Case Resolution Protocol

1. **Introduction**

1.1 Effective safeguarding of children is absolutely predicated on practitioners and front line staff wanting the very best for children and being ready to stand up in their best interests even if this brings them into disagreement with other practitioners, with other organisations or with their own managers and employing bodies. (There are individual organisational and partnership whistle blowing policies that cover these latter areas)

1.2 This document sets out how significant case disagreements will be managed within the Devon Children and Families Partnership (DCFP). It doing so it seeks to be more than an escalation procedure\(^1\) – essentially it seeks to set out an approach to resolving conflict and to ensuring children's needs remain at the heart of all we do.

1.3 In nearly all this instances, it will be possible to resolve any differences within the line management arrangements of partner agencies. It will be exceptional that cases need to be progressed through a more formal procedure.

2. **The Protocol**

\(^1\) The DCFP’s escalation procedure can be accessed here: https://www.proceduresonline.com/swcpp/devon/p_escalation.html
2.1 Proactively resolving case disagreements is about behaviour and partnership culture. Escalating concerns about a child is not simply allowed for or tolerated in the Devon system – it is expected. Safeguarding children is not a science, there are no absolutes and no automatic right answers. Discussions and debates about the best way forward for children are part and parcel of safeguarding work.

2.2 Matters will only be successfully escalated or conflicts successfully resolved if those involved are willing for that to happen. The desired culture can be best described as one characterised by a ‘confident humility’ – that balance, on the one hand, between people and organisations being skilled, expert, trained and confident and, on the other, the appreciation that no-one knows everything or holds all the answers, that different perspectives add depth and understanding and that sometimes everyone can get it wrong.

2.3 Organisationally, this means:

- Senior leaders in all partner organisations will need to lead this policy by example and demonstrate and model the behaviours needed for it to be successfully embedded into the local culture.
- Case disagreements are to be welcomed and their resolutions are considered likely to improve outcomes for children
- There is an expectation that there is a collective responsibility for problem solving regardless of where the specific issue lies
- That external mediation can be useful when needed and can be provided either by the Independent Chair or another partner organisation best suited to the issue

2.4 At an individual level, it means:

- Ensuring that only the best interest of children drives the escalation
- Concerns have been thought through with safeguarding leads
- They are raised with respectfulness, balance and clarity
- That clear evidence is provided or if it is a gut feeling, say it is and own it as such
- Understanding any personal motivation that might be driving the escalation
- Understand where there might be an over identification with one family member at the expense of another
- Tenacity is not the same as stubbornness or inflexibility
- NOT - ‘And another thing’ – saving up complaints or concerns
- NOT - Complaining to colleagues not the source of the concern
- NOT - Blaming front line staff for organisational ‘failings’
- NOT – Silence
- NOT – refusing to listen to or reject out of hand answers when provided

2.5 Professionals raising issues with each other can almost always result in an agreed way forward. When they do not, there is an expectation that resolution will be sought manager to manager and that that resolution continues up the
hierarchies until a resolution is reached. If necessary this should be up to and include the senior managers and leaders in partner organisations.

2.6 All the key agencies are represented, either directly or indirectly, on the Quality Assurance Group. This protocol requires that all instances of these forms of escalations are reported up to the QAG.

2.7 The DCFP QA Group will therefore have as a standing item at every meeting a report on case disagreements to ensure there is an overview of areas of dispute and challenge. Understanding the pattern of conflicts and conflict resolutions is an important part of gauging the health of the system. Of equal if not greater importance, will be the need to understand the lack of escalations being reported as that might indicate a lack of appropriate challenge and grit in the system.

2.8 The QA Group will also expect the Independent Reviewing Unit to report on any examples of inter-agency difference that becomes apparent in the conduct of child protection conferences and/or children in care reviews. Conference chairs are necessarily independent of operational service delivery and it is right that their independence should be used to identify and, where appropriate and possible, resolve inter-agency disagreement.

3. **Specific Cases**

3.1 There are two types of cases that warrant specific consideration.

a. Firstly, there will be some cases which raise matters of such potentially serious concern that they should be automatically logged with the Chair of the DCFP Quality Assurance Group. He/she will make a decision about whether the issues require a broader deep dive and investigation, beyond the detail of the specific case involved, to fully understand them and resolve them.

b. Secondly, there are cases where the professional network can get ‘stuck’. The levels of risk may be severe, the way forward not clear and this, combined with levels of disguised compliance in parents and carers can often leave staff and sometimes their agencies with a high level of concern but a lack of clarity and certainty about how to manage the risk.

c. This ‘stuckness’ has been evident in some SCRs both locally and nationally. Staff, and agencies, can get stuck in a position characterised by ‘there is nothing I/we can do – somebody else should do something – something must be done’ This in turn can lead to inappropriate finger pointing and what appears to be escalation of concerns against a partner agency.

[draft]

d. It is critical that in these instances staff, and especially their managers/supervisors, are able to recognise what is happening and that the real issues might be high levels of risk combined with a lack of clarity about
ways forward and professional dispute and a frozen or stuck intervention. Supervision is, as in most safeguarding work, the single most important process in helping staff think through the complexities and challenges that are associated with this area of work. Any review if individual escalations will necessarily involve a review of the supervision and guidance available to those involved.

e. In these circumstances, the expectation is that relevant managers will liaise with each other with a view to finding a mediated resolution and way forward.

f. The QA Group should be informed and will offer a relevant mediator to bring the agencies together and identify a way forward. It is important to be clear that no-one from the QA group, including the Chair can be a case decision-maker. That responsibility sits with the agencies concerned and those who hold the statutory role – it is neither desirable or possible for that to be over turned by anyone outside of a legal process. The mediation is as described – to bring together all concerned, air the issues and seek to arrive at the best way forward (which often, in reality, can be the least worse way forward – if there was an easy and clear solution, agencies would have arrived at without and mediation.)

g. The template for raising disagreements can be found in appendix 1 of this document and on the DCFP website. This template should be used when efforts to resolve issues directly between practitioners, their line manager/service has not achieved the child centred outcome desired or in a timely way. Evidence of efforts to resolve issues and reasons for a formal escalation to be provided to assist QA group in their efforts to support problem resolution.

4. **Conclusion**

4.1 Arriving at this form of conflict resolution through changing behaviours and culture is the sign of a confident and mature partnership. It is not something we in DCFP can expect to get to immediately or painlessly. The protocol will be reviewed annually and a report on the development of the culture and the detail of conflicts raised and resolved will be tabled with the Partnership Executive Group.
**Appendix 1: Case Disagreement Template.**

This template should be used to escalate issues to the DCFP lead for Quality Assurance (Mark Gurrey)

<table>
<thead>
<tr>
<th>Date Issue Raised:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Person raising escalation:</td>
</tr>
<tr>
<td>Case details:</td>
</tr>
</tbody>
</table>

**Issue/s of concern (add more rows as required):**

1. 
2. 
3. 
4. 

Outline all efforts to constructively resolve issues between services (at practitioner, manager and senior manager levels)

**Outcome sought:**

**Response from DCFP:**