

## Depending on what is found:

- No further action is needed - social services will write to you when the case is 'closed'.
- We will offer you a follow-up appointment.
- You and your child may be offered support and advice.

**If further assessment is needed by social care, a case conference will be arranged (to which you are invited) to decide on monitoring. In most cases children remain at home. It is rare for children to need to be taken away by social workers: this occurs when information suggests that there is an immediate danger and the child cannot be protected within their wider family circle.**

- We recognise that this can be a very stressful time for you and your family.
- We aim to treat you with respect, listen to you, give you clear explanations, and offer you advice and support.
- Please tell us if we can do better.

**UH Sussex Brighton patient advice and liaison service (PALS):**

**01273 696955 Ext. 64511 or 64973**

**Thank you for your cooperation.**

## Useful contacts

The NSPCC has helplines that children and adults can ring for advice and support. Children and young people can call ChildLine on **0800 1111**. Adults can call **0808 800 5000** for help and advice.

**The Family Rights Group (FRG)** provides free confidential advice and support to families whose children are involved with local authority children's services, and has a range of free advice sheets on its website. Families can call its advice service free on **0808 801 0366** or send an online enquiry form: <https://frg.org.uk/advice-form/>

**The Coram Children's Legal Centre** **08088 020 008** gives free legal advice on Child Law, family law and education law.

**Family Lives** is a national charity providing help and support on all aspects of family life. It has a confidential service called Parentline **0808 800 2222**, which parents can call for free from landlines and most mobiles for information, advice, guidance and support on any aspect of parenting and family life.

**Home-Start UK** is a nationwide charity supporting children and families through a network of volunteers.

Produced by the Children's Safeguarding Team. Authors: FH/LP/DF  
This leaflet is intended for patients receiving care in Brighton & Hove or Haywards Heath

Ref. no.1073.1 Publish Date: 01/2021 Review Date: 01/2024

© University Hospitals Sussex NHS Foundation Trust Disclaimer:  
The information in this leaflet is for guidance purposes only and is in no way intended to replace professional clinical advice by a qualified practitioner.



# the alex

Children's Hospital

## Safeguarding and Child Protection assessments: leaflet one

**SENIOR DOCTOR TO PROVIDE  
THIS LEAFLET DURING DISCUSSION  
Leaflet 1**

This leaflet is intended to help you understand the safeguarding and child protection assessment and:-

- Why people are concerned.
- What processes are involved.
- What will happen afterwards.
- Where families can get help.

## Why are people concerned?

There are a number of reasons why health professionals may have safeguarding concerns about a child.

**This could include:**

- You and your family need additional support to meet your child's needs. Bringing up children is challenging but some circumstances mean that you may need help with this.
- Your child or family has a child protection plan in place.
- Your child has an injury or a mark that raises concerns about its cause e.g.
  - an unusual injury or mark
  - an unexplained or serious injury
  - an unusually long delay in bringing your child to the hospital.

Once a concern is raised, healthcare professionals have a **duty of care to your child** to explore it further. This means we have to consider all possible causes, including medical, accidental or inflicted, and investigate the problem thoroughly. It is routine and recommended practice to inform social services of the concern, who in turn inform specialist police.

## What about confidentiality?

Although children, young people and their families have a right to receive confidential medical care and advice, sometimes staff have to share information outside of health care where they feel a patient is at risk of harm or neglect. We will discuss this with families unless we worry that this places the child at greater risk.

## What will happen next?

A doctor will take a detailed account of what happened. They may ask personal or difficult questions. We ask everybody the same questions.

**If not already occurred, your child will have a top to toe general examination.**

Any injuries will be noted, measured and drawn in your child's medical records and photographs may also be taken. Some tests may also be done, such as:

- Blood test
- X-rays (including CT head)
- Eye tests.

All of this helps to provide further information about the injury. Leaflet 2 will explain more about these tests. We will take consent prior to performing investigations and during this time you will have an opportunity to talk about your concerns and to ask questions about the process.

## What happens after the examination?

Depending on the injury, you and your child may be admitted to the children's ward for a few days in order to complete investigations, which may involve more medical tests and information gathering by social services.

A strategy meeting is usually held, where health workers, social workers and any other relevant professionals share information to ensure we are doing the best for your child.

As part of this process, the doctor will write a report which is shared with the social worker / police / health visitor / GP.

## What will social workers and police do?

Social workers and the Police have a legal responsibility to investigate any concerns which suggest your child, or any other child, has been harmed or is at risk of harm.

**They aim to:**

- Make sure your child is healthy and safe.
- Protect your child from actions of any possible offenders.

They may speak to you, your child and any other relevant people.