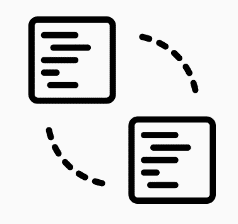
**Pan-Sussex Child Protection & Safeguarding Policy & Procedures Group -** Briefing for staff

The Pan-Sussex Child Protection & Safeguarding Policy & Procedures Group met on 29 June2021. This briefing provides updates on changes to the policies and procedures reviewed by the group.

**If you would like to discuss any aspect of this briefing, please contact** [**mia.brown@brighton-hove.gov.uk**](mailto:mia.brown@brighton-hove.gov.uk)

**Using 'consent' to process/share personal data**

**You do not need to request consent or permission to use/share information for the purposes of safeguarding and promoting the welfare of a child, but you do have a duty to explain how it will be used.**

[Working Together to Safeguard Children](https://www.gov.uk/government/publications/working-together-to-safeguard-children--2) has been updated to provide clarification that professionals **do not need consent** to share personal information. It is one way to comply with the data protection legislation, but it is not the only way. The GDPR provides a number of bases for sharing personal information. The [Information Sharing Policy](https://sussexchildprotection.procedures.org.uk/pkypph/information-sharing-and-confidentiality/information-sharing/#s3967) has now been updated.

It is not necessary to seek consent to share information for the purposes of safeguarding and promoting the welfare of a child, provided that there is a lawful basis to process any personal information required.

The legal bases that may be appropriate for sharing data in these circumstances could be ‘legal obligation’, or ‘public task’ which includes the performance of a task in the public interest or the exercise of official authority.

For section 17 and section 47 cases, the lawful bases for processing information will largely be for the performance of a public task and necessary for the provision of social care.

What is key to respecting the rights of service users is to ensure they are given clear information as to how their information will be handled including with whom it may be shared.

**Multi-agency professionals’ meeting (within the context of** [**Fabricated or induced illness (FII) and Perplexing Presentations (including FII by carers)**](https://sussexchildprotection.procedures.org.uk/tkypss/children-in-specific-circumstances/fabricated-or-induced-illness-fii-and-perplexing-presentations-including-fii-by-carers/#s4213)

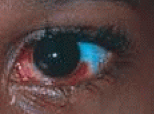


If there is no immediate risk of harm, cases of perplexing presentations/possible fabricated or induced illness should be discussed with the professional(s) who are working with the child and family to decide whether the threshold for referral to Children’s Social Care has been met.

A new section on multi-agency professionals’ meeting has been added to the FII Policy. This aims to support practitioners to conduct such a meeting to facilitate the reaching of a consensus about the child’s state of health. **This type of meeting should never be held in place of a Strategy Discussion.**

**Recognising Physical Abuse and Unexplained Injuries in young children**

**Eye injuries**

We have provided more information in the procedures to better describe a Sub conjunctival Haemorrhage (SCH).

A SCH occurs when a tiny blood vessel breaks just underneath the clear surface of the eye (conjunctivaI). It appears as a bright red or dark red dot or mark/patch on the white of the eye. There are a number of possible causes of SCHs that need to be considered, including non-accidental causes).

[**Looked After Children**](https://sussexchildprotection.procedures.org.uk/tkypoq/children-in-specific-circumstances/looked-after-children) **- Practice Reminder**

**If there is cause to suspect a** [**Looked After**](https://sussexchildprotection.procedures.org.uk/page/glossary?term=Looked+After+Child&g=3AzN#gl41)**child is suffering, has suffered or is likely to suffer Significant Harm, Children's Social Care should convene a** [**Strategy Discussion**](https://sussexchildprotection.procedures.org.uk/zkyphz/response-to-child-protection-referrals/strategy-discussions/#s4101)**. *We see from Child Safeguarding Practice Reviews, formerly Serious Case Reviews, that this can sometimes be overlooked because professionals assume the child is now ‘safe’.***

[Looked After](https://sussexchildprotection.procedures.org.uk/page/glossary?term=Looked+After+Child&g=3AzN#gl41) Reviews and [Child Protection Conferences](https://sussexchildprotection.procedures.org.uk/page/glossary?term=Child+Protection+Conference&g=zkjN#gl27) may be held as combined meetings in order to ensure a coherent plan. The plans made at [Looked After](https://sussexchildprotection.procedures.org.uk/page/glossary?term=Looked+After+Child&g=3AzN#gl41) Reviews must be consistent with the [Child Protection Plan](https://sussexchildprotection.procedures.org.uk/page/glossary?term=Child+Protection+Plan&g=wkjN#gl24). This will ideally be achieved by the Independent Reviewing Officer ([IRO](https://sussexchildprotection.procedures.org.uk/page/glossary?term=IRO&g=xEzN#gl45)) who chairs the [Looked After](https://sussexchildprotection.procedures.org.uk/page/glossary?term=Looked+After+Child&g=3AzN#gl41) Review process, also chairing the Review Conference.

Where this is not possible the [IRO](https://sussexchildprotection.procedures.org.uk/page/glossary?term=IRO&g=xEzN#gl45) should be involved in the Review Conference and the timing of both processes should coincide to ensure that the most up-to-date information informs overall care planning.

[Parenting capacity and mental health issues](https://sussexchildprotection.procedures.org.uk/tkyqxq/children-in-specific-circumstances/parenting-capacity-and-mental-health-issues)

[**Children of Parents and carers who Misuse Substances**](https://sussexchildprotection.procedures.org.uk/tkyqxz/children-in-specific-circumstances/children-of-parents-and-carers-who-misuse-substances/#s5056)

# The Children of Parents and carers who Misuse Substances Policy has been updated to clarify that substance misuse may include experimental, recreational, poly-drug, chaotic and dependent use of alcohol and / or drugs. **This can include the illicit or misuse of prescribed medication.**

## The policy now also includes information to support practitioners to recognise the signs of parental substance misuse or prenatal drug exposure, including Foetal Alcohol Spectrum Disorder (FASDs),

in new-borns and children.

The parenting capacity and mental health issues policy has been updated to include parental risk factors which may impact upon parenting capacity and increase concerns which may require a referral to Children's Social Care for an assessment of the child's needs.

Professionals are reminded it may be necessary to seek consultation with specialist mental health practitioners in some circumstances regarding parents experiencing mental health difficulties. This may help gain an understanding of the nature, degree and context of their behaviours and potential impact on parenting capacity for example:

* Maternal OCD where thoughts to harm a child are being verbalised
* If a child is involved in their parent's obsessional compulsive behaviours
* Eating disordered parents