



# TSCP Rapid Review & Case Review Process

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## Introduction

This document sets out the arrangements by which Tameside Safeguarding Children Partnership (TSCP) will determine when to trigger a Rapid Review process or another appropriate alternative case review process. It highlights its statutory duties, overall process for running a Local Child Safeguarding Practice Review (LCSPR) and how the Partnership will commission such work. The core process it will utilise for case reviews is set out in the document.

It should also be noted that the TSCP is concerned with reviews of significant cases, some of which will become a LCSPR. Where learning is identified but the case does not meet serious harm criteria alternative processes will be considered. This will be identified within the document.

TSCP would like to acknowledge that this guidance and associated templates are adapted from safeguarding partnerships across Greater Manchester.

## How to refer a case for consideration

To support all partners to recognise and refer cases the TSCP has developed a case notification form (Appendix A). This form allows a partner to outline the case and propose a Rapid Review that could lead to a Local Child Safeguarding Practice Review, audit or assurance exercise or case mediation.

This form is submitted to the TSCP Business Manager via [TSCP@tameside.gov.uk](mailto:TSCP@tameside.gov.uk) who informs the Local Authority's Head of Safeguarding and Quality Assurance. A Screening Panel is convened with representatives of the 3 statutory safeguarding partners who will determine the most appropriate learning pathway. This will be based on guidance and definitions provided by Working Together (2018) in relation to serious harm and notifiable incidents. All referrals and decisions will be reported to the TSCP Practice Review Group who will act as a scrutineer to the pathways selected. However, ultimate authority and decision making will rest with the three statutory partners. In the event there is disagreement about progressing to rapid review a majority decision will be taken in consultation with the Independent Chair of Tameside Safeguarding Children Partnership. This will be done within 48 hours of initial notification/referral.

Once the Screening Panel has agreed an appropriate pathway the case will progress within set timescales (see Appendix B for an overview). The referrer will be updated as to the progress of the case if taken forward into any form of learning pathway. It is vital that those making referrals ensure that all relevant information is included at the time of the initial referral to prevent any unnecessary delays in decision making.

It is expected that each individual agency reviews its own referrals before they are submitted to the TSCP team. This is to ensure that all referrals have been sufficiently considered by a senior manager. The TSCP referral process is for cases meeting specific criteria, which will be explored in later sections, and senior managers should ensure it is only these cases that are brought to the attention of the partnership. For example, those that are notifiable incidents, cases of "serious harm", and cases where a practice review is necessary to identify lessons for practice.

The purpose of the TSCP Learning Review process is as identified within Working Together as: *"... to identify improvements to be made to safeguard and promote the welfare of children...Reviews should seek to prevent or reduce the risk of recurrence of similar incidents."*<sup>1</sup>

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<sup>1</sup> Working Together 2018: Chapter 4, paragraph 3-4 - [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/779401/Working\\_Together\\_to\\_Safeguard-Children.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/779401/Working_Together_to_Safeguard-Children.pdf)

## Type of Learning Pathways

A referral to the TSCP can trigger a range of different responses. The information below aims to help clarify which pathway may be used and when.

### Rapid Review

Working Together (2018) identifies that where a case is a “serious child safeguarding case” then partners must make arrangements to identify, commission and oversee arrangements for that review process. These cases are clearly identified within the statutory guidance as distinct from our day to day practice by certain terms. Firstly, ‘serious harm’. This term is defined as:

*“... serious and/or long-term impairment of a child’s mental health or intellectual, emotional, social or behavioural development. It should also cover impairment of physical health...judgment should be exercised in cases where impairment is likely to be long-term, even if this is not immediately certain. Even if a child recovers, including from a one-off incident, serious harm may still have occurred.”*

If local partners identify a case where serious harm has occurred and abuse and or neglect is suspected, then this case must be notified to the National Panel<sup>2</sup> and consideration given to whether or not a local review is required. Case Notification is explained further in the next chapter.

Therefore, not every case referred to the TSCP will lead to a Rapid Review as these are held only for those cases meeting the criteria or there are lessons to be learned in respect of partners safeguarding practice. A Screening Panel, consisting of the three statutory partners, will consider these referrals and determine if a Rapid Review will be triggered. In these cases, a Rapid Review report will be returned to the National Panel within 15 working days of the referral being received.

### Audit and assurance

If the threshold for a Rapid Review is not met then alternative audit and assurance processes can be considered. Where the issue relates to a single agency process and system then that agency may be tasked to take forward an appropriate audit and report back its findings. This will be determined based on the individual case needs and proportionate for the learning involved.

In each instance, the appropriate learning response will be proposed by the Practice Review Panel. It will be monitored to ensure the learning process is timely and lessons learnt are cascaded across the partnership by the Learning and Improvement Group.

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<sup>2</sup> The National Panel refers to a body established in 2018 to oversee all Serious Child Safeguarding Reviews.

## No Further Action

In some cases, it may be appropriate to take no further action with a case referral. If individual agencies have reviewed their cases before referring them in, then the number of cases not being identified for further action should be reduced. However, there may be occasions where a referral is received and the TSCP do not see a purpose to taking a review forward. For example, there will on occasion be cases where the child and family were not known to services within a safeguarding context and there was no reason why they should have been. In these cases there will be no safeguarding practice to review and learn from.

If agencies are dissatisfied with the decision reached by the TSCP then they may challenge this through the escalation process.

## Notification of a Serious Safeguarding Incident

There is a duty on local authorities to notify serious incidents to the National Child Safeguarding Practice Review Panel

A decision about whether an incident is serious should be made using the definition set out in Working Together 2018:

***16C (1) of the Children Act 2004(as amended by the Children and Social Work Act 2017) states:***

***Where a local authority in England knows or suspects that a child has been abused or neglected, the local authority must notify the Child Safeguarding Practice Review Panel if –***

- (a) The child dies or is seriously harmed in the local authority's area, or***
- (b) While normally resident in the local authority's area, the child dies or is seriously harmed outside England.***

Notification must always be made if abuse or neglect is a cause of, or a contributory factor to, the serious incident or where it is suspected. Whilst it is the Local Authority that carries this duty to report, partners are under a duty to inform the safeguarding partners of any incident that they think may meet these criteria. This can be done using the referral form at Appendix A. Children's Services, Head of Safeguarding and Quality Assurance will then convene a screening panel with statutory partners to determine if the incident is notifiable and ensure that an online report is made.

The online report will be made via <https://www.gov.uk/guidance/report-a-serious-child-safeguarding-incident> It will be made within 5 working days of the incident being identified.

## The Screening Panel

The Screening Panel represents the safeguarding partnership that carries the responsibility to determine if a Rapid Review is required once a case has been referred. It must represent the three statutory partners.

The panel will use the criteria and circumstances set out in Working Together 2018 and their screening panel guidance (Appendix B) to consider whether a case/incident meets the threshold for a Notifiable Incident and/or a Rapid Review. The panel will make this decision through screening communication; email; skype; telephone discussion or a meeting if time permits.

In the event that the screening panel agrees that the above criteria is met, Tameside Local Authority, through the Head of the Safeguarding and Quality Assurance, will notify the National Panel within five working days of becoming aware of the incident via the online reporting portal. This notification will then be shared by the National panel to the Secretary of State, Department for Education and Ofsted as required.



## Rapid Review Process

If the Screening Panel determine that a Rapid Review is required, then the safeguarding partners should promptly undertake a Rapid Review of the case. This will be for those cases which meet the threshold of a Notifiable Serious Incident or the screening panel has taken a decision that a Rapid Review is the most appropriate way forward. A Practice Review Panel will be convened to manage the Rapid Review process. It will:

- Gather the facts about the case as far as they can be readily established at the time.
- Discuss whether there is any immediate action needed to ensure children's safety and share learning appropriately.
- Consider the potential for identifying improvements to safeguard and promote the welfare of children.
- Decide what steps they should take next, including whether or not to undertake a Child Safeguarding Practice Review.

All partners/agencies who had knowledge of the child or their family will be required to contribute to a Rapid Review.

A single agency summary and chronology template will be sent out to Practice Review Panel members on Day 2 of the screening panel making a decision to hold a rapid review. All agencies should secure all records/files in relation to the case through safeguarding leads/managers in their service area and a process agreed to ensure access is appropriate to those professionals involved in ongoing service delivery to the child/carers.

Agencies should return the completed template to the TSCP Business Unit within **10 working days**. This will enable the Practice Review Panel Chair to review and construct an overview of the case for the panel.

The TSCP Business Manager will circulate the completed learning summary and combined chronology **one day** prior to the Practice Review Panel meeting.

A Practice Review meeting will be convened **13 working days** from the Screening panel agreeing it's notifiable. Panel members will utilise the review criteria laid out in the National Panel guidance to consider the case and identify if the need for a review is evident. The meeting will be structured to ensure all the relevant criteria is considered.

The screening panel may decide that the threshold for a Notifiable Incident/Rapid Review is not met and that the Rapid Review process is not appropriate but agree that an alternative audit and assurance activity should be considered. In this case the TSCP Business Manager will submit the case to the Practice Review Panel to agree a process for the learning.

If the Practice Review Panel determine that a Child Safeguarding Practice Review is required, then they will propose which additional members should be co-opted onto the Practice Review Panel.

## Decision making on initiating local and national reviews

The criteria which the local safeguarding partners must take into account when deciding whether to initiate a Child Safeguarding Practice Review or an alternative learning process include whether the case:

- Highlights improvements needed to safeguard and promote the welfare of children, including where those improvements have been previously identified.
- Highlights recurrent themes in the safeguarding and promotion of the welfare of children.
- Highlights two or more organisations or agencies working together effectively to safeguard and promote the welfare of children.
- Is one which the Safeguarding National Panel have considered and concluded a local review may be appropriate.

Safeguarding partners should also have regard to the following circumstances:

- Where the safeguarding partners have cause for concern about actions of a single agency.
- Where there has been no agency involvement, and this gives the safeguarding partners cause for concern.
- Where more than one local authority, police area, or clinical commissioning group is involved, including in cases where families have moved around.
- Where cases may raise issues relating to safeguarding or promoting the welfare of children in institutional settings.

Meeting the criteria does not mean that safeguarding partners must automatically carry out a local LCSPR. If the learning identified is already known about and changes in practice are in progress, then safeguarding partners may decide not to carry out a review. Conversely some cases may not meet the definition of a 'serious child safeguarding case' but nevertheless raise issues of importance to the local area, e.g. good practice learning opportunity, so safeguarding partners may choose to initiate a local Child Safeguarding Practice Review.

## What a completed Rapid Review Report should include

On completion of the Rapid Review, the three statutory safeguarding partners should sign off a Rapid Review recommendation and share with the National Panel their decision on whether a LCSPR is appropriate. If this is the case, consideration will be given to appropriateness and arrangements for commissioning an independent chair and/or author.

Within this report there will be reference to:

- Whether or not the case in question has been considered against the criteria set out in Working Together (2018)
- Immediate safeguarding arrangements of any children involved.
- A concise summary of the facts, so far as they can be ascertained, about the serious incident and relevant context. This should give sufficient detail to underpin the analysis against the Working Together criteria but does not require lengthy detailed chronologies of agency involvement that can obscure the pertinent facts.
- A clear decision as to whether the criteria for a LCSPR has been met and on what grounds, and if not, why not. Clear reasons are required.
- A recommendation on whether a National Review would be considered necessary, and if so, why.
- Any immediate learning already established and plans for their dissemination.
- Potential for additional learning.
- If the decision is taken not to proceed with a LCSPR or local child safeguarding practice review, a summary of why it is thought there is no further learning to be gained.
- Which agencies have been involved in the Rapid Review, explaining any agency omission whose involvement would be usually expected?
- Who has been involved in the decision-making process?
- Relevant identifying details of the child and family.

## Scrutiny & Challenge

Under Working Together (2018), the criteria for local child safeguarding practice reviews offers greater flexibility for partners to consider how learning is best generated within a new safeguarding arrangement. External scrutiny of this decision making is offered by the National Panel through the submission of any Rapid Review Reports.

The National Panel may recommend a local panel reconsider their view. They may also choose to take forward a national review utilising a local case as there are national trends emerging that they are best placed to review. In these circumstances the Practice Review Panel should reconvene a meeting to consider the National Panel's decision and reconsider their local decision. If the Practice Review Panel decides not to initiate a LCSPR they may still support the National Panel's review. This may be through the hosting of a national reviewer and facilitation of local learning events as directed by National reviewers. This will be coordinated by the TSCP Business Manager and Team.

If a LCSPR decision requires review, either because a local review is indicating the need for a national review or new information becomes available that suggests a learning review is now required, then the TSCP will reconsider. This will be taken forward by the Practice Review

Panel members and proposals made to the statutory partners for a final determination. All such reconsiderations will be reported to the National Panel once a determination is made.

## The Purpose of a Child Safeguarding Practice Review

The key aim of any review remains as set out in the following legislation/guidance:

- Working Together 2018<sup>3</sup>
- Domestic Violence, Crime and Victims Act (2004)<sup>4</sup>
- Child Safeguarding Practice Review Panel: Practice Guidance 2019<sup>5</sup>

In order for a LCSPR to be effective and in line with the above guidance it should be conducted in a way which:

- Recognises the complex circumstances in which professionals work together to safeguard children.
- Seeks to understand precisely who did what and the underlying reasons that led individuals and organisations to act as they did.
- Seeks to understand practice from the viewpoint of the individuals and organisations involved at the time rather than using hindsight.
- Is transparent about the way data is collected and analysed.
- Makes use of relevant research and case evidence to inform the findings.

The purpose of reviews of serious child safeguarding cases, at both local and national level, is to identify improvements to be made to safeguard and promote the welfare of children. Therefore, the focus will be on understanding practice and not to hold individuals or organisations to account. There are other processes that exist to undertake that role, such as employment law and disciplinary procedures, and these should be used when that is sought. These processes can be run in parallel or subsequent to one another and decisions regarding the appropriate timetabling will be made on a case by case basis.

The Practice Review Panel will moderate the work of the LCSPR as the review progresses and will ratify the final report before presentation to the Tameside Safeguarding Children Executive Partnership.

The Practice Review Panel will also:

- Quality assure all safeguarding learning reviews,
- Co-opt professionals onto to the panel as appropriate.
- Sign off the final report/learning review.

Working Together 2018 and the National Panel Guidance<sup>6</sup> offers clear guidance on expectations for reviews and timescales. The expectation of the TSCP is that this report and

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<sup>3</sup> <https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>

<sup>4</sup> <http://www.legislation.gov.uk/ukpga/2004/28/contents>

<sup>5</sup> <https://www.gov.uk/government/publications/child-safeguarding-practice-review-panel-practice-guidance>

learning is available no later than 6 months after the decision to initiate a review is made. This is to ensure that all learning remains relevant to current practice. Therefore, the partnership will endeavour to produce a concluded review within 6 months. There may be challenges to this, such as criminal proceedings or Coronial processes. Should these impact on the review process, then steps will be taken to share information and continue the review as far as possible without damaging these other processes nor limiting the review itself. Any early identified actions will be commenced to avoid delay where service / multi agency working practices can be improved.

## Conducting the Review

The Practice Review Panel will undertake LCSPRs on behalf of the TSCP. The review panel will have delegate authority to oversee the progress of the review. There will be a core membership with the ability to co-opt additional member on a case by case basis dependent on the nature and context of the case. Once a decision has been made to conduct a review, the chair and members of the Practice Review Panel are responsible for preparing the draft Terms of Reference (ToR), which should be proportionate to the circumstances of the case.

The ToR may need to be revisited as the review progresses and as new information is identified. The review panel chair will agree any amendments to the ToR.

As part of the terms of reference, the Chair should appoint lead individuals or agencies who will act as a:

- Designated advocate for engaging with family members and friends.
- Contact point for responding to media interest about the review in conjunction with Tameside Council's corporate communications team.

**Please note:** All contact with the Coroner must be sent through Tameside Council legal department.

The review panel chair should as far as possible ensure that the review process is a learning exercise in itself for all those involved in the case.

## Independent Chair/Author

Working Together 2018 does not specify the need for an independent chair for a LCSPR so this will depend on the complexity of the case, the review model and methodology selected and other local considerations. If an independent chair/author is appointed their name/s should be shared with the National Panel. If the National panel offer advice and/or guidance on the appointment of an independent Chair or Author, then this will be taken into consideration.

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<sup>6</sup> National Panel Guidance document - [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/793253/Practice\\_guidance\\_v\\_2.1.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/793253/Practice_guidance_v_2.1.pdf)

The independent chair/author should be an appropriately experienced individual who is not directly associated with any of the agencies involved in the LCSPR. They will be responsible for effectively leading and coordinating the LCSPR review panel and for quality assurance of the final report.

Consideration should be given to the skills and expertise required to effectively chair a LCSPR and in relation to the nature of the specific case in focus. The identified individual should have, as a minimum, the following appropriate core skills:

- Strong leadership and ability to motivate others.
- Expert facilitation skills and ability to handle multiple perspectives and potentially sensitive and complex group dynamics.
- Collaborative problem solving experience and knowledge of participative approaches.
- Ability to find and evaluate best practice.
- Good analytical skills and ability to manage quantitative and qualitative data.
- Knowledge of safeguarding adults.
- Ability to write for a wide audience.
- An understanding of the complexity of the health and social care arrangements and an awareness of issues which are complex or of national importance such that a national review may be appropriate.

## Methodology

The Practice Review Panel should agree with their reviewers the method by which the review should be conducted, taking into account the principles of the systems methodology. The methodology should provide a way of looking at and analysing frontline practice as well as organisational structures and learning. The methodology should be able to reach recommendations that will improve outcomes for children. All reviews should reflect the child's perspective and the family context.

The review panel chair will establish an agreed timetable of review panel meetings in accordance with the required timescales of the review and set specific parameters, including timescales for the completion of chronologies, conversations and any other learning event which includes further exploration of practitioners' views.

The review panel chair will maintain contact with the Safeguarding Children's Business Manager of all parallel review or investigation processes and to ensure that any coordination and joint commissioning arrangements are effective.

The chair of the review panel should ensure that regular updates are obtained regarding services being provided by any agency to meet the safeguarding or other needs of individuals who are subject of the review.

Where there is an on-going criminal investigation, the review panel chair will ensure that early and regular contact is made with the senior investigating officer to ensure appropriate processes are being followed. This relates particularly to any planned interviews with family

members, practitioners and managers and must take into account that any one of these people may be a potential witness or even defendants in a future criminal trial.

### Involvement of family members, friends, and other support networks

Family members can offer a unique perspective into how the delivery of services and involvement of agencies were viewed and responded to. It is essential that the review panel have opportunities to listen to family experiences and perspectives and that these contribute meaningfully to the final report.

Family members can include:

- Siblings
- Parents
- Carers
- Grandparents
- Other significant family members identified from the Family Association Network/ Genogram.

As a minimum, family members should:

- Be notified of the rapid review and case review process, what that means for them and how they can access support – including impact of media coverage.
- Be supported to contribute to the review process – either in writing, by meeting with the reviewer, sharing views via a third party or by other means identified by the review panel.
- Be included in feedback about the learning identified by the review sub group.
- Be informed and prepared for the publication of the report in a timely manner – again including the likelihood of media interest.
- Be provided with a read only copy of the report which family members can review and comment on prior to publication but not retain; where possible any relevant comments should be incorporated into the final version – A ‘hard’ copy of the report should not be provided until the report is in the public domain.

### The final overview report

The LCSPPR overview report brings together the learning and themes identified from the review and will analyse and comment on the effectiveness of practice and the systems used to safeguard and promote the welfare of the child and/or adult.

The chair of the review panel has responsibility for collating the report and the report should:

- Provide a brief overview of what happened and the key circumstances, background and context of the case. This should be concise but sufficient to understand the context of the learning and recommendations.



- An analysis of any systemic or underlying reasons why actions were taken or not in respect of matters covered by the report
- A critique of how agencies worked together and any shortcomings in this.
- Whether shortcomings identified are features of practice in general
- What would need to be done differently to prevent harm occurring to a child in similar circumstances
- Be written in a succinct and focused manner with the emphasis on recognising and sustaining good practice as well as identifying how and where practice can be improved in the future.
- Identify action that agencies or services have already undertaken in response to learning and what else needs to happen to ensure learning is embedded.
- Form a conclusion as to the effectiveness of local practice to safeguard and promote the welfare of the child/and or adult.

The report should also:

- Have clearly framed questions that the review seeks to answer.
- Have an executive summary of no more than 2 A4 pages.
- State clearly learning points and steps for learning.
- Be written in such a way that it can be published with minimal redaction.

The LCSPR overview report should firstly be presented to the review panel. This provides an opportunity for the chair and review panel to quality assure the document, reference the identified learning and ensure an opportunity for the findings to be challenged where necessary. The report should already have identified areas of learning and the author/chair should have had access to relevant past/current action plans so that recommendations/actions can be put into the context of wider learning across the partnership.

It is the responsibility of the review panel to work with the author and chair to develop an action plan which takes account of the wider learning improvement cycle. Once agreed the chair of the review sub group should present the report to the Children's Safeguarding Executive Partnership.

It will be the responsibility of the review panel to identify and agree how practice challenges or recommendations from the LCSPR will be responded to and what action is needed by individual agencies or from a multi-agency perspective.

### Action plans

A draft action plan should be included as part of the final report and should include:

- A timeline for publication of the report should be developed and where possible a date identified.
- Action taken to share the findings of the report with the family members.

- Practitioners who contributed to the review and learning event should have been briefed about the content of the final report and should already be aware of the findings, as the process of the review is an important element of the, learning which will be more effective if those involved are partners in the process.
- As far as possible, this principle should be applied to family/carers/friends who have participated but it is understood that this will be on a case by case basis.
- How it will share the lessons learned, and practice impact with the wider workforce in the Tameside area.

Once the LCSPR report and action plan have been agreed, the report will be endorsed and signed off by the Practice Review Panel.

The findings from any LCSPR should be reported in the TSCP Annual Report and what actions it has taken or intends to take in relation to those findings. Where the TSCP decides not to implement an action, then the Annual report must state the reason for that decision.

### Communication/Media Strategy

The chair of the Practice Review Panel in consultation with the independent author/chair, where appointed, will consider appropriate publication of the report on a case-by-case basis. Discussions about publication will be held with the individual(s), their family or carers (where appropriate) and if there are arrangements made by the TSCP Business Manager to upload the report onto the TSCP web site and release a statement informing partners and the National Panel.

Media and communication issues will usually be co-ordinated by the council's communications team. This will be done in collaboration with the communications teams of the other agencies involved, alongside agreed representatives of the partnership.

### Learning from LCSPR

The value of LCSPRs is in the learning derived from them. As much effort should be spent on acting on recommendations as on conducting the actual review. Recommendations should be SMART: Specific, Measurable, Achievable, Realistic, and Timed.

The following should help to secure maximum benefit from the review:

- Conduct the review in such a way that the process is a learning exercise.
- Consider what information needs to be disseminated (how and to whom) in the light of a review.
- Be prepared to communicate both examples of good practice and areas where change to practice is required.
- Focus recommendations on a small number of key areas with specific and achievable proposals for change and intended outcomes.
- Ensure robust monitoring of the resultant action plan to ensure identified changes/improvements are implemented and embedded.

- Communicate with the local community and media to raise awareness of the positive work of services working with children.
- Make sure staff and their representatives understand what can be expected in the event of a LCSPR.

## The National Child Safeguarding Practice Review Panel

The purpose of the National Panel is to operate independently from government and local areas to identify changes that will create an improved practice system for children and families that reduces child abuse and neglect. They came into being in June 2018 and are responsible for determining whether or not the criteria for a National review is met. The panel will take into account whether the case:

- Highlights or may highlight improvements needed to safeguard and promote the welfare of children, including where those improvements have been previously identified.
- Raises or may raise issues requiring legislative change or changes to guidance issued under or further to any enactment.
- Highlights or may highlight recurrent themes in the safeguarding and promotion of the welfare of children.

The Panel should also have regard to the following circumstances:

- Significant harm or death to a child educated otherwise than at school.
- Where a child is seriously harmed or dies while in the care of a local authority, or while on (or recently removed from) a child protection plan.
- Cases which involve a range of types of abuse.
- Where the case may raise issues relating to safeguarding or promoting the welfare of children in institutional settings.

The panel will also consider a range of evidence when considering their decision, including inspection reports, other reports and research. There will be need for a dialogue in many cases between local safeguarding partners and the National Panel to support decision making. Information should be shared with the panel on request.

The panel should inform the relevant safeguarding partners **promptly** if they consider:

- Further information is required before a decision can be made by the National Panel.
- A national review is appropriate, setting out rationale for decision making (including to families) and next steps.

The panel will inform the Secretary of State when a decision is made to carry out a national review.

The panel will discuss with the local partnership the potential scope and methodology of the review and how they will engage with them throughout.

There will be instances where a local review has been carried out that is relevant to a national review or a local review has not been carried out, but the panel feel that such a review would be helpful to a national review sometime in the future. In these circumstances the panel will engage with the local partnership to agree conduct of reviews

## Links to other processes that may affect LCSPRs

There may be a criminal investigation, a coroner's investigation and/or professional body disciplinary procedures running alongside a local or national review. The panel and local safeguarding partners will agree a clear process of how they will work with other processes including Domestic Homicide Reviews or Safeguarding Adult Reviews.

When running a LCSPR all relevant areas that need to be addressed should be established at the outset to reduce potential for duplication for families and staff.

Any LCSPR will need to take account of a coronial enquiry and/or any criminal investigation related to the case, including disclosure issues, to ensure that relevant information can be shared without incurring significant delay in the review process.

### Coroners

Coroners are independent judicial office holders who are responsible for investigating violent, unnatural deaths or deaths of unknown cause and deaths in custody, or otherwise in state detention, which are reported to them. The Coroner may have specific questions arising from the death of a child/and or adult at risk. These are likely to fall within one of the following categories:

- Where there is an obvious and serious failing by one or more organisations.
- Where there are no obvious failings, but the actions taken by organisations require further exploration/explanation.
- Where a death has occurred and there are concerns for others in the same household or other setting (such as a care home).
- The Coroner or his or her officers identify deaths that fall outside the requirement to hold an inquest but follow-up enquiries/actions.

In the above situations the TSCP should consider instigating a LCSPR.

Please note: Any correspondence with the Coroner must go through Tameside Council Legal Department.

### Police Investigations

Where a learning review is taken forward and there are ongoing police processes it is important that information is shared in a timely fashion. This includes if the review has concluded and new information is uncovered in ongoing police investigations. In such instances, Police partners should ensure information is shared via normal MASH pathways for

operational purposes and into the Practice Review Panel for consideration of any learning impacts.

## Complaints & Escalation Procedure

Where a professional is unsatisfied with decisions or processes in relation to reviews then they should utilise the Greater Manchester Escalation process which can be accessed via the Greater Manchester Safeguarding Procedures;

[https://greatermanchesterscb.proceduresonline.com/chapters/p\\_resolv\\_prof\\_dis.html?zoom\\_highlight=escalation](https://greatermanchesterscb.proceduresonline.com/chapters/p_resolv_prof_dis.html?zoom_highlight=escalation)

Where a complaint is received from a member of the public, about a decision or review of the TSCP this will initially be responded to by the Safeguarding Children's Business Manager in consultation with the relevant Head of Service, with a written response within 28 days of receipt.

If the complainant is unsatisfied with the response, they should contact the Business Manager who will arrange for their complaint to be considered by the most appropriate person. For example, if it is about decisions by partner agencies then the Independent Chair may be asked to mediate the concerns.

All written complaint responses will include details of how to contact the Local Government Ombudsman.

The Safeguarding Children's Business Manager will ensure that a record is kept of complaints received, responded to and those referred to partner agencies. Complaints and copies of responses will be securely retained in accordance with the principles of data protection legislation and the TSCP retention policy.

## Appendix A: Case Notification Form

### **CONFIDENTIAL WHEN COMPLETED**

This referral form is used to notify Tameside Safeguarding Children Partnership that there may be a case in need of some form of Partnership response. This could be a **Rapid Review or other learning process such as an audit or assurance exercise.**

**A Rapid Review** will be appropriate where the case meets notifiable incident criteria and you believe that the 3 Statutory Partners need to assess the case for a Child Safeguarding Practice Review and report this to the National Panel for consideration of a national review.

**Audit and assurance** is for cases that are not notifiable incidents but where professionals feel there may be learning about how we can improve our local service provision and practice. This may also be cases where you believe the practice has been very good and may show case effective multi-agency working.

Professionals should discuss the case with their agency designated safeguarding lead or the Tameside Safeguarding Children's Business manager to determine which learning and support process is required before submitting the form.

Forms should be returned via email to: [TSCP@tameside.gov.uk](mailto:TSCP@tameside.gov.uk)

## Rapid Review Referral Form

**PART A - TO BE COMPLETED BY THE PERSON MAKING THE REFERRAL. PROFESSIONALS SHOULD DISCUSS THE CASE WITH THEIR AGENCY DESIGNATED SAFEGUARDING LEAD AND AGREE THE REFERRAL IS APPROPRIATE.**

| 1. Details of individual making referral          |  |                            |  |
|---|--|----------------------------|--|
| Name:   |  | Role:                      |  |
| Agency:   |  | Tel. number:               |  |
| Date of incident prompting referral:              |  | Date referred to TSCP:     |  |
| 2. Brief description of event leading to referral |  |                            |  |
|   |  |                            |  |
| 3. Detail of the known or suspected abuse         |  |                            |  |
|   |  |                            |  |
| 4. Details of the child/young person              |  |                            |  |
| Last name/s:                                      |  | Date of birth:             |  |
| Forename/s:                                       |  | Age (if D.O.B. not known): |  |
| Other names used:                                 |  | Gender:                    |  |
| Ethnicity   |  | Any known disability       |  |
| Home address:                                     |  |                            |  |
| Please include details of parents/carers          |  |                            |  |



5 Brief summary of work undertaken by your agency

6. Details of why, in your opinion, this case should be subject to a review?

7. **Additional information:** For example, is there media interest, are there criminal proceedings?

Please return the completed **PART A** of this referral form to the TSCP Business Unit at [TSCP@tameside.gov.uk](mailto:TSCP@tameside.gov.uk) and Business Manager at [stewart.tod@tameside.gov.uk](mailto:stewart.tod@tameside.gov.uk)

## SCREENING FORM

**PART B - TO BE COMPLETED BY THE SCREENING PANEL 1 DAY AFTER THE REFERRAL HAS BEEN RECEIVED. SCREENING PANEL MUST BE COMPRISED OF REPRESENTATION FROM THE 3 STATUTORY SAFEGUARDING PARTNERS.**

| SECTION 2: TO BE COMPLETED BY THE TSCP Screening Panel   |   |  |  |
|--|---|--|--|
| Names and organisation of Panel Members making decision:   |   |  |  |
| TMBC:  | GMP:  | CCG:   | Other:   |
| 2.1 Referral Decision of Screening Panel (tick V one)  |   |  |  |
| Meets threshold for Rapid Review   | Does not meet threshold for Rapid Review or audit | Meets threshold for audit and assurance but not a Rapid Review | Queries back to referrer before decision can be made |
|  |   |  |  |
| 2.2 Rationale for the Decision   |   |  |  |
| <p>Please refer to Screening Panel Guidance below<br/>                     Please indicate why the panel has determined the chosen pathway for this case.<br/>                     In cases where a Rapid Review is selected please note;</p> <ul style="list-style-type: none"> <li>a) the nature of the known or suspected abuse or neglect and</li> <li>b) how the Serious Harm criteria has been determined</li> </ul> |   |  |  |
| Selected Pathway   |   |  |  |
| Rationale  |   |  |  |

| 2.2 Identified Leads to coordinate review process from individual agencies involved |      |              |                 |
|---|------|--------------|-----------------|
| Name  | Role | Organisation | Contact Details |
|   |      |              |                 |
|   |      |              |                 |
|   |      |              |                 |
|   |      |              |                 |
|   |      |              |                 |

|  |  |  |  |
|--|--|--|--|
|  |  |  |  |
|--|--|--|--|

| The Screening Panel Guidance                   |  |
|--|--|
| <b>What is the purpose of screening panel?</b> | Tameside Safeguarding Children Partnership has developed a screening panel for the purpose of swiftly reviewing case referrals that are requesting a Rapid Review.   |
| <b>What does the Panel do?</b>                 | A number of referrals are received by the partnership, but it needs to be determined whether or not the specific criteria for a Rapid Review is met or whether other learning processes may be more appropriate e.g. a single agency audit   |
| <b>Who is the Panel?</b>                       | The three core statutory partners nominate senior leaders to undertake this process – Local Authority, Police and CCG  |
| <b>What do they do?</b>                        | Panel members are required to: <ol style="list-style-type: none"> <li>1. Review the referral form</li> <li>2. Identify if their own agency system holds further information to inform their decision making</li> <li>3. Discuss (virtually via skype or email or telephone call) with the panel views on whether or not Serious Harm Criteria is met and the case is determined as Notifiable and so warrants a Rapid Review Panel to explore criteria further</li> <li>4. Ensure a clear rationale for the decision is documented and shared to the TSCP Business manager</li> <li>5. Ensure that any further processes are agreed i.e. commence a Rapid Review / Single Agency Audit/ No Further Action</li> </ol> |
| <b>When would a review be needed?</b>          | <b>A Rapid Review</b> will be appropriate where the case meets notifiable incident criteria and you believe that the Partnership needs to assess the case for a Child Safeguarding Practice Review and report this to the National Panel for consideration of a local OR national review.  |
| <b>What is the criteria used?</b>              | <p><b>The criteria for a review are defined by Working Together 2018 as:</b></p> <p>TSCP must identify serious child safeguarding cases to ascertain if guidance indicates the need for a review.</p> <p>Serious child cases are defined as distinct from usual Child Protection cases by the category of serious harm in a case where abuse or neglect is known or suspected</p> <p><b><i>Serious Harm is defined as serious and/or long-term impairment of a child’s mental health or intellectual, emotional, social or behavioural development. It should also cover impairment of physical health. This is not</i></b></p>  |

*an exhaustive list. When making decisions, judgment should be exercised in cases where impairment is likely to be long-term, even if this is not immediately certain. Even if a child recovers, including from a one-off incident, serious harm may still have occurred.*

Panel members should reflect on how the case referred is distinct from other Child Protection cases as a result of the level of harm being seen. If the serious harm criteria is met then a Rapid Review Panel will be convened to consider the wider criteria to propose what, if any, learning process is appropriate and required.

As Looked After Children are in the care of the local authority their deaths must always be notified to the National Panel by the Local Authority.

Cases where a child dies or is seriously harmed outside of England should also be considered for notification and potentially review.

### Prompts for Consideration

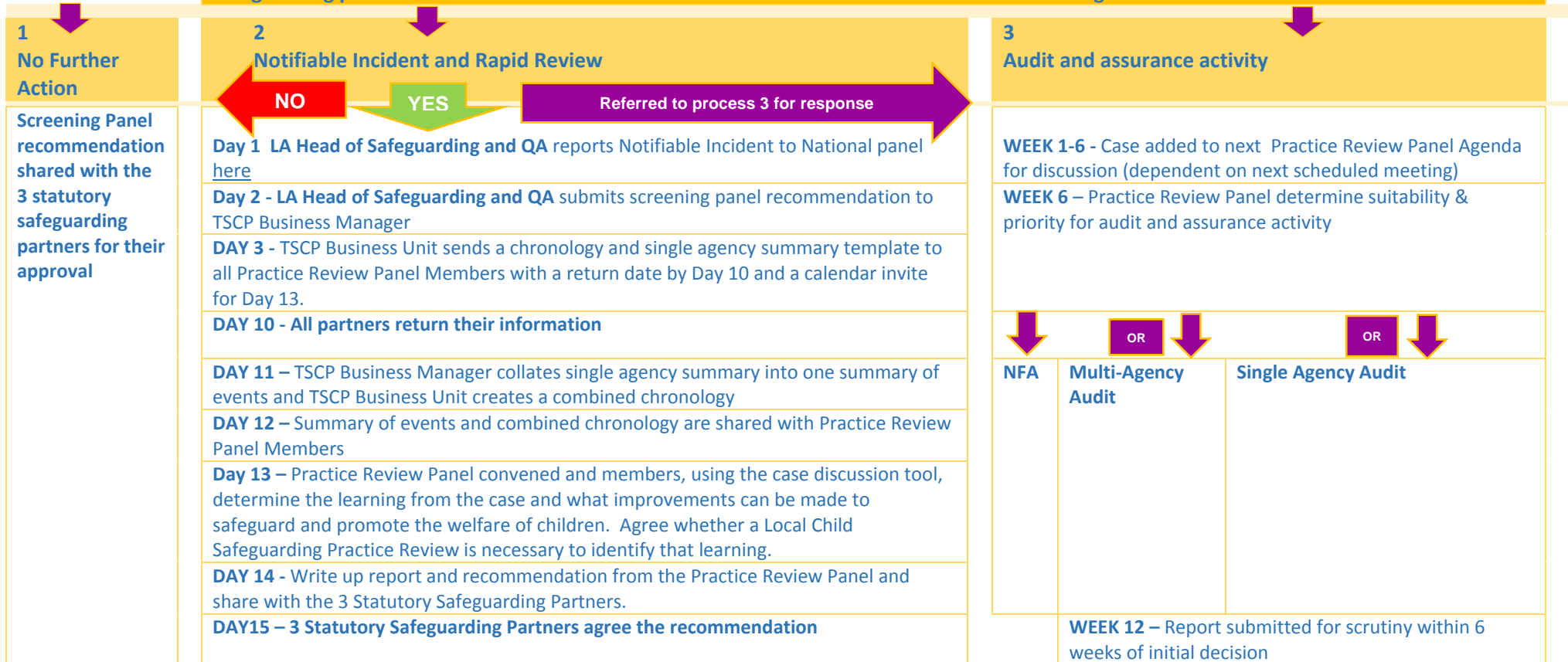
1. Whether the family were known to services, or should have been known to services, and whether there were safeguarding concerns linked to the serious incident.
2. Not all cases of child protection warrant a review so consider what factors are evident that make this case distinct from cases within the child protection arena i.e. problematic practice of professionals linked to harm caused that is beyond individual practitioner decision making and so indicates problems in the wider system of practice.
3. Remember that the purpose of a review is to prevent similar occurrences by identifying lessons for the way we all work together and the system – matters of problematic individual practice not in line with procedure are for other processes such as disciplinary action or regulatory body referrals
4. A review is not an investigation – there are criminal investigation processes to assess culpability and crimes.
5. Reflect on learning and review processes already in place for individual agencies and whether these either are sufficient to address the case or should take place before a wider multi-agency review is determined i.e. mental health death reviews, incident reviews etc.
6. The specific criteria on page 84 of Working Together 2018, will be unpicked in the Practice Review Panel when more information is collected. The focus of the screening panel must be on whether this review process needs to be triggered.
7. Working Together 2018 does state that meeting of criteria does not mean that reviews must be carried out – partners can consider the appropriateness of a child safeguarding practice review. For example, if a case has been triggered with similar learning and process issues it may not be justifiable to duplicate.
8. Don't forget that focus can also be drawn to positive practice – if there is good practice identified a proposal can be made to consider a good practice review.

## Appendix B: Rapid Review Process Flowchart

Professional identifies a potentially notifiable case or case which they believe identifies particular learning. Case discussed with agency safeguarding lead and submits Rapid Review Referral form to TSCP Business Manager via [TSCP@tameside.gov.uk](mailto:TSCP@tameside.gov.uk)



TSCP Business Manager alerts the LA Head of Safeguarding and Quality Assurance who convenes a screening panel with the statutory safeguarding partners to determine the next course of action within 48hrs of the referral being received .



**DAY 15** - Report submitted to national panel -  
[Mailbox.NationalReviewPanel@education.gov.uk](mailto:Mailbox.NationalReviewPanel@education.gov.uk)

