



Child Protection Conference Agenda

1. Conference Welcome & Introductions

Welcome/ Purpose of the Meeting/ CSCP Procedures/ Confidentiality Statement/ Apologies

2. Child's Lived Experience and Voice

Is the child/ren at the meeting? How have they contributed? (Direct work, Mind of My Own, advocate, parent/network member or professional speaking on their behalf)

3. Family Network - Connections That Matter

Who is important in this child/ren's and families life and how do they contribute to safety?

4. What are we Worried About?

Identify harm, danger and complicating factors

5. What is Working Well?

Identify strengths, existing safety and protective factors

6. Chairs Summary

Bringing together the shared analysis, understanding the key worries, existing safety, to have a shared understanding of risk and an agreed danger statement

7. Scaling Question – Shared understanding of risk and safety

Initial Child Protection Conference Scaling Question: *On a scale of 0 to 10, where 0 means we have serious worries about the child/ren's safety and feel there is a high level of concern about the possibility of significant harm, and 10 means we have a strong confidence that the child is safe and well cared for, where would you place the situation today? Based on your scaling do you feel the threshold of significant harm is met and a Child Protection Plan is needed?*

Review Child Protection Conference Scaling Question: *Thinking about what has changed since the last conference, on a scale of 0 to 10, where 0 means we continue to have very serious worries about the child/ren's safety and limited confidence that the plan is reducing risk, and 10 means we feel confident that the child/ren is safe and that the Child Protection Plan has made a clear difference, what would you place the situation now? Based on your scaling is the threshold of significant harm still met, and is a Child Protection Plan still required?*

8. What needs to happen next?

Multi-agency, parents and family network safety planning - what needs to happen next to increase safety? What safety goal are we working towards? What will the child experience differently when they are safer? Chairs recommendations.

Decision Making Guidance

Threshold for a Child Protection Plan – Cumberland Safeguarding Children Partnership (CSCP)

The conference should consider the following question when determining whether a child requires a child protection plan:

- Has the child suffered significant harm? and
- Is the child likely to suffer significant harm in the future?

The test for likelihood of suffering harm in the future should be that either:

- The child can be shown to have suffered maltreatment or impairment of health or development as a result of neglect or physical, emotional or sexual abuse, and professional judgement is that further ill-treatment or impairment is likely; or
- A professional judgement, substantiated by the findings of enquiries in this individual case or by research evidence, predicts that the child is likely to suffer maltreatment or the impairment of health and development as a result of neglect or physical, emotional or sexual abuse.

If a child is likely to suffer significant harm, then they will require multi-agency help and intervention delivered through a formal child protection plan.

Discontinuing a CP plan: The conference should use the same decision-making process to reach a judgement for when a protection plan is no longer needed. This includes situations where other multi-agency planning might need to replace a protection plan, such as a Child in Need Plan (CIN, S17).

Professional disagreement should not detract from ensuring a child is safeguarded. Disagreement may happen between professionals within the meeting or while working with the child/ren or family. Disagreements should be able to be resolved with discussion.

Categories for Child Protection Plans (Working Together to Safeguard Children 2026)

Sexual Abuse	Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or nonpenetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.
Physical Abuse	A form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.
Emotional Abuse	The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.
Neglect	The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: a) provide adequate food, clothing, and shelter (including exclusion from home or abandonment) b) protect a child from physical and emotional harm or danger c) ensure adequate supervision (including the use of inadequate caregivers) d) ensure access to appropriate medical care or treatment e) provide suitable education It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.