



GSCP Escalation Protocol 2025

NOTE: The escalation policy provides a structured framework for resolving professional disagreements, ensuring that differences are resolved in a way that prioritises the best interests of the child. This process is strictly used to address concerns about the safeguarding of specific children and should not be used for other matters, such as raising concerns about a professional's conduct or submitting cases for the consideration of safeguarding reviews. Alternative processes exist.

At no time must professional disagreement detract from ensuring that the child is safeguarded. The child's welfare and safety must remain paramount throughout, all decisions must be made in the interest of the child



Gloucestershire Safeguarding Children Partnership



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Document Revision Table

Revision	Date	Comment
1.4	6 TH November 2023	I.S. Review Process
1.5	13 TH March 2024	WT 2023 Compliance
1.6	October 2024	Inclusion of ICB Designated Professionals and agency management levels – RCRP adopted
1.7	September 2024	0124AB Rapid Review Action to review Protocol
1.8	November 2024	Appendix 1 Matrix update following QiiP Meeting confirmation on Health Position
1.9	December 2024	QiiP sign off
1.10	May 2025	Draft Amendments Following Process Review. Changes to Examples and guidance on when the process is used

Escalation Protocol

Introduction

At no time must professional disagreement detract from ensuring that the child is safeguarded. The child's welfare and safety must remain paramount throughout. All Partners and relevant agencies have a legal duty under S11 of the Children Act 2004 to ensure that they have a suitable internal procedure for the management of escalations up to level four within their own agencies. This protocol sets out the partnerships expectations under Working Together to Safeguard Children Statutory Guidance.

This protocol identifies a non-exhaustive list of potential areas of disagreement, guidance on resolving disputes and procedures to be followed when disputes cannot be resolved through discussion and negotiation between professionals at front line level. Some organisations use the term Conflict Resolution or Resolution of Professional Differences, all refer to this escalation protocol.

Purpose and Method of Escalation

The escalation policy establishes a structured approach for addressing professional disagreements, ensuring that differences are resolved in a manner that prioritises the best interests of the child. To achieve this, participants must be fully informed of all relevant details and remain open to listening and considering the perspectives of others. This process is more effective when discussions take place verbally rather than by email.

Raising concerns via email within the escalation policy is discouraged, as it can lead to delays in responses, increase the risk of messages being overlooked or unanswered, and hinder effective communication. To ensure timely and constructive dialogue, the partnership advocates for face-to-face meetings, video conferencing, and telephone calls as preferred methods of engagement.

Resolving an escalation should be a collaborative process. In addition to the parties raising and receiving the issue, other agencies or organisations may be involved if any of the parties concerned believe their participation is in the best interests of the child.

Potential Areas of Disagreement and Escalation

Professional disagreements may arise in various ways. The following examples illustrate common scenarios; however, this list is not exhaustive, and other situations may also require escalation.

- A referral to, or contact with, an agency may result in a response that the referring agency or organisation does not consider effective or in the best interests of the child.
- Concerns exist about the effectiveness of safeguarding activity and whether appropriate plans are in place to protect and promote the welfare of the child. This may relate to formal or informal plans, or the outcome of a strategy meeting.
- Issues arise regarding how an agency or organisation is implementing agreed actions, including concerns over the quality, effectiveness, or timeliness of activities.
- Differing views exist regarding the sharing of information and/or the provision of services.
- Disagreement occurs over how an agency has responded to professional disagreement or the escalation process.

Timescales

All disputes should be resolved in a timely way so that the welfare of the child remains paramount. In some situations, it may be required to instigate all of the stages within a short period of time or to escalate the process so that the safety of the child is not compromised.

Stage One: Resolving Disputes

Most disagreements can be resolved through discussion and negotiation, and this is within the remit of all professional's day to day interactions under multi agency practice. However, if they are unable to do so, any ongoing disagreement must be reported to their line managers or equivalent. Generally, the relevant line managers will be able to support the professional to resolve the disagreement. This contact should take place within twenty-four hours or sooner depending upon the urgency of the situation. The purpose of this contact is to review the available information and to resolve the concern in the interest of the child or children.

Any action agreed should be fed back immediately to the relevant professionals and managers involved. The detail of the disagreement and resolutions reached should be recorded on the child's file. Ongoing communication is key to ensuring disputes are resolved in a timely manner. Disputes should not be escalated to the next stage without appropriate communication between relevant professionals.

Where it is not possible to resolve the matter at professional and front-line management level, the matter should be referred without delay to second tier management (Stage Two).

Stage Two: Informal Dispute Procedure

When stage one has not been successful in resolving a dispute, the issue must be considered at second tier management level and/or include Team Around the Family. Direct communication must take place between all involved agencies, this is likely to be Group Manager within Children's Services, Named Safeguarding Professionals within Health Trusts or equivalent levels within all partners and or relevant agencies (see Appendix 1)

If the area of conflict relates to whether a case meets the threshold for a referral or service from Children's Social Care, then the Service Manager MASH must also be involved in this discussion.

Stage Three: Formal Escalation Procedure

When stage two has not been successful in resolving a dispute and the disagreement remains unresolved, the matter must be referred to an appropriate management level within all agencies involved. This is likely to be Head of Service or Assistant Director within Children's Social Care, the Health Designated Professional(s) and the Head of Safeguarding in the provider organisation, Constabulary Force Duty Manager or Relevant Inspector/Chief Inspector or equivalent levels within relevant agencies (see Appendix 1).

The purpose of escalating the dispute to this level is for senior managers to be assured that all efforts have been made to resolve the dispute. Managers must review how and why the dispute has arisen, if it has occurred through lack of clarity, a lack of understanding in the professional dialogue or through other systemic or practice matters.

For cases that reach this stage of the escalation process, a resolution meeting should be held in person (or MS Teams) to ensure that an agreement is reached that addresses the needs of the child and to ensure that any risks are properly managed by agencies and shared appropriately. This meeting should be facilitated by a safeguarding partners independent of the issue, or otherwise by the independent scrutineer.

Ultimately a timely decision will need to be reached where agencies agree a joint plan in which the interests of the child take precedence over any professional position or stalemate. The timescale and urgency of the agreed plan will be dependent on the circumstances of each individual case. However, this should not be delayed and should take no longer than five working days from the point at which the Stage three escalation was raised. Where the needs and risk to the child/ren are significant this should be sooner.

Where there is no agreed joint plan for the child/ren within five working days then managers must

escalate to stage four immediately or no later than one working day, this must include a full account of the history of dispute and resolution attempts.

Stage Four: GSCP Executive Escalation

When stage three does not see a resolution within reasonable timeframes as set out above, then the full details and records of escalation must be referred to the agency representative/s on the GSCP Executive, in health this must be in conjunction with the relevant Trust's Executive Lead. It is for the relevant Executive members to lead on the ongoing resolution efforts and a final resolution.

A full account of the history of dispute and resolution attempts must be shared with the GSCP Business Unit to record a Stage Four Escalation. In the case where a pattern or theme of issues present in multiple escalations the GSCP Business Unit will consider whether the issue should be included in the strategic escalation log to facilitate any necessary GSCP Executive response.



ESCALATION PROTOCOL



This should be worker to worker, avoiding use of email and always focused on the needs of the child.



This should be manager to manager, avoiding use of email and always focused on the needs of the child. (Agencies will determine who is based placed regards seniority to manage a positive outcome and communicate who this is promptly)



This should now be senior manager to senior manager, avoiding use of email and always focused on the needs of the child. The GSCP Business Unit should now be informed of the escalation to record and assist in appropriate levels of contact.



Stage Four— The escalation will now be managed by the GSCP Executive and Independent Scrutineer.

Outcome that meets the needs of the child