

Stepping down a Child Protection Plan at first review (3 months) or returning to Initial Child Protection Conference within 2 years of last registration



Stepping down at first review conference (3 months)

This document covers the social care considerations required for stepping down a Child Protection Plan (CPP) at the 3-month review stage. While the statutory framework allows for the discontinuation of a CPP where sufficient progress has been made, such decisions must be fully evidenced through triangulation of the initial concern that led to an ICPC, the families social care history and likelihood of future escalation, statutory visit to the child and family, evidencing progress against the CPP and the planning and progress through core group activity that evidenced the significant harm threshold is no longer met. The recommendation to step down by social care in the Report to Review Conference must fully consider the recent multi agency decision regarding significant harm and the importance of sustained safety for the child.

Stepping down a CPP at three months should only occur where there is clear, demonstrable evidence that the child is no longer at risk of significant harm and that protective factors have been embedded and sustained. This includes a thorough assessment of strengths that equate to safety, not just the absence of risk. The Signs of Safety framework supports this approach by emphasising collaborative safety planning, critical inquiry, and the development of a networked safety culture around the child.

National best practice, as outlined in *Working Together to Safeguard Children (2023)*, recommends that child protection planning be purposeful, time-bound, and focused on achieving measurable outcomes. The initial review conference at three months is a key opportunity to evaluate progress. It should be used to deepen intervention, reinforce safety, and support families in making long-lasting changes.

In Northamptonshire, local safeguarding procedures reflect this ethos, encouraging professionals to use the review process to build on progress, challenge assumptions, and ensure that any decision to step down is based on a multi-agency consensus and a clear safety narrative. This aligns with the commitment to child-centred practice, Family intervention, and continuous improvements in our responses to safeguarding children.

The decision to discontinue a CPP must be grounded in evidence, guided by professional curiosity, and informed by the lived experience of the child and family. It

must reflect not only what has changed, but how that change has been sustained and supported, ensuring that safety is embedded into the long term.

Role of the social worker

The social worker will be required to evidence through core group minutes, home visits, multi-agency information sharing and the wishes and views of the children that the significant harm that led to the making of the Child protection (CP) plan has not only reduced but that enough activity has taken place that the management of the risk is now sustainable at Child In Need/ Family Help Level. As at both Child in Need and Family Help level, consent is required from parents to continue with the future proposed plan.

Role of the Team Manager

The Team Manager is required to evaluate and triangulate the evidence that the social worker has put forward through the endorsement of a plan to step down at 3 months clarifying that there is no current evidence of ongoing significant harm and that there is little current evidence of likelihood that matters will escalate for the concern that that has led to the making of the child protection plan. If the Team Manager is supporting the step down of the plan at first review, then they should seek a discussion with their Service Manager prior to signing off the report to conference to recommend step down.

Role of the Service Manager

The Service Manager is responsible for recording the discussion and agreement to the stepping down of the CP plan at first review. Prior to the review conference taking place, the team manager and service manager will have discussed the evidence of a reduction of significant harm that is leading to recommendations to step down at first review. The service manager will ensure the discussion is recorded on Liquid Logic at least 48 hours prior to the meeting to ensure the Chairperson can see that this plan is endorsed, and robust consideration has been given to the sustainability of change that is currently evidenced.

Role of the CP Chairperson

At the 3-month review, the Child Protection Chairperson holds a pivotal role in ensuring that the decision-making process is robust, child-focused, and evidence based. They will facilitate a reflective and curious conversation to explore if the child remains at risk of significant harm, and whether any identified strengths represent sustained safety over time. The Chairperson should guide the multi-agency discussion to explore the depth and sustainability of change, challenge assumptions, and ensure that any proposal to step down the plan is supported by a clear safety narrative. Ensuring proposed further intervention and support long-term will provide positive outcomes for

the child and family. Prior to the review meeting, they should confirm that both Team Manager and Service Manager are supportive of a stepdown from CPP at first review.

Returning to Child Protection Planning within 2 years

When considering a subsequent period of Child Protection (CP) planning, it is essential that the allocated social worker and team manager engage in reflective analysis of the below areas. This process aims to ensure that any repeat CP plan is purposeful, trauma-informed, and designed to support meaningful and sustainable change for the child, young person, and their family—prior to initiating an Initial Child Protection Conference (ICPC).

Reflective Considerations

1. Time Since Previous CP Plan Ended

Understanding the time elapsed since the last CP plan helps assess whether the previous intervention allowed sufficient opportunity for change to be embedded and sustained.

- A shorter plan (e.g., 3 months) may indicate that the case was stepped down prematurely, before safety and stability were fully established.
- A longer plan (e.g., 18–24 months) may suggest that the family had more time to engage with support and demonstrate sustained progress.

It is important to ensure that any safety plans were thoroughly tested and that the family felt supported and prepared before the involvement was closed.

2. Nature of Risk: Recurrent or Emerging

A trauma-informed approach requires careful exploration of whether the risks are recurring or new:

- **Recurring Risks:** If the concerns mirror those from the previous plan, a deeper understanding is needed. This includes exploring patterns such as disguised compliance, unresolved trauma, or systemic barriers to change. Common themes may include:
 - Domestic abuse (within the same or a new relationship)
 - Substance use
 - Neglect
 - Parental mental health challenges
- **New Risks:** If new concerns have emerged, it is important to understand their context and whether they are linked to previous issues or represent a shift in the

family's circumstances. This helps build a holistic picture of the child's lived experience and current needs.

3. Previous Support and Future Planning

To avoid repeating ineffective interventions, it is vital to reflect on:

- What support was offered previously?
- What was helpful or unhelpful from the family's perspective?
- What services were missing or inaccessible?

A restorative approach involves co-producing plans with families, ensuring that services are tailored, accessible, and aligned with their values and goals. Engagement is more likely when families understand the purpose of each service and feel empowered to participate in their own healing and growth.

Actions to Support Meaningful Change

To ensure that a repeat ICPC leads to effective, compassionate, and sustainable outcomes, the following steps should be taken:

- **Collaborative Case Discussion:** Between the Team Manager and Service Manager, with a focus on strengths, barriers, and opportunities to do something different.
- **Legal Consultation:** Where appropriate, to ensure clarity and proportionality. The Service manager will ensure it is recorded the reason why legal advice is not being sought if this happens to be the case.
- **CP Chair Engagement:** A reflective conversation with the duty CP Chair to review thresholds and the effectiveness of previous plans.
- **Management Oversight:** clearly recorded rationale for initiating further CP planning, with attention to the child's voice and family context. This should include the sharing of the information with partner agencies about the last period of CP planning at the strategy discussion.
- **Parental Capacity Assessment:** Focused on strengths, readiness for change, and support needs.
- **Clear, Achievable Plans:** Developed with the family, outlining realistic steps and supports needed to achieve safety and wellbeing.
- **Escalation of Service Gaps:** Prompt identification and resolution of any gaps in multi-agency support.

- Co-Produced Planning: Ensuring the ICPC is a collaborative space where the child, family, and professionals contribute meaningfully.
- Effective Use of Tools: Chronologies, cultural genograms, neglect tools such as GCP2, Circle to success assessment and other frameworks should be used to inform understanding and planning.
- Multi-Agency Accountability: Partners should be held accountable for their roles in supporting the family, with a focus on consistency and follow-through.
- Tested Safety Plans: Safety plans should be evaluated before any decision to step down is made.

The goal is to ensure that every intervention is purposeful, compassionate, and aligned with the child's best interests.