

**Children's Social Care and Adult Mental Health**

# Joint Protocol



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## Joint Protocol Children's Social Care and Adult Mental Health

This protocol is for all staff who work in Adult Mental Health and Children's Social Care services in Hackney. It is designed to support staff when assessing and supporting families where a parent or carer has a mental illness. It also sets out roles and responsibilities. More detailed information can be found in the full reference guides, which are available on the intranets of both organisations.

This guidance applies particularly to Adult Mental Health services and Children's Social Care services however all agencies have a responsibility to identify concerns about child welfare or parental (this refers to any adult in a caring role or close relationship with a child) mental health issues and make a referral to the relevant agency where necessary.

The London Child Protection Procedures apply to families with children (including unborn) where a parent or carer has a mental illness. It is important to consider the whole family including older siblings and other adults caring for children. Also, in addition to considering risks, it is important to keep a child or young person's needs in mind and to consider whether they may be a young carer and/or require additional support.

The following factors may impact on parenting capacity and increase concern that a child may have suffered or is at risk of suffering significant harm. **It is, however, important to exercise professional judgement in each situation, and recognise that a referral may need to be made even when the factors below are absent.**

When a child:

- features within parental delusions i.e - in these cases a Section 47 (Child Protection Investigation) will be conducted (The Children Act 1989)
- is involved in his/her parent's obsessive compulsive behaviours
- becomes a target for parental aggression or rejection
- witnesses disturbing behaviour arising from mental illness, e.g. self harm, suicide, uninhibited behaviour, violence or homicide.
- is neglected physically and/or emotionally by an unwell parent
- does not live with the ill parent but has contact with them, e.g. during formal supervised or unsupervised contact sessions, visits or overnight stays

Other complicating factors to consider include:

- unmanaged health problems which impact on the parent's functioning

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- domestic abuse in the family
  - misuse of drugs, alcohol or medication
  - self-harming or suicidal behaviour
  - lack of insight into illness and impact on child, or insight not applied
  - non-compliance with treatment
  - poor engagement with services

Where the criteria for a referral to Children's Social Care are not met mental health practitioners should always consider whether the family would benefit from early support service available within the Borough. Contact details for Universal Services may be identified in the Resource Guide for Professionals.

## MAKING A REFERRAL TO CHILDREN'S SOCIAL CARE

The First Response Team is the first point of contact for all new referrals to Children's Social Care. Anyone can refer a child to Children's Social Care whether the adult is an inpatient, living in the community, normally resident in the child's home or not and whether or not previously known to Children's Social Care.

The Screening and Referral Manager will decide if a statutory assessment is required and if so will allocate to a social work unit.

If an Adult Mental Health worker is worried about a child's welfare (whether or not the child lives with their parent or carer), a prompt referral should be made initially by telephone to the First Response Team and followed by a written referral within 24 hours using the Inter-Agency Referral Form (available on the ELFT intranet Safeguarding Children page).

- The contact telephone number for the First Response Team is 020 8356 5500.
- The fax number for the First Response Team is 020 8356 5516.
- The secure email address for the First Response Team is [cscreferrals@hackney.gov.uk.cjism.net](mailto:cscreferrals@hackney.gov.uk.cjism.net)
- Emails from East London Foundation Trust staff must only be sent TO AND FROM their secure nhs.net email address.
- In emergencies outside office hours the Emergency Duty Team can be contacted on 020 8356 2710 for Children's Social Care. All referrals must be made by phone in the first instance.
- The relevant page for referral information on the Hackney Council's website is:

<http://apps.hackney.gov.uk/servapps/hackneydirectory/details.aspx?OrgID=2612>

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## Children's Social Care Response to a Referral from Adult Mental Health Services

The referrer will receive an automatic email receipt for referrals received by email and faxed referrals will be acknowledged within one working day of receipt either by the First Response Team, or from a Social Work Unit in the Access and Assessment or the Children in Need Service if the case is already open and allocated.

On new referrals, the First Response Team will liaise with referrers to seek additional information if necessary and advising on action taken in response to the referral. If the referral is not accepted for allocation they will advise on the reasons for this. If for any reason this does not happen within three working days, the referrer should contact Children's Social Care and ask to speak to a Service Manager in the Access and Assessment Service. If the referrer is concerned about a decision that has been reached they should discuss this with the First Response Team Manager in the first instance and then with the Service Manager in Access and Assessment if agreement cannot be reached. If agreement is still not reached the escalation process set out at the end of this document should be followed.

### Referrals to Adult Mental Health Services

Children's Social Care staff with concerns about the mental health of a parent/carer should establish if they are receiving or have received any services from their GP or Adult Mental Health services. All referrals or queries (except perinatal mental health) should be made to:

**City & Hackney Adult Mental Health Point of Entry (CHAMHPE)**  
The Junction  
Centre for Mental Health  
Homerton Hospital, Homerton Row  
London E9 6 SR  
Tel: 020 8510 8011 Fax: 020 8510 8064

**Out of Hours Contact for Psychiatric Advice or Information Sharing**  
Tel: 020 8510 8980 / 020 8510 8981

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## Adult Mental Health Response to Referrals from Children's Social Care

Adult Mental Health staff will establish if the parent/carer is known to Adult Mental Health Services and if so pass the name and contact details of the Mental Health Worker to Children's Social Care staff. The Children's Social Care worker should then liaise directly with the allocated Adult Mental Health worker and team.

CHAMHPE will inform CSC if the referral will not be taken and why. The services may need further discussion as to the risks within the family. The Named Professional for safeguarding children can also be approached to help or to resolve any differences and views.

### Urgent Mental Health Assessments for New Referrals

If the referral is accepted CHAMHPE will determine the urgency of the referral and will allocate accordingly.

If a Mental Health Act assessment is indicated (used if legal powers for detention may be needed) an Approved Mental Health Professional (AMHP) will be involved. The AMHP manager can also be contacted for advice on 0208 510 8410/8044.

The Adult Mental Health worker will acknowledge receipt of the referral within 24 hours and state the action(s) taken in response. The Adult Mental Health Worker will undertake an assessment (which will include a risk assessment) and inform Children's Social Care promptly of the outcome. The two agencies will then agree a coordinated approach.

### Perinatal Mental Health Referrals

Referrals (apart from emergencies and out of hours) about pregnant women and women with babies should be made directly to the Perinatal Mental Health Outpatient Service on Tel: 020 8510 8151. For information about the inpatient Margaret Oates Mother and Baby Unit Tel: 020 8510 8420 or Fax 0208 510 8552.

### Information Sharing

Staff can legally share confidential information with the parent's consent. If there is a risk to children, there is a duty to share information, with or without the parent's consent. If it is not clear if there is a potential risk staff should consult with their supervisor and/or the named safeguarding professional. Failure to share relevant

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information could be viewed as a failure of the organisation to discharge its duty of care particularly if there is subsequent harm.

Throughout the time of joint involvement, there must be clear and regular communication between Children's Social Care staff and Adult Mental Health staff and wherever appropriate, they should meet face-to-face.

All meetings should be minuted and all other forms of communication including telephone calls, emails, faxes and informal conversations must be documented on the appropriate file on RIO for mental health or Frameworki for Children's Social Care. It is important that all telephone calls between professionals, including those where a message is left with a member of staff or on a voicemail system, are recorded with the name of the person spoken to, date of call and all relevant details. Advice provided by managers or specialists such as an ELFT Named Professional for Safeguarding Children must also be recorded.

## **Collaborative Assessments / Plans**

Collaborative working and parallel planning are best practice when both agencies are working with a family. Assessment should be approached as a shared activity but the level of involvement of each agency will be different in each case dependent on the features and issues that are present. There should be joint agreement as to how to proceed on each case.

Discussions must include both agency's views of any risks to children in the household. Staff must be aware that siblings and other adults visiting the household may also present risks. This will include actual and potential impact of behaviour, attitude and actions associated with the parent's mental illness on their parenting, the child, the parent-child relationship, and the impact of parenting on the adult's mental health. Adult mental health staff may take into account activities of daily living (ADL) assessments if appropriate. Assessments should provide a comprehensive and reflective analysis of the actual or likely impact on the child of living with a parent or carer with mental health difficulties.

Discussion should be held during any assessment processes to share information, evaluate progress, analyse information and to ensure that they draw on the professional expertise of practitioners in both agencies. Joint visits must be considered and arranged where necessary or where these would be useful.

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## PLANNING MEETINGS

There are a number of different planning meetings that may occur and that professionals from both agencies will be expected to attend if you are involved with the family. These include:

### Professionals Meetings

Any agency can call a multi-agency professionals meeting to share information or decide on further action. The meeting will not include any members of the family. Professionals should not decide what other agencies will do or lead on without there first having been agreement for such decisions.

### Adult Mental Health Care Programme Approach Meetings

The Care Programme Approach (CPA) process will include a Full Needs Assessment, resulting in a detailed care plan. The care plan must demonstrate that parenting support needs and the needs of, and risk to, the child or children, and any carers, including young carers, have been identified and reflected in the risk assessment, risk management, crisis and contingency plans.

### Child Protection Strategy Discussions

A multi-agency Child Protection Strategy discussion will take place and a meeting may be convened by Children's Social Care Services in response to all referrals where adult mental health may significantly affect a child's well-being.

### Child Protection Conferences

Children's Social Care has the responsibility to invite all relevant professionals to Child Protection Conferences and Core Group Meetings. When Adult Mental Health have been invited, they are expected to attend the Initial Child Protection Conference with a written report as per child protection **conference report pro forma**. This meeting decides whether a child should be the subject of a Child Protection Plan. Adult Mental Health staff must attend all subsequent review conferences if invited.

### Child Protection Core Group Meetings

If the child is made the subject of a Child Protection Plan, the Adult Mental Health worker must be invited to become a member of the core group and attend the Core Group Meetings. These review the implementation of the Child Protection Plan. Parents, and children where appropriate, are members of the Core Group and are invited to attend.



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## Children in Need Meetings

If the child is subject to a Child in Need (CiN) Plan, the relevant Adult Mental Health worker/s must be invited to meetings in respect of the Plan and subsequent reviews and should make every effort to attend. If unable should ensure that up to date information is available to the meeting Parents, and children, when appropriate, attend CiN planning meetings and reviews.

## Statutory Looked After Children's Review Meeting

If the plan is for a Looked After Child (LAC) to have contact with or to return home to live with a parent who is known to Adult Mental Health Team, the parent and a representative from the Mental Health Team must be invited to participate in the review and their views should help inform the Looked After Children Care Plan and/or Pathway Plan (guidance says that a child / young person is lead in deciding who attends the actual meeting so we can't dictate that parents / mental health worker should attend).

## Admission to Hospital, Visiting and Leave Arrangements

On admission of an adult who is a parent or carer, inpatient units must check whether Children's Social Care are already involved with their children. If so Children's Social Care must be informed that an adult with regular contact with children has been admitted to hospital.

If the case is not open to Children's Social Care inpatient services must consider whether a referral to CSC is required. If the case is already known to a community mental health team or specialist service there should be discussion as to which service is best placed to make the referral and have ongoing contact with CSC.

For cases involving Children's Social Care, child visiting and parental leave arrangements must be jointly discussed and this must be recorded on RIO and Frameworki.

## Discharge from AMH Services or closure to CSC

When either agency is considering discharge/closure from any of its services, a meeting must be convened involving relevant staff from each service. It is imperative that neither agency should agree actions or decisions on behalf of each other without agreement and consultation from the relevant agency.

If there is disagreement about the discharge/closure decision from either agency escalation protocol must be followed.

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## ESCALATION AND RESOLUTION OF DISPUTES

In the event of a dispute between professionals, the matter should be discussed by the respective line managers. If the dispute cannot be resolved at this level within a reasonable timescale, the matter should be referred first to the relevant service managers, and then to the relevant Head of Service in Children's Social Care and the relevant senior manager in the Adult Mental Health Service. Professionals within the East London Foundation Trust (ELFT) should seek advice if and when required from the ELFT Safeguarding Children Team of Named Professionals (Adult Mental Health).



