



Suffolk  
Safeguarding  
Partnership

# Multi-Agency Escalation Process

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Process for the Resolution of Professional Disagreements Relating  
to the Safeguarding and Protection of Children and Adults

## Version History

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Version	Date	Author	Changes Made
First Edition	April 2012	LSCB Manager	
1 (Revised Edition) (Draft V.2)	September 2014	LSCB Manager	
2	October 2014	LSCB Manager	
3	August 2017	Professional Adviser, LSCB	Addition of reference to supervision on page 3.
4	December 2019	Independent Chair, SSP	Document Review and Re-write.
5	February 2020	Independent Chair, SSP and Professional Adviser	Further amendments
6	November 2021	Professional Adviser	Addition of Disagreement from Referral.
7	December 2022	Tracy Murphy, SSP, Jo Stroud and Jo Hutchings, Health and Alli Hassey, CYPS Safeguarding	Changed to Process from Policy and, Staged Resolution Process made clearer and introduction of Appendix 1 Escalation Proforma.
8	July 2024	As above	Role change in document from SSP Independent Chair to SSP Independent Scrutineer.

# **An Escalation Process for Suffolk Safeguarding Partnership**

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## **Why This Process is Important**

Multi-agency working to keep a child or adult at risk protected from harm is often complex. From time to time, the judgement of staff from different professional backgrounds may differ and can cause conflict. Child and adult safeguarding work can be emotionally overwhelming, and this can affect judgment and can lead to conflicts arising over relatively minor issues. Normally the professionals involved both want to protect the child or adult in question but disagree on how best to do this. It is rare for one party in such a dispute to care less than the other. This process sets out clear routes to escalate professional concerns where there are fears that a difference of opinion may be getting in the way of keeping a vulnerable person safe. Ultimately, any professional caught up in a conflict must keep their focus in the best interests of the child or adult in question.

## **Challenge**

Challenge is a good thing and good practice includes the expectation that constructive challenge amongst colleagues, within agencies and between agencies, will happen and is in the best interests of children and adults. Everyone working with children and adults needs to be prepared to re-consider their view of the child or adult's situation in the light of new information, and to continually re-frame their assessment when new information or challenges arise.

Suffolk Safeguarding Partnership aims to be a high trust partnership in which conflicts are resolved through mature conversation – see The Standard for 'Outstanding Partnership Working' set out below, which we aim to live by.

## **The Standard for 'Outstanding' Partnership Working**

1. A culture of early identification and referral to partner agencies when there are concerns about children or adults at risk.
2. Open and transparent dialogue with partner agencies, even if this means exposing areas of weakness to be addressed in the agency's own systems and processes
3. Respect means responding to the concerns of partners, even if one agency feels the concern has insufficient eligibility for a service. Respect means at least having a mature conversation about a person at risk's needs and the best way forward.
4. Disagreements should always be handled through conversations which seek to arrive at a joint understanding. A lack of communication, confrontational positioning or aggressive emailing, are all signs of dysfunctional partnership working likely to rebound badly on vulnerable children and adults.
5. Partner agencies should have high mutual expectations of one another, based upon prioritising safeguarding over other priorities, especially when a case is at Level 3 or 4. Outstanding partnership working means there is no weak link in the 'professional supply' chain.

## Principles to Abide By

- 1<sup>st</sup> Principle:** Desist from an aggressive reaction and enter a dialogue, if need be, an extended dialogue (within the timescale for the issue to be resolved).
- 2<sup>nd</sup> Principle:** Persist in reaching a resolution, do not detach and act unilaterally.
- 3<sup>rd</sup> Principle:** The person or agency concerned should escalate internally and the escalation to go to the person most likely to be able to sort the issue out.
- 4<sup>th</sup> Principle:** Resolve quickly, so use of phones or email is important, not waiting for meetings as that process usually (but not always) causes delay.
- 5<sup>th</sup> Principle:** Conflicts of this nature also arise with children, adults or carers, and the same approach to dispute resolution applies.

## Principles of Resolution

When trying to resolve disagreements, practitioners should work within the following principles:

- The safety and wellbeing of the child or young person is paramount.
- The child or young person should remain at the centre of all professional discussions.
- Ensuring that the right conversations are had with the right people at the right time.
- To resolve disagreement using a restorative and solution focused approach which includes appropriate and respectful challenge.
- Professionals must share the key information and their interpretation and assessment appropriately, and what may be the likely impact on the child.
- Professionals should consider what needs to be achieved to resolve the problem.
- Resolving disagreements in a timely manner.
- Concerns, actions, responses, and outcomes must be recorded and agreed.
- The process must be open and transparent.
- Avoid professional disagreement which may place children at further risk of obscuring the focus of the child or which may delay decision making.

## Staged Process for Resolution

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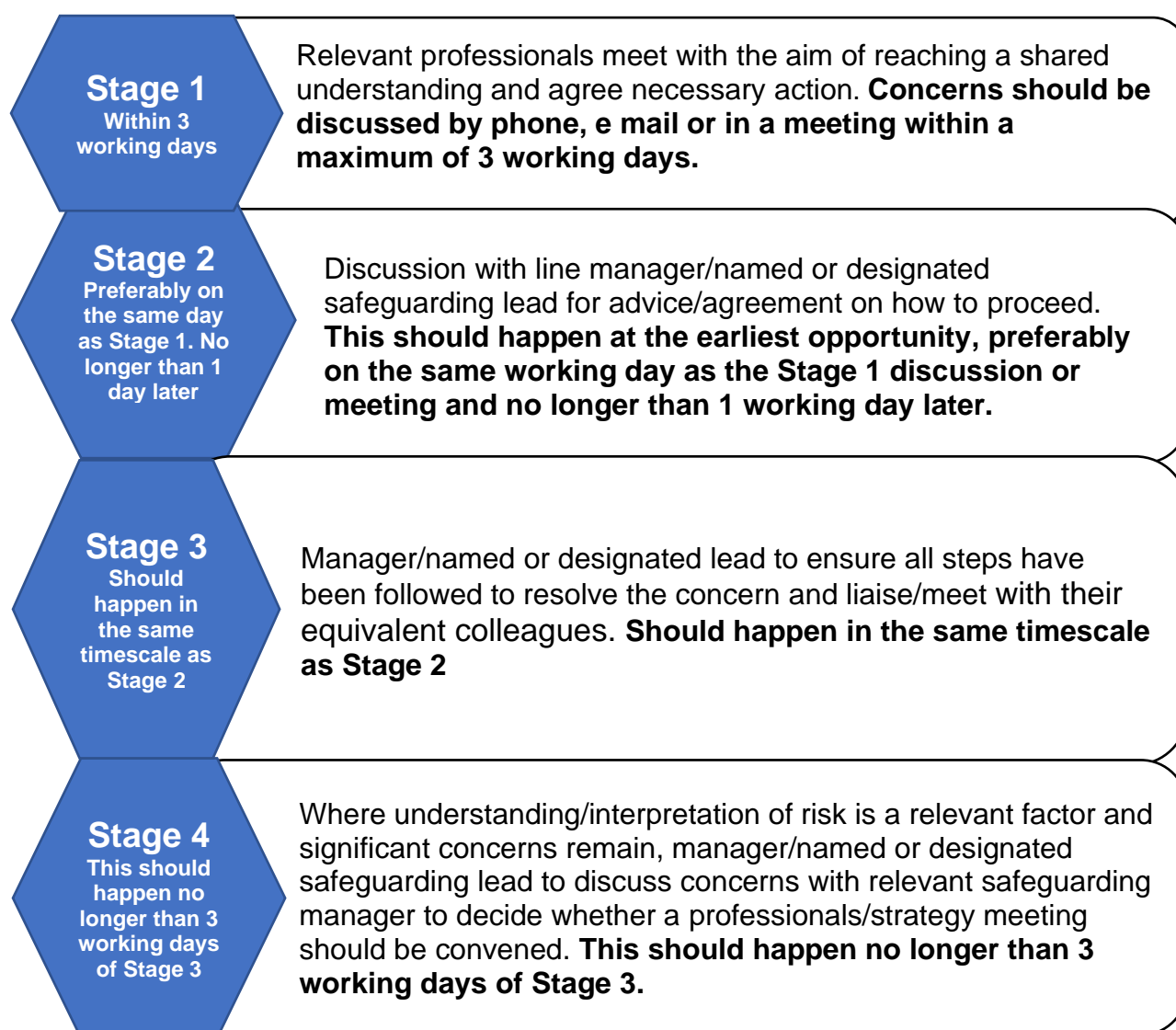
### Resolving the Difference of Opinion

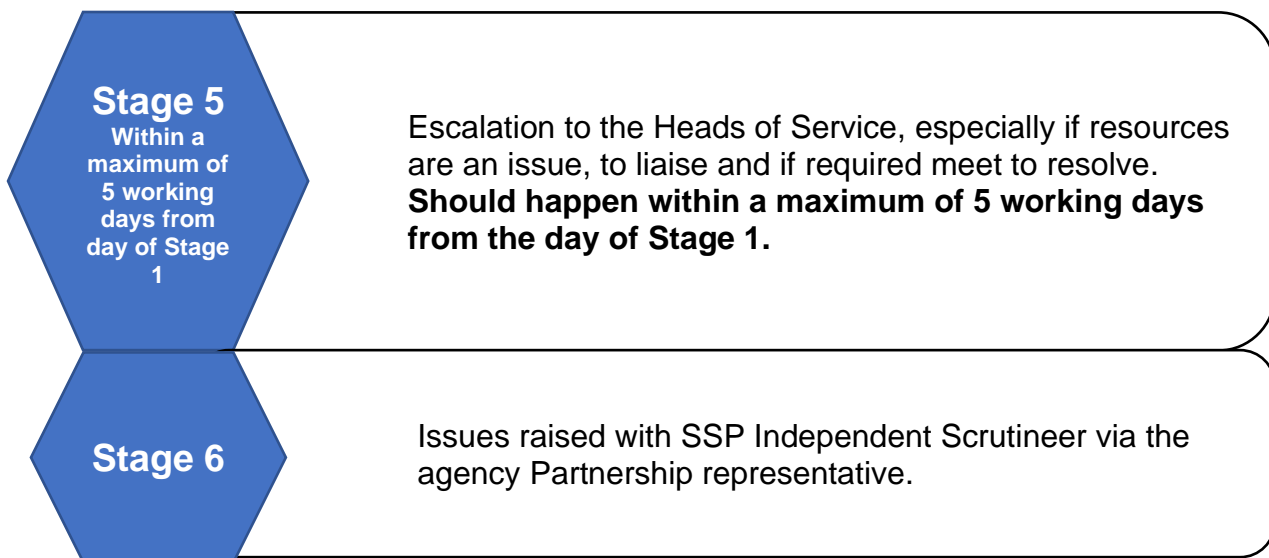
Practical measures should be taken to ensure that escalation occurs through the following stages, unless the situation is **so serious that it** requires urgent protective action.

These stages are not fixed and should be viewed flexibly. They do not need to be followed sequentially in every situation. You could go straight to the final stage or miss out a few stages, so the staged process is a guideline not a requirement.

If concerns remain and issues are not resolved at Stages 1 and 2, the Escalation Record Form in Appendix 1 should be completed by Stage 3 of the Resolution Process outlined below.

### STAGED RESOLUTION PROCESS





### **Stage 1:**

Relevant professionals meet and discuss with the aim of reaching a shared understanding and agree necessary action. This meeting should be held as soon as possible to ensure the issues are resolved without delay.

**Concerns should be discussed either by phone, email or in a meeting within maximum 3 working days from the day the concerns were raised.**

### **Stage 2:**

If agreement cannot be reached and someone still has concerns that a child or adult remains at risk of significant harm or that a policy decision or strategy is seriously unsound, they should discuss this with their manager and/or named/designated safeguarding lead.

**This should happen at the earliest opportunity, preferably on the same day as the Stage 1 discussion or meeting and no longer than one working day later.**

### **Stage 3: Escalation of Concerns:**

- The manager/named or designated safeguarding lead for child or adult safeguarding should make sure that the professional raising the concern has cooperated with other professionals to ensure all the steps have been followed to resolve the concern.
- A clear record should be kept at all stages, by all parties once Stage 2 is reached.
- It is essential that where concerns are raised, both or all parties seek to identify the evidence base for the matter under scrutiny – the correct decision will nearly always be the one with the strongest evidence-base or rationale.
- The manager/named or designated safeguarding lead for child or adult safeguarding should liaise with the equivalent colleague in the other agency or agencies involved to resolve outstanding concerns.

**This should happen within the same timescale as Stage 2.**

## **Stage 4:**

In cases where significant concerns remain, especially if understanding and interpretation of risk is the relevant factor, the manager/named or designated safeguarding lead for child or adult protection should contact the Head of Safeguarding to discuss the concerns, and decide whether a case conference, review or round table meeting should be convened. If the matter remains unresolved, and especially if resources are a relevant factor, this should be escalated to an appropriate level of management within each agency to liaise and if necessary, to meet and resolve. Unless there is matter of profound principle or extraordinary cost at stake, conflicts will normally be resolved close to the point of dispute rather than at several tiers or levels removed.

**This should happen no longer than three working days of Stage 3**

## **Stage 5:**

Where there is no resolution, having exhausted all other possibilities, the manager/ named or designated safeguarding lead for child protection should raise the matter with the Scrutineer of the Suffolk Safeguarding Partnership. This should be done via the agency representative for the Partnership.

- **All Stage 5 escalations should be done within a maximum 5 working days from the day of Stage 1.**
- **All Stage 5 Escalations should be responded to within maximum 2 working days.**

At each stage professionals must ensure that appropriate records are made in the child's and/or family's case records. This should include the action taken to escalate the concern, any agreed actions arising from this as well as timescales.

The Safeguarding Partnership Business Manager will maintain a tracker of the escalations and will incorporate an annual analysis of the incidents subject to this Escalation Policy within the Annual Report of the Partnership.

## **Disagreement with MASH Contact/Referral Outcome**

All referrers will receive feedback on their referral including when it doesn't meet the threshold for a CYP/ACS service. If referrers don't receive feedback or if they are unhappy with the outcome of the referral, they should e mail [cypmash@suffolk.gov.uk](mailto:cypmash@suffolk.gov.uk) If referrers remain unhappy with the response, use the e mail address above and mark it for the attention of the Practice Manager who will review it. Complaints should be sent to Suffolk County Council Customer Complaints. [Compliments and Complaints Page](#)

## **Disagreements at Child Protection Conferences**

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Child Protection Chairs will work to ensure a consensus is reached at Conference. When this isn't possible, Chairs should abide by the principles and standards outlined in this policy. The Chair should follow the staged process in the policy. However, the Conference Chair ultimately has the authority to override all views.

## Stop and Review Process

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Stop and Review is a process that can be put in place for any case that is stuck or where professionals want to reflect on the best way to effect change and review the outcomes for the child, family or adult. **This includes Adult Social Care, CiN, CiC, CP, Early Help cases.** It can also be used where there isn't agreement as to the best way forward. It can be used as a way to bring about agreement through reflection and consideration and should be used prior to putting in place the formal resolution process.

## Stop and Review Process in Relation to Child Protection Planning

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If a core group member or professional feels that the Child Protection Plan is not making progress or achieving sufficient change for the child/ren they may, in consultation with their manager, make a request to the Chair of the Conference for a 'Stop and Review' meeting. This meeting would bring together the practitioners involved with the family **along with their managers/safeguarding leads**, as well as the CYP Service Manager and Safeguarding Manager, to consider and reflect upon what interventions are being used, why they are not effective and importantly, what else may need to be in place to safeguard and promote meaningful change. If professional disagreements remain unresolved, the matter must be referred to the Heads of Service for each agency involved.

If the issue is not resolved by the steps described above and/or the discussions raise significant policy issues, it may be helpful to convene a Suffolk Safeguarding Partnership Learning and Improvement Group meeting which has the brief to consider policy and practice or serious cases.

**The same process can be used for all other areas of Social Care and Early Help e.g., CiN and CAF.**

## Whistleblowing or Raising Concerns at Work

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Whistleblowing is when someone who works in or for an organisation passes on information, which they reasonably believe shows wrongdoing or a cover-up by that organisation. For example, the information may be about activity that is illegal or that creates risks to the health and safety of others. The concern may relate to something that has happened, is happening or that a person may fear will happen in the future.

The law provides legal protection to workers who have been victimised at work or lost their job because they have 'blown the whistle'. The definition of 'worker' for whistleblowing purposes includes employees, temporary agency staff, home workers, trainees on vocational schemes, and those whose employment has ceased. It doesn't cover the self-employed, volunteers or foster carers. While these groups are not covered by the legislation that protects whistleblowers, their concerns would be listened to seriously and raised with the appropriate person.

Workers need to refer to their own agency's/employer's whistle blowing policy and raise concerns with their line manager or Director. However, where workers feel that the concern is more serious or the line manager or Director has not addressed the concern or where they feel that the concern is a matter for the Safeguarding Partnership, they should follow the process outlined in the staged resolution process at Stage 5 and 6 raising the matter with the Independent Scrutineer of the Suffolk Safeguarding Partnership.

### **Further Information**

Whistleblowing Helpline: 08000 724 725

[www.pcaw.co.uk](http://www.pcaw.co.uk)

<https://www.citizensadvice.org.uk/health/nhs-and-social-care-complaints/whistleblowing-how-a-staff-member-can-report-a-problem-in-the-nhs-or-an-adult-social-care-service/>

## Appendix 1

## Suffolk Safeguarding Partnership Professional Difference Escalation Proforma

Child/Family/Adult's Name		D.O.B.
Address:		

Agency Initiating Escalation:						
Date of Initial Escalation:						
Stage of Escalation:	Stage 1	Stage 2	Stage 3	Stage 4	Stage 5	Stage 6

Nature of Professional Difference						
Referral Decision	Need for or Outcome of an Assessment	Implementation of Plan (e.g. agreed actions not followed through)	Effectiveness of Plan (e.g., drift/delay)	Information Sharing	Child Protection Case Conference Decision	Other (Please state)

**Details of the Professional Difference and Outcome Sought**



Outcome of Escalation		
Actions to be taken	By Whom	Completion Date

Additional Comments (including any learning identified)
<div></div>

Signature.....Date.....

Job Title/Role.....