

**Child Protection Conference multi-agency report form**

This template is for guidance. Please complete as fully as possible. You may not have information to complete each section, so please record 'No information' to demonstrate that the question has been considered.

## Are you attending the conference? Yes No

**Your agency:** Click or tap here to enter text.

**Please give details of the family and your involvement:**

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| Name of child(ren)  Click or tap here to enter text. |
| Date(s) of birth  Click or tap to enter a date. |
| Address of the children  Click or tap here to enter text. |
| Name of parents  Click or tap here to enter text. |
| Name of main caregiver (*if not a parent)*  Click or tap here to enter text. |
| Any other household members (*living in the same house as the children)*  Click or tap here to enter text. |

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| Your name Click or tap here to enter text. |
| Job title Click or tap here to enter text. |
| Length of involvement with the family Click or tap here to enter text. |
| Has your agency’s report been shared with the family?  Yes  Date: Click or tap to enter a date.  No  Please state why not: Click or tap here to enter text. |

**Dates of visits/contacts with the family by your service, if applicable, including any failed appointments:**

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| Date | Click or tap to enter a date. |
|  | Click or tap to enter a date. |

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| **Please describe the child(ren)’s developmental needs:**  Including health, education, emotional and behavioural development, identify, family and social relationships, social presentation (e.g. are they usually happy, withdrawn or angry?) and self-care skills.  Click or tap here to enter text. |

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| **Please describe the parenting capacity of the parents/main caregivers:**  Please include their ability to provide (for their children) basic care, emotional warmth and stimulation, guidance and boundaries and to ensure the safety of the child(ren).  Click or tap here to enter text. |

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| **Are there any other adults that are involved in the children’s lives?**  This includes relatives or friends that look after the children, regularly visit the house and/or spend time with the family. Please include this information even if you don’t know their names.  Click or tap here to enter text. |

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| **Family and environmental factors:**  Including family history and functioning, wider family and close friends, housing conditions and suitability for the family, employment and income, family’s social integration (their involvement in their immediate community) and community resources.  Click or tap here to enter text. |

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| **Additional information, including any recent involvement and any concerns you have:**  Click or tap here to enter text. |

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| **Assessment of risk**  Based on your observations please make a professional assessment of risk covering the areas outline below  .  **Risks/ what we are worried about?**  Include any factors you consider to pose a risk of significant harm or increase the risk of harm to the children.  What’s happening/happened and what is the potential impact on the children?  Are there any historic factors such as a previous history of concerns within the family, anything that might get in the way of resolving current risks and any previous involvement with your agency**.**  Click or tap here to enter text.  **Strengths/ what is working well?**  Include factors that you believe reduce the risks of harm to the children or help to keep them safe.  Any features of family life and parenting (including extended family) that have a positive effect on the children’s lives.  Anything the parents/ carers are doing well and we would worry if they weren’t doing.  Click or tap here to enter text.  **Complicating issues/factors:**  Any issues which prevents family/ parents from engaging, making change:  Click or tap here to enter text.  **Unknowns/ what we don’t know:**  Any areas that are unclear or may be of potential concern for the children but require further time, clarity or assessment. Any missing or confusing information that is important for us to understand.  Click or tap here to enter text.  **Any issues which prevents family/ parents from engaging, making change:**  Click or tap here to enter text.  **Comment on the need for a child protection or child in need plan:**  Click or tap here to enter text.  **What can you contribute to any plan that is considered necessary**  Click or tap here to enter text. |

The content of this report should be shared fully with the parents/carers, (this can be done via telephone call) unless you believe this will place any person at serious risk of harm.

This report should be submitted to: Independent Review Unit, Mt McKinley Shrewsbury Business Park, Shrewsbury, SY2 6FG or [iru@shropshire.gov.uk](mailto:iru@shropshire.gcsx.gov.uk) ***at least three days before*** the Conference.

Signed ...................................................................................... Date..........................................