) on TriX
http://bromleychildcare.proceduresonline.com/index.html

Appendix 4: Local referral forms to Police and Community Health

It is anticipated that these forms will be incorporated as electronic forms on Liquid Logic shortly. In the meantime, please use these Word versions.

Appendix 4a: Form 87A (launched January 2021)

Annex A Redrafted 87A - Nov 2020.docx

Appendix 4b: Referral Form to Community Paediatrician (Bromley Healthcare) revised March 2023

Appendix 4b - Strat Discussion CP Referr

Appendix 5 : Children Missing from Care or Home

Children missing from care or home will be the subject of a Strategy Meeting to plan actions to be undertaken to seek the return of a young person and prevent further episodes of missing from care or home.

As soon as notification of a missing child is received, the CSC Team Manager should make same day enquiries with police as to immediate actions needed to locate the child. All missing children notifications and information must be shared with Missing.Children@bromley.gov.uk

A Strategy Meeting is convened within 72 hours of a child being reported missing and the meeting follows the procedure as set out in the London Safeguarding Children Procedures Practice Guidance for Children Missing from Care, Home and Education The overarching principles for all agencies, including the Metropolitan Police Service (MPS) as the lead agency in seeking the recovery of the child, are:

- The safety and welfare of the child is paramount
- Locating and returning the child to a safe environment is the main objective
- Child Protection procedures may be initiated whenever there are concerns that a child who is missing may have suffered, or is likely to suffer, significant harm.

It is recommended the Strategy Meeting goes ahead even when the child has returned to consider the risks to the young person that may have occurred during the missing period.

For Children in Care

In Bromley, we report all our children in care as missing if they are not where they are expected to be (e.g. not returned by curfew). We do not record children as absent on an unauthorised basis, as significant harm and risk can apply during the shortest time period as well as during longer absences from care or home.

The Strategy Meeting should include police, CSC, the placement provider, CLA health team and the virtual school. The Atlas Data Analyst should be informed by CSC about the Strategy Meeting in order to capture relevant data.

For children missing from care, this procedure can be complicated by the need to involve different Police forces and the involvement on occasions of multiple parts of the Metropolitan Police Service. There may be a process of multiple strategy meetings rather than the commencement of S47 enquiries, and this needs the consistent attendance of a named Police Officer who will coordinate intelligence and information across different parts of the MPS.

MOPAC's Protocol for Reducing Criminalisation of Looked After Children and Care Leavers (2021), which includes the Philomena Protocol, sets out in Chapter 12 the pre-emptive actions expected to be taken by care homes in relation to children with a history of going missing and what to do when those children fail to return to the care home when expected.

For all children missing

Young people who have a pattern of repeat missing episodes or where there are concerns of criminal and/or sexual exploitation should be referred to Bromley MEGA panel.

If there are concerns identified related to the missing episode with regard to trafficking (possibly with links to criminal exploitation and 'county lines' activities), a referral to the National Referral Mechanism should considered.

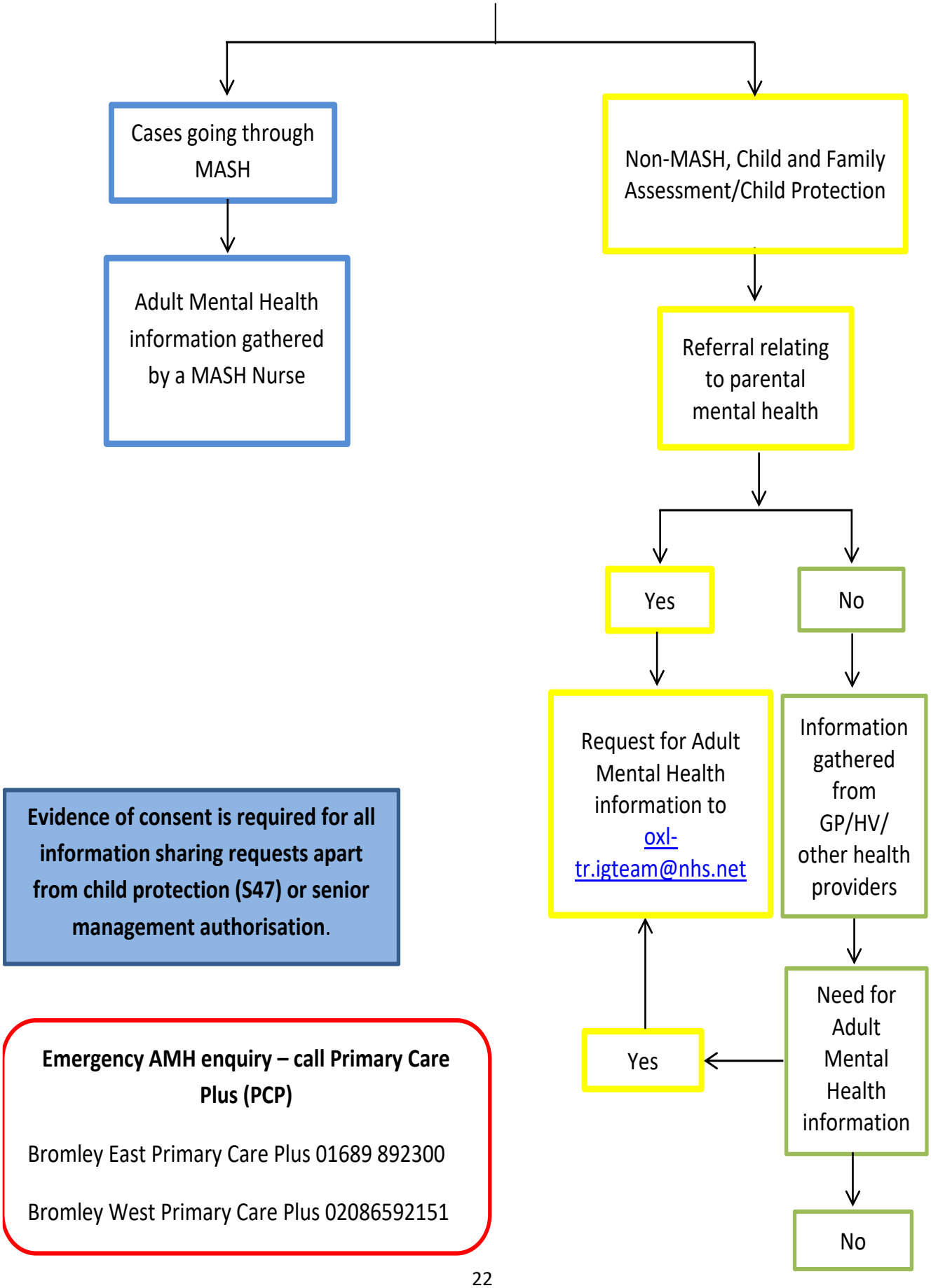
If the young person remains missing for more than 7 days there is an escalation in seniority of staff chairing the meeting to the CSC Head of Service to reflect the level of concern around the missing period.

Young people who repeatedly go missing should have a trigger plan agreed with police colleagues which includes a photo, all information related to known associates, phone details, Oyster/Zip card details and family contacts.

Once the missing episode has been concluded, the young person will be offered a return home interview (RHI). Any RHI intelligence gathered shared with the relevant social worker and recorded on Liquid Logic. Any RHI's should be emailed to the Police Missing Persons Team and a Merlin put on. Trigger plans should also be sent to this team so a CRIMINT can be completed.

The BSCP Missing from Care or Home Protocol includes a flowchart explaining the steps from when a child/young person is reporting missing to RHI stage.

Appendix 6 : Information gathering from Oxleas Adult Mental Health Services



Evidence of consent is required for all information sharing requests apart from child protection (S47) or senior management authorisation.

Emergency AMH enquiry – call Primary Care Plus (PCP)

Bromley East Primary Care Plus 01689 892300

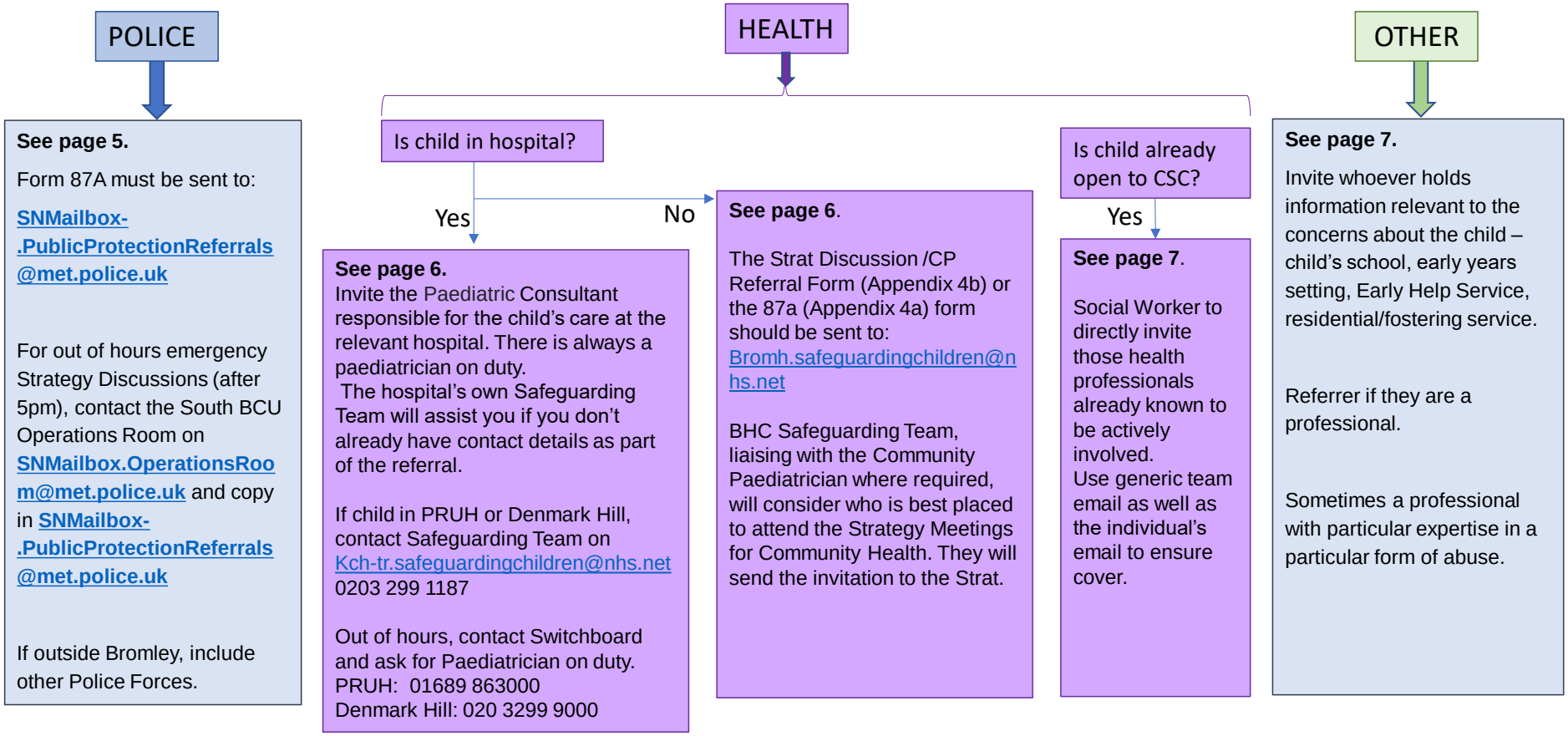
Bromley West Primary Care Plus 02086592151

Appendix 7 – Out of Area/Borough School Nurse teams

Southwark and Lambeth School Nurses	Hub Telephone: 020 3049 4777	Gst-tr.SchoolnurseSPE@nhs.net
Croydon School Nursing team	020 8274 6391/6320 for North Croydon Team 0208 714 2560 for South Croydon Team.	ch-tr.croydonschoolnurses@nhs.net
Lewisham & Greenwich Safeguarding team		Lg.shssafeguarding@nhs.net For A&Es lg.shsscreening@nhs.net
Greenwich School Nursing		oxl-tr.snsouth@nhs.net

Appendix 8

QUICK GUIDE: Who Social Worker contacts when convening a Strategy Meeting



Bromley Safeguarding
Children Partnership

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