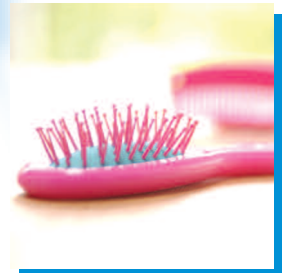


# Lancashire Early Years & Children's Centres

## Child Protection Policies & Procedures



## Introduction

It gives me great pleasure as the Independent Chair of Lancashire Safeguarding Children Board (LSCB) to introduce the revised Lancashire Early Years & Children's Centres Child Protection Policies & Procedures.

The Lancashire Early Years & Children's Centres Child Protection Policies & Procedures provide a clear link to the overarching Lancashire Safeguarding Children Board Safeguarding Procedures, which can be accessed via the LSCB web site.

Safeguarding in Lancashire is now a wider agenda, and does not solely focus on those children and young people in the traditional "Child Protection System".

LSCB recognises that safeguarding and promoting the welfare of children is a shared responsibility which requires effective joint working and partnership between all agencies, professionals, children and young people, parents and carers and the wider community.

The Safeguarding agenda and its deployment is a complex and challenging one, but the outcome we are aiming for remains simple: that children and young people are kept safe in our community.



Mr Nigel Burke  
Independent Chair  
Lancashire Safeguarding Children Board



## Contents

### Glossary of Terms

Throughout this policy the words '**early years settings**' are used to refer to any childcare facility including child minders

The term '**management board**' refers to any group that has the responsibility for the management and delivery of the childcare facility

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# Part 1

## Lancashire Children's Centres & Early Years Settings Child Protection Policy

### Introduction

This document sets out the roles and responsibilities of this Early Years setting staff and volunteers in relation to safeguarding and child protection. The policy and procedures must be read in conjunction with Lancashire Safeguarding Children Board's (LSCB) 'Safeguarding Children Procedures' (2009)<sup>1</sup>

Working Together to Safeguard Children (2006) defines **safeguarding and promoting the welfare of children** as follows:

- Protecting children from maltreatment
- Preventing impairment of children's health or development
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care.

and undertaking that role so as to enable those children to have optimum life chances and to enter adulthood successfully". (Working Together to Safeguard Children, 2006, para. 1.1 8). These aspects of safeguarding and promoting welfare are cumulative, and all contribute to the outcomes set out within the Every Child Matters agenda<sup>2</sup>. Working Together defines **child protection** and makes it clear that it "is part of safeguarding and promoting welfare. This refers to activity that is undertaken to protect specific children who are suffering, or are at risk of suffering, significant harm<sup>3</sup>. Effective child protection is essential as part of wider work to safeguard and promote the welfare of children. However, all agencies and individuals should aim proactively to safeguard and promote the welfare of children so that the need for action to protect children from harm is reduced." (WT, 2006, paras. 1.20- 1.2 1). The policy and procedures set out in this document should be followed by all staff and volunteers working throughout this Early Years setting<sup>4</sup>.

<sup>1</sup> The LSCB 'Safeguarding Children Procedures' are available on-line at [www.lancashire.gov.uk/safeguardingchildrenboard/](http://www.lancashire.gov.uk/safeguardingchildrenboard/). If any practitioner/Centre does not have access to the internet then the LSCB Procedures can be made available on disk via LSCB (01772 530283/530329). The Executive Summary of the Procedures is included here as Appendix 11

<sup>2</sup> Be healthy, Enjoy and Achieve, Achieve Economic Wellbeing, Make a positive contribution, Stay safe [www.everychildmatters.gov.uk](http://www.everychildmatters.gov.uk)

<sup>3</sup> See Appendix 5 for definitions of 'significant harm'

<sup>4</sup> Professionals and volunteers from other organisations or agencies (e.g. 'Health') will still need to adhere to this Policy and Procedure where they are based within a setting. However, they should also clarify allied arrangements insofar as supervision, referral and reporting mechanisms and procedures are concerned within their 'own' agency and ensure that these are also made clear to and agreed with the setting Manager.

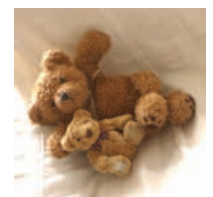
## Mission Statement

Children's safety and well-being is central to all the work undertaken by this Early Years setting. Staff and volunteers working within the setting will be given training and be encouraged to develop skills to enable them to respond appropriately to any situation where a child may be at risk of abuse or neglect.

This Early Years setting believes that the best place for the vast majority of children to reside and develop is with their families, in the community where they live. To this end, and in line with research and confirmed best practice, Early Years staff will work in partnership with parents insofar as that is possible and in the best interests of the child(ren). However, the safety and welfare of children will be this Early Years setting's paramount consideration at all times. We have a duty to protect children and will pass on any concerns to the appropriate agencies.

## Ethos, Underpinning Legislation and Guidance

1. There are two main aspects to safeguarding and promoting the welfare of children:
  - i) Taking all reasonable steps to ensure that risk of harm to children's welfare and safety are minimised; and ii) ensuring that there are arrangements in place to enable appropriate action to be taken in order to address concerns.
2. The policy and procedures set out in this document are based on the key principles laid down by 'Working Together to Safeguard Children: A Guide to inter agency working to safeguard and promote the welfare of children' (Dept. of Health, 2006) and Lancashire Safeguarding Children Board's 'Safeguarding Children Procedures' (2006).
3. Furthermore, in accordance with the United Nations Convention on the Rights of the Child, this Early Years setting believes that every child has the right to be loved and cared for and to be safe and well, to be offered a good standard of education, to be protected from exploitation and to have opportunities for rest and play (1991). Similarly, all children have the same rights and the same value, regardless of age, race, culture, gender, disability, or social/economic background.
4. The 1989 Children Act places a legal duty on the Local Authority to make enquiries if they have reasonable cause to suspect that a child in their area is suffering or is likely to suffer significant harm<sup>5</sup>, to enable them to decide whether to take any action in order to safeguard or promote the child's welfare.
5. The welfare of children is a corporate responsibility of the entire local authority, working in partnership with other public agencies, the voluntary sector, and service users and carers. There is a duty to co-operate with enquiries into whether or not a child is at risk of significant harm.



<sup>5</sup> See Appendix 5

## Early Years Foundation Stage Requirements

The Statutory Framework for the Early Years Foundation Stage (May 2008) sets out Welfare Requirements that all Early Years settings must meet.

- The first requirement, 'Safeguarding and promoting children's welfare' (page 22) <sup>6</sup>.
- The second requirement, 'Suitable people' (page 29) in the Statutory framework, includes legal requirements for settings to meet and guidance to which Early Years settings must have regard.

## Central Tenets: Undertakings and Acknowledgements

This policy and procedural document aims to provide a framework for use by this Early Years setting, including partnership, agency and seconded staff and volunteers, to guide and assist them in dealing with child protection issues. This policy:

- Seeks to clarify this Early Years setting position, role and responsibilities within Lancashire's multi agency child protection system and structure.
- Underlines the fact that it is not the responsibility of this Early Years setting to investigate concerns or allegations relating to child abuse or protection, which is the role of Children's Integrated Services and/or the Police [where a crime may have been committed]. The role of the setting in this context is to refer such concerns to Children's Integrated Services and/or Police.
- Acknowledges that effective safeguarding and child protection requires a co-ordinated approach. This Early Years setting and its partners will work together in implementing this Child Protection policy and procedures, in keeping with Lancashire Safeguarding Children Board's 'Safeguarding Children Procedures'<sup>7</sup>.
- Recognises that 'child abuse' is an emotive and disturbing subject. However, it is a reality and those whose work brings them into regular contact with children need information and practical guidance to ensure that they are able to recognise possible signs and symptoms of abuse and deal appropriately with their concerns<sup>8</sup>.
- The multi-disciplinary nature of this Early Years setting team means that there is a wide variation in terms of experience. However, everyone within the setting should have a basic level of awareness about how to protect children from harm, safeguard and promote their welfare.
- Acknowledges that work with families, and particularly in the context of child protection which entails making difficult professional judgements, can be distressing and stressful.
- Undertakes to ensure that all staff and volunteers within this Early Years setting will have access to advice and support, from their peers and line managers. Supervision will be used to promote good practice and to offer one to one support.
- Undertakes to ensure that, in conjunction with the Management Board and Lancashire LSCB, the training and developmental needs of the setting staff and volunteers are met in respect of safeguarding and child protection.
- The Nominated CP Officers will be responsible for inducting, identifying and meeting the developmental and training needs of all staff and volunteers. They will liaise closely to ensure the consistent implementation of policy, procedures and practice<sup>9</sup>.
- Makes clear that all staff and volunteers will have access to a copy of the Early Years Child Protection policy and procedures as part of their induction. This will be undertaken in consultation with the Nominated CP Officer.

<sup>6</sup> The Statutory Framework for the Early Years Foundation Stage, Welfare Requirements page 22 refers to 'What to do if you are worried a child is being abused-Summary' published by DCSF. A link is available on the EYFS CD-ROM; a copy can be found within the setting at .....

A copy of 'The Statutory Framework for the Early Years Foundation Stage' is available from; tel 0845 60 222 60 ref: 00267-2008BKT-EN

<sup>7</sup> Refer to LSCB 'Safeguarding Children Procedures', Chapter 4 – 'Procedures for the Management of Individual Cases' for more detailed information.

<sup>8</sup> For further information about possible signs and symptoms of abuse, see Appendix 6 this document and Appendix H of the LSCB Procedures.

<sup>9</sup> Nominated CP Officer details overleaf–

## Nominated Child Protection Officers

The nominated Child Protection Officers for this Early Years setting are:

Names	Position
.....	.....
.....	.....
.....	.....

One of the Nominated Officers will always be available for support and guidance and should be the first point of contact for staff and volunteers within the setting who have concerns about a child's welfare. In any event, such information / concerns must be shared with the Nominated Officers within 24 hours<sup>10</sup>.

In the unlikely event that the Nominated Officer(s) within this Early Years setting is unavailable, the contact person is .....

### Reviewing this Document

These policy and procedures will be reviewed annually by Sure Start, Early Years & Childcare Service



<sup>10</sup> See Appendix 1 - Making a Referral



## Part 2

# Lancashire's Children's Centres & Early Years Settings Child Protection Procedures

### Introduction

Effective Child Protection requires a co-ordinated approach. The Early Years Child Protection Policy and Procedures are consistent with Lancashire Safeguarding Children Board's (LSCB) 'Safeguarding Children Procedures' (2006)<sup>11</sup>. Together they provide the procedures to be used by all Early Years setting staff and volunteers, including partnership agencies and seconded staff.

**All staff and volunteers** are expected to have an awareness of the LSCB 'Safeguarding Children Procedures' and a knowledge of how to access them. This needs to be understood alongside Early Years Child Protection policy and procedures.

### What you should and shouldn't do if you are concerned about the welfare or safety of a child who attends the Early Years setting

Staff or volunteers who are concerned about the safety or welfare of a child who attends the setting should **always**:

- Seek appropriate advice and support;
- Discuss concerns with one of the Nominated CP Officers; this should always occur within 24 hours. One of the Nominated CP Officers will always be available for advice, support and guidance and should therefore be the first point of contact for staff and volunteers within the setting who have concerns;
- Complete an internal referral form for all child protection concerns and pass this to the Nominated CP Officer<sup>12</sup>.
- The flowchart at Appendix 4 offers clear guidance in respect of the referral process; this must be followed.

Staff and Volunteers should **never**:

- Do nothing;
- Assume that another agency or professional will act or is acting;
- Fail to discuss their concerns with one of the Nominated CP Officers (within 24 hours);
- Attempt to resolve the matter themselves.<sup>13</sup>

<sup>11</sup> A copy of the Lancashire Safeguarding Children Board 'Safeguarding Children Procedures' is accessible via [www.lancashire.gov.uk/safeguardingchildrenboard](http://www.lancashire.gov.uk/safeguardingchildrenboard)

<sup>12</sup> See Appendix 9 - Internal Recording Form

<sup>13</sup> Appendix 7 - Dealing with disclosure

## Nominated CP Officer's Procedural Role

- The Nominated Officer will advise on the most appropriate next course of action and, as appropriate, may liaise or advise you to liaise with other agencies and professionals;
- The Nominated CP Officers will collate and maintain child protection records. All records should be clear, concise and accurate; they should differentiate between factual information and professional judgement. They should clearly indicate any decisions that have been taken; when, why, by and agreed with whom.
- Any Child Protection referral (<sup>14</sup>) which is completed and forwarded to Children's Integrated Services must be countersigned by a Nominated CP Officer;
- Childminders who do not have a nominated officer, are responsible for collating and maintaining Child Protection records, (see app 9 for internal recording form) and making referrals to Children's Integrated Services.

## Guidance on Out of Hours Working

The services offered by this Early Years setting do not take place solely within office hours, i.e. 9.00am-5.00pm, Monday to Friday. Activities, visits and groups take place in the evenings and at weekends. For this reason, guidelines are needed for workers who may have cause for concern about a child's welfare, when the normal statutory service provision is not available.

If any worker becomes aware of a child protection concern where immediate or risk of significant harm is suspected, they should contact the Children's Integrated Services Emergency Duty Team (EDT). The EDT operates evenings, weekends and bank holidays. The contact number is 0845 6021043. The decision on the most appropriate course of action rests with EDT **(0845 602 1043)**.

## Data Protection and Information Sharing

Personal information about children and families held by professionals and agencies is subject to a legal duty of confidentiality and should not normally be disclosed without the consent of the family. However, the right to confidentiality and respect for private and family life (Article 8, Human Rights Act, 1998) is not absolute.

Professionals should be clear that they have a professional duty to share information with appropriate agencies and professionals wherever they believe that a child is suffering or likely to suffer significant harm. However, due regard must always be given to the relevant legislation which relates to maintaining records and sharing information<sup>15</sup>.

Simplistically, and minimally, under circumstances where possible information sharing dilemmas arise, the following points will always need to be considered prior to sharing confidential/sensitive personal information without consent<sup>16</sup>:

- The facts must be assessed in each individual case
- The likelihood and evidence of [likely] significant harm
- Is sharing in the best interests of the child/is there an overriding public interest?
- Should consent be sought? If not, why not?
- How much information needs to be shared in order to achieve the intended objective?
- Does the intended recipient 'need to know'? i.e. do they have a 'proper interest' to receive this information?
- Is there a pressing need to disclose? Why?<sup>17</sup>

<sup>14</sup> A CP referral is made using a CAF form clearly indicating that this is a section 47 C.P. referral. The CAF form can be found at [www.lancashire.gov.uk/every\\_child\\_matters](http://www.lancashire.gov.uk/every_child_matters)

<sup>15</sup> 'What to do if you're worried a child is being abused - Summary' (Dept. of Health, 2003) provides detailed guidance on data protection and information sharing.

<sup>16</sup> See Information sharing guidance for managers and practitioners 2008 DCSF [www.everychildmatters.gov.uk/informationsharing](http://www.everychildmatters.gov.uk/informationsharing)

<sup>17</sup> See also Appendix 1 of the LSCB Procedures for more guidance around information sharing.

## Child Protection Referrals and Informing Parents of the Intention to Refer

The consent of a parent/carer is not required in order to make a child protection referral. However, under most circumstances, parents should be informed that one is to be made. The reasons for not informing parents are:

- I. because to do so may increase the risk of significant harm (e.g. suspected Fabricated or Induced Illness),
- II. may impede an investigation (e.g. suspected sexual abuse within the family),
- III. because this would cause undue delay which would not be in a child's best interests.

Where it is strongly believed that a staff member or volunteer's safety would be jeopardized by informing parents of the intention to refer, or for them to know the identity of the referrer, this should be made clear to Children's Integrated Services during the initial telephone discussion/referral and reiterated via the CAF form (which should follow within 48 hours).

## Allegations against Staff, Volunteers or Board Members

The vast majority of adults who work with children act professionally and seek to provide a safe and supportive environment which secures the wellbeing and best outcomes for children, young people and their families; it is recognised that the achievement of these outcomes is not always straightforward<sup>18</sup>.

Working Together to Safeguard Children (2006, Appendix 5) and the 'LSCB Safeguarding Children Procedures' (Appendix R) provide detailed guidance on the procedure for handling allegations against people who work with children. It is important that everyone who works with children understands that the framework for managing cases set out in this guidance applies to a wider range of allegations than those in which there is reasonable cause to suspect a child is suffering, or is likely to suffer, significant harm<sup>19</sup>.

It also addresses cases of allegations that might indicate that an adult maybe unsuitable to continue to work with children in their present position, or in any capacity. It should be used in respect of all cases in which it is alleged that a person who works with children has:

- behaved in a way that has harmed a child, or may have harmed a child;
- possibly committed a criminal offence against or related to a child; or,
- behaved towards a child or children in a way that indicates s/he is unsuitable to work with children.

There may be up to 3 strands in the consideration of an allegation:

- a Police investigation of a possible criminal offence;
- enquiries and assessment by Children's Integrated Services about whether a child is in need of protection or in need of services;
- consideration by an employer of disciplinary action in respect of the individual.

<sup>18</sup> Generic 'Guidance on Safe Working Practices' is currently being developed by Government Office North West and will be made available on Sure Start, Early Years and Childcare Service website in due course

<sup>19</sup> i.e. 'inappropriate' behaviour might occur along a continuum and it may not necessarily be 'abusive' in child protection terms or constitute a criminal act.

## The Local Authority Designated Officer (LADO)

In line with Working Together to Safeguard Children (2006), the Lancashire Safeguarding Children Board (LSCB) and Local Authority have appointed a Local Authority Designated officer (LADO). The Lancashire LADO can be contacted on 01772 536694 or via email: Tim.booth@lancashire.gov.uk

The LADO's role extends across allegations within all agencies and organisations and includes:

- The management and oversight of individual cases.
- Providing advice and guidance to employers and voluntary organisations.
- Liaising with the Police and other agencies.
- Monitoring the progress of cases to ensure that they are dealt with as quickly as possible, consistent with a thorough and fair process

All allegations against staff will be referred to the member of staff's employer and, in line with Working Together to Safeguard Children (2006), Chapter 6 and Appendix 5, any allegation which meets the criteria on page 10 (of these procedures) must be referred to the Local Authority Designated Officer by the employer. The LADO will make an initial consideration about any further action that may need to be taken and advise on the appropriate next course.

It is recognized that some practitioners, such as child minders, operate in a more isolated context in the sense that they do not have line managers to steer, advise and support them under these very difficult circumstances. Nonetheless, child minders must also refer any allegation (as defined on previous page), about either their own or another adult's practice, to the LADO for initial consideration; appropriate advice and support can be provided via the Child minder Network Co-ordinator or from Sure Start Early Years and Childcare Service

The LADO's contact number is 01772 536694 (In the unlikely event that it is not possible to speak to the LADO, the CIS Safeguarding Unit can be contacted on 01772 532723).

Finally, it is also imperative that OfSTED are notified of any allegation made against an individual operating either alone or within a setting. Notifications should be made by contacting OfSTED 0845 6014772

Any 'internal' investigation or disciplinary process will be held in abeyance pending a decision from Children's Integrated Services and/or the Police regarding any [child protection and/or criminal] investigative action they may need to undertake and, where necessary, pending the outcome of any such investigations. A [professional's] strategy meeting may be convened under these circumstances, as per the LSCB Procedures, and the Manager should attend.

A decision to suspend will not be taken lightly; suspension under these circumstances is without prejudice and is not, in itself, a disciplinary sanction. Disciplinary processes will be clearly separated from child protection enquiries and criminal investigations

## Volunteers & Board Members

All allegations against volunteers/Board Members will be directly referred to the Manager of the setting, the Nominated CP Officer and Children's Integrated Services. The consultative and investigative processes outlined above will be followed. In respect of all allegations, an accurate written record/chronology must be maintained by the Manager, including the nature of the concern, time, date, reporting of it, any contemporaneous records, and any follow-up action points.

## Appendix 1: Making Referrals to Children's Integrated Services (Guidance for the Nominated Officer)

### How to Make A Child Protection/Section 47 Referral

Telephone call to the **Red Rose Hub Customer Service Centre** (0845 053 0000); your referral information will be collated and you will be told how to forward it to the relevant team manager for consideration / action.

- You still need to complete a CAF form and should forward this as soon as possible - certainly **within 48 hours clearly indicating this is a CP referral**
- You **do not require the consent** of a parent or child/young person to make a child protection referral
- A parent should, **under most circumstances, be informed** by the referrer that a child protection referral is to be made. The criteria for not informing parents are:
  - (a) Because this would increase the risk of significant harm to a child(ren); or
  - (b) Because, in the referrer's professional opinion, to do so might impede an investigation that may need to be undertaken; or
  - (c) Because there would be an undue delay caused by seeking consent which would not serve the child's best interests.

Fear of jeopardising a hard won relationship with parents because of a need to refer is not sufficient justification for not telling them that you need to refer. To the contrary, this lack of openness will do little to foster ongoing trust, particularly as the source of referrals will be disclosed to parents except in a very limited number of circumstances. If you feel that your own or another adult's immediate safety would be placed at risk by informing parents then you should seek advice and/or make this clear on the CAF form and in any telephone contact with Children's Integrated Services.

### CIS Responses to Referrals and Timescales

In response to a referral, CIS may decide to:

- Provide advice to the referrer and/or child/family;
- Refer on to another agency who can provide services;
- Convene a Strategy Meeting (within five working days);
- Provide support services under Section 17;
- Undertake an Initial Assessment (completed within seven working days);
- Convene an Initial Child Protection Conference (within 15 working days of a Strategy Meeting) (See [www.lancashire.gov.uk/safeguardingchildrenboard](http://www.lancashire.gov.uk/safeguardingchildrenboard) and go to Chapter 5 of the Safeguarding Children Procedures)
- Undertake a Core Assessment (completed within 35 working days);
- Accommodate the child under Section 20 (with parental consent);
- Make an application to court for an Order;
- Take no further action.

### Feedback from Children's Integrated Social Care

CIS have 24 hours within which to make a decision about a course of action in response to a referral. If you do not receive any (same day) verbal feedback following an urgent child protection referral, and where this places the Early Years setting / a child(ren) in a vulnerable position, you should ask to speak to a Duty Social Worker via The Red Rose Hub Customer Service Centre (0845 053 0000);

## Appendix 2: Section 17 referrals

### Child In Need/Section 17 Referrals

Is this a Child In Need?

Under section 17 (s.17(10)) of the Children Act 1989, a child is in need if:

- (i) He is unlikely to achieve or maintain, or to have the opportunity to achieve or maintain, a reasonable standard of health or development, without the provision of services by a local authority;
- (ii) His health or development is likely to be impaired, or further impaired, without the provision of such services;
- (iii) He is disabled.

- As this is a request for assessment/support/services from CIS you **must obtain the consent** of the parent(s) (and child/young person where appropriate), this should be identified on the CAF form,
- Where a parent/child/young person refuses to consent, you should make clear your ongoing plans and responsibilities in respect of support, monitoring etc, and the possibility of a child protection referral at some point in future if things deteriorate or do not improve. (This is not about threats or saying that this is inevitable but about openness and transparency in dealings with parents).

## Appendix 3: CAF Process, Lead Professional and TAC meetings and Lancashire Continuum of Need.

The Common Assessment Framework is a shared assessment tool for use across all children's services in England. It helps the early identification of additional needs of children and young people and promotes a co-ordinated approach on how those needs should be met.

CAF process has been designed to help practitioners assess needs and then work with families, alongside other practitioners and agencies, to meet them.

For detailed guidance, access to training and copies of documentation in respect of the Common Assessment Framework (CAF) process, please go to [www.lancashire.gov.uk/education/every\\_child\\_matters](http://www.lancashire.gov.uk/education/every_child_matters)

### If you feel that a CAF is needed:

- Check to see if a CAF has already been completed by someone else/exists in respect of this child: [caf@lancashire.gov.uk](mailto:caf@lancashire.gov.uk)
- If there **is** a CAF in place already, contact the lead professional and inform them that you are working with the family. You should then be invited to further Team Around the Child (TAC) meetings.
- If a CAF is **not** in place complete CAF assessment with parents and/or child/young person and ensure you get their consent.

### Upon completion of a CAF Assessment

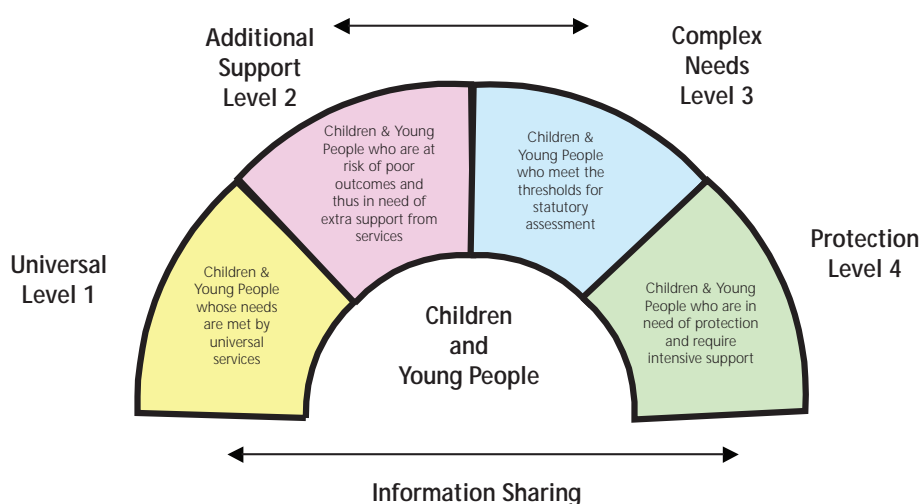
- If the *need for a single agency response* has been identified then keep a copy of the CAF on the child's record and send (i) a copy/the referral to the agency identified within the CAF as the one with the ability to meet the needs identified; and (ii) notify the CAF team via e-mail [caf@lancashire.gov.uk](mailto:caf@lancashire.gov.uk)
- If there is a *need for a multi agency response*, keep a copy of the CAF on the child's file, send a copy to the CAF team and then send a copy of the CAF to every agency that you are inviting to the Team Around the Child (TAC) meeting (along with a letter detailing the date, time and venue of the meeting).

### Team Around the Child (TAC) Meetings

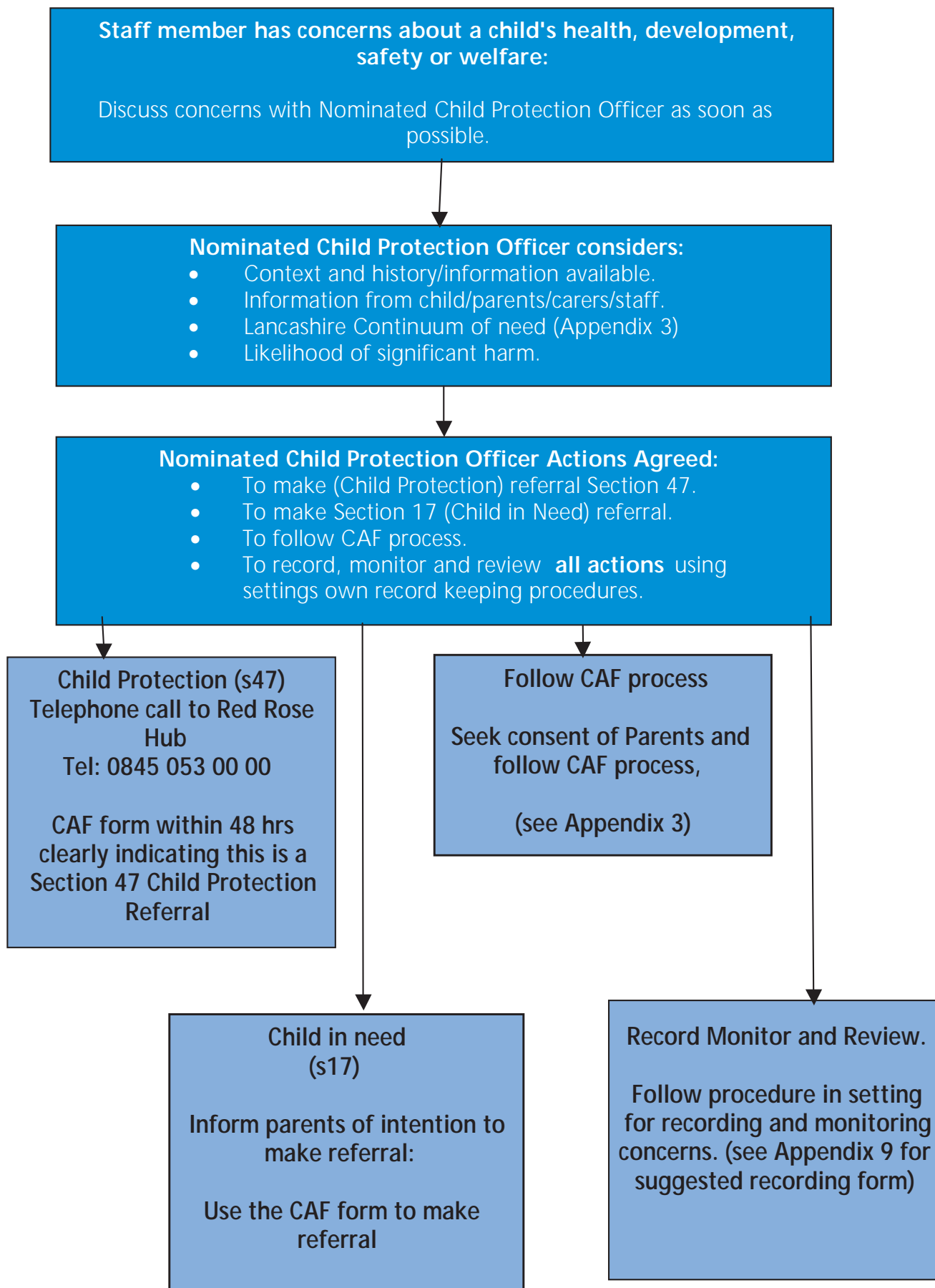
- The parents and child need to be invited to TAC meetings, as do any agencies that may already be working with the family.
- An integral part of the initial TAC meeting will be to identify who is best placed to act as Lead Professional. This does not have to be the person that completed the CAF but it may be. The TAC plan will be drawn up identifying and agreeing actions.
- The Lead Professional is to be a single point of contact for the child/young person and/or family, also ensuring that frontline services are co-ordinated to more effectively ensure outcomes are achieved.
- A TAC meeting would then be held regularly to review the Team Around the Child plan and CAF team informed of updates.

### Lancashire Continuum of Need

The Lancashire Continuum of need has been developed to assist all practitioners in identifying levels of children's needs and appropriate interventions at those levels. See [www.lancashire.gov.uk/education/every\\_childmatters](http://www.lancashire.gov.uk/education/every_childmatters) for further details



## Appendix 4: Procedural Flowchart





## Appendix 5: Significant Harm and Risk Assessment Checklist

There are no absolute criteria upon which to rely when judging what constitutes significant harm; sometimes a single traumatic event may constitute significant harm. More often, however, significant harm is a compilation of significant events, both acute and long-standing, which interrupt, change or damage a child's physical and psychological development.

### (a) Children Act Guidance and Definitions

Within the Children Act 1989, the following guidance is offered:

Significance is not defined within the Children Act although it is to be 'measured' in terms of:

- a child's health and development; and
- that which could reasonably be expected of a similar child.
- **'Harm'** means ill treatment or the impairment of health or development;
- **'Development'** means physical, intellectual, social, emotional or behavioural development;
- **'Health'** means physical or mental health; and
- **'Ill treatment'** includes sexual abuse and forms of treatment that are not physical, including for example, impairment suffered from seeing or hearing the ill treatment of another.

### (b) To begin with, in order to understand and establish significant harm, it is necessary to consider:

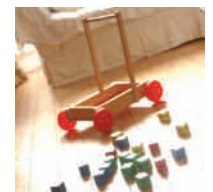
- The child's development within the context of their family and wider social environment;
- Any special needs and how they impact at all levels (child and family);
- The nature of any harm and its likely impact upon the child's health and development;
- The adequacy of parental care.

### (c) More specifically, how does the following contextual information shape your professional judgement about this situation?

- Age of child (developmental stage/needs, vulnerability, abilities)?
- The 'act(s)' described or referred to – what is being described? Possible criminal act/investigation required? (10 is the age of criminal responsibility – e.g. if the concern relates to the actions of one child against another)
- Severity of ill-treatment?
- Degree and extent of physical harm?
- Duration and frequency?
- Extent and degree of premeditation?
- Degree of threat or coercion?
- Immediate risk?
- Nature of risk and evidence of risk – when and how is the child at risk?
- Impact upon the child's health and development?
- What am I being asked to do and what am I required to do in response to this information?

## (d) Risk Assessment 'Checklist'

- Does/could the suspected harm meet the LSCB definitions of abuse?
- Are there cultural, linguistic or disability issues?
- Am I wrongly attributing something to impairment?
- Does the chronology indicate any possible patterns which could/do impact upon the level of risk?
- Are any injuries or incidents acute, cumulative, episodic?
- Did any injuries result from spontaneous action, neglect, or intent?
- Explanations consistent with injuries/behaviour?
- Severity and duration of any harm?
- Effects upon the child's health/development?
- Immediate/longer term effects?
- Likelihood of recurrence?
- Child's reaction?
- Child's perception of the harm?
- Child's needs, wishes and feelings?
- Parent's/carer's attitudes/response to concerns?
- How willing are they to cooperate?
- What does the child mean to the family?
- What role does the child play?
- Possible effects of intervention?
- Protective factors and strengths of/for child (i.e. resilience/ vulnerability);
- Familial strengths and weaknesses?
- Possibilities?
- Probabilities?
- When and how is the child at risk?
- How imminent is any likely risk?
- How grave are the possible consequences?
- How safe is this child?
- What are the risk assessment options?
- What are the risk management options?
- What is the interim plan?



## Appendix 6: About Possible Signs and Symptoms of Abuse ( including Fabricated or Induced Illness Flowchart)

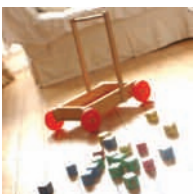
When making difficult judgements around possible signs and symptoms of abuse and neglect it is crucial that we consider the available information and presenting injuries or behaviours **in context**. (We should also consider sources of other information which may be important but to which we do not have immediate access). **It will be Nominated CP Officers who offer support and advice about referrals, speaking to parents and what, if any, action is to be taken in respect of concerns.**

Lists of possible signs and symptoms of abuse must never be considered to be comprehensive or definitive 'checklists' as children may behave strangely or appear unhappy or distressed for a number of reasons as they move through the stages of development, and as their family circumstances and experiences change. Neither does the presence of one or more of any of the commonly cited possible signs and symptoms 'prove' that a child has been or is being abused. (We need to be absolutely clear that our role is not to investigate or prove abuse but to observe, gather and share information where we have concerns).

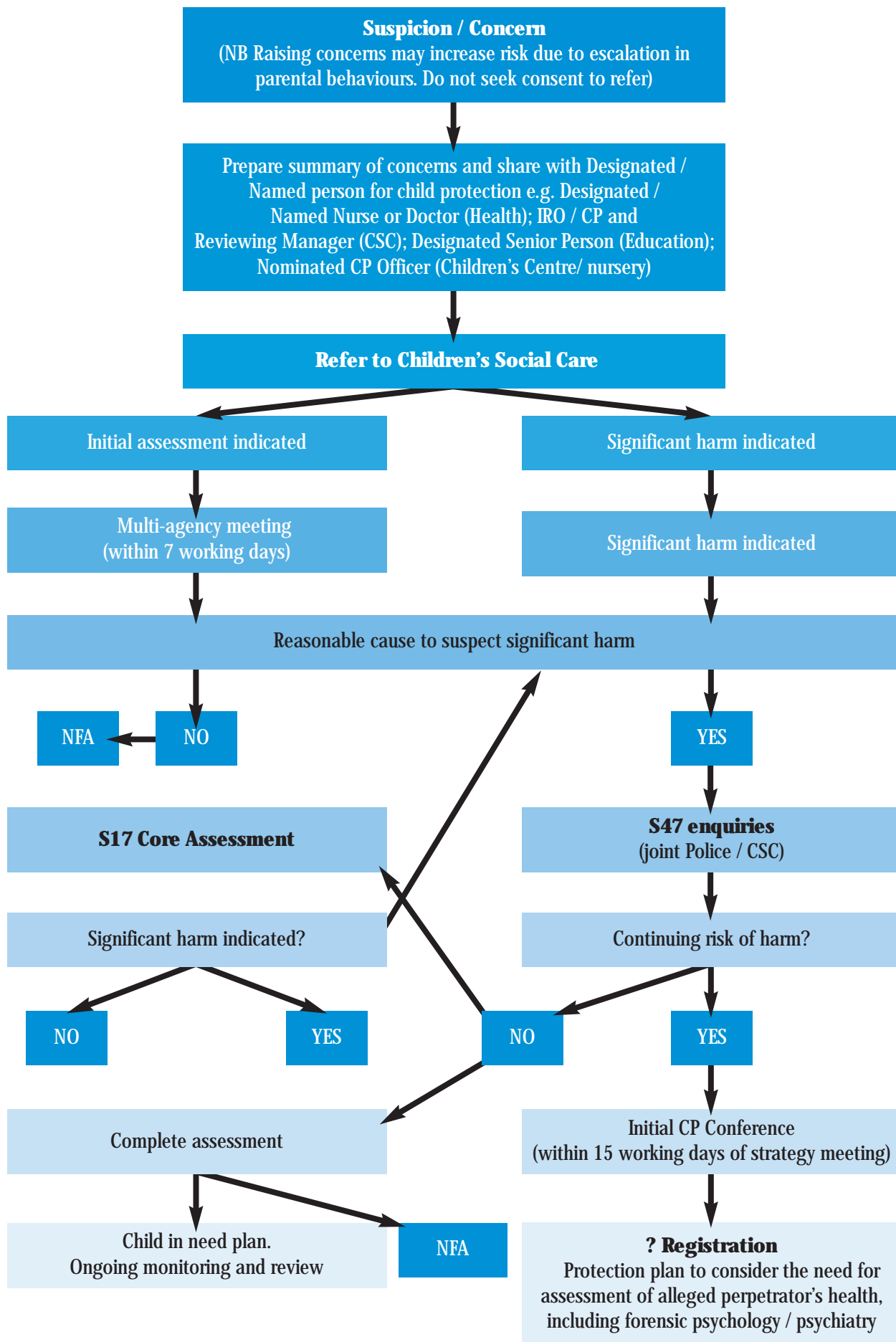
Professionals should also remember that all children, regardless of age, sex, ethnicity, disability, race or culture, are entitled to the same level of protection and, as such, racial, cultural, religious or similar factors can never be used to 'explain' or justify abuse or maltreatment.

Very detailed information about possible signs and symptoms of the four categories of abuse is contained within the Lancashire Safeguarding Children Procedures ( [www.lancashire.gov.uk/safeguardingchildrenboard/](http://www.lancashire.gov.uk/safeguardingchildrenboard/); Appendix R, pp.1-8). The flowchart for dealing with suspected fabricated or induced illness from those Procedures is included here on the next page.

Supplementary Guidance to Working Together 2006 on Fabricated or Induced Illness can be found under 'Safeguarding Children in whom illness is Fabricated or induced' [www.ecm.gov.uk/safeguarding](http://www.ecm.gov.uk/safeguarding)



## FABRICATED OR INDUCED ILLNESS – FLOWCHART



## Appendix 7: Talking & Listening to Children & Dealing with Disclosures

### If a child wants to confide in you, you SHOULD

- Be accessible and receptive;
- Listen carefully and uncritically, at the child's pace;
- Take what is said seriously;
- Reassure children that they are right to tell;
- Tell the child that you must pass this information on;
- Make sure that the child is ok;
- Make a careful record of what was said (see Recording).

### You should NEVER

- Investigate or seek to prove or disprove possible abuse;
- Make promises about confidentiality or keeping 'secrets' to children;
- Assume that someone else will take the necessary action;
- Jump to conclusions, be dismissive or react with shock, anger, horror etc;
- Speculate or accuse anybody;
- Investigate, suggest or probe for information;
- Confront another person (adult or child) allegedly involved;
- Offer opinions about what is being said or the persons allegedly involved;
- Forget to record what you have been told;
- Fail to pass this information on to the correct person

### Children with communication difficulties, or who use alternative/augmentative communication systems

- While extra care may be needed to ensure that signs of abuse and neglect are interpreted correctly, any suspicions should be reported in exactly the same manner as for other children;
- Opinion and interpretation will be crucial (be prepared to be asked about the basis for it and to possibly have its validity questioned if the matter goes to court).

### Recordings should

- Be made as soon as possible after the disclosure;
- State who was present, time, date and place;
- Be legible (if handwritten), written in ink and be signed by the recorder;
- Be passed to the appropriate person immediately (certainly within 24 hours);
- Use the child's words wherever possible;
- Be factual/state exactly what was said;
- Differentiate clearly between fact, opinion, interpretation, observation and/or allegation.

### What information do you need to obtain?

- You have **no investigative role** in child protection (Police and Children's Integrated Services will investigate possible abuse very thoroughly and in great detail, they will gather evidence and test hypotheses – leave this to them!);
- Never prompt or probe for information, your job is to listen, record and pass on;
- Ideally, you should be clear about what is being said in terms of **who, what, where and when**;
- The question which you should be able to answer at the end of the listening process is 'might this be a child protection matter?';

- If the answer is yes, or if you're not sure, record and pass on immediately to the Nominated CP Officer/your line manager.

#### **If you do need to ask questions, what is and isn't OK?**

- **Never** ask closed questions i.e. ones which children can answer yes or no to (e.g. Did he touch you?)
- **Never** make suggestions about who, how or where someone is alleged to have touched, hit etc (e.g. Top or bottom, front or back?)
- If we must, use only '**minimal prompts**' such as 'go on ... tell me more about that' ... 'tell me everything that you remember about that' .....
- Timescales are very important: '**When was the last time this happened?**' is an important question.

#### **What else should we think about in relation to disclosure?**

- We need to think carefully about our own body language – how we present will dictate how comfortable a child feels in telling us about something which may be extremely frightening, difficult and personal;
- Be prepared to answer the 'what happens next' question;
- We should never make face-value judgements or assumptions about individual children. For example, we 'know that [child ] tells lies';
- Think about how you might react if a child DID approach you. We need to be prepared to offer a child in this position exactly what they need in terms of protection, reassurance, calmness and objectivity;
- What support could you access under these circumstances?

## Appendix 8: Children Integrated Services and Useful Contact Numbers

### North Lancashire

155 Greenbank Street  
Preston  
PR1 7JS

### East Lancashire

Chaddesley House  
Manchester Road  
Burnley  
BB11 1HW

### Wyre and Fylde

29 Station Road  
Kirkham  
PR4 2HB

2a Market Place  
Colne  
BB8 0HY

### Morecambe North

Unit 6  
Northgate  
White Lund Industrial Estate  
Morecambe  
LA3 3PA

44 Union Street  
Accrington  
BB5 1PL

### Lancaster

Initial Assessment Team  
South Road  
Lancaster  
LA1 4XQ

### West Lancashire

Library Buildings  
Southway  
Skelmersdale  
WN8 6NL

### South Lancashire

Brindle Road  
Bamber Bridge  
Preston  
PR5 6UQ

### The Red Rose Hub CIS

Emergency Duty Team (Out of Hours)

Police

OFSTED

0845 053 0000

(0845) 6021043

01772 203203

(0845) 6014772

Childminders can also contact your network Co-ordinator, who can support you. Or contact your local Children's centre for support. Details of all Children's centres can be found at

[www.lancashire.gov.uk/education/childcare](http://www.lancashire.gov.uk/education/childcare) or on

0800 195 0137

## Appendix 9: Internal CP Recording Form Guidance Notes

This form is intended to be used as an internal record for Early Years settings, it is a proforma for all Early Years settings

It is a way of informing managers (CP nominated officers) that practitioners have concerns about a child. The form enables the practitioners to be clear about their reason for highlighting their concerns; it requests a clear and concise account of concerns and directs practitioners to state times and dates of any incidents.

After initially speaking with the nominated child protection officer within 24hrs of concerns regarding a child ( Appendix 1: Handling Concerns and Making CP Referrals) where a decision was made that the child was not in immediate danger, but there was cause for concern, the internal record could form a basis for following up these concerns with the parent whilst seeking their consent for further support, identified within the centre or from partner organisations.

It is good practice to discuss with parents concerns about a child, this, although difficult for practitioners can often begin the process for supporting the family to address any issue.

It is good practice for parents to sign the form to ensure they are clear about any suggestions that have been made and agree with the record of the conversation.

The form once complete should be kept in a confidential family file and any record of a referral to another organisation, or referral within the Early Years setting must be recorded.





Parent informed of concerns:                  Yes            No

Parents signature: .....

If no, why not: .....

.....

.....

If parents informed, their response to concerns: .....

.....

.....

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.....

.....

Parent's Signature: ..... Print name: .....

Staff Signature: ..... Date: .....

**Action/outcome of initial record**

Referral made to:

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Notification to: .....



## Appendix 10: Useful Links

Lancashire Safeguarding Children Board

[www.lancashire.gov.uk/safeguardingchildrenboard/](http://www.lancashire.gov.uk/safeguardingchildrenboard/)

Sure Start, Early Years and Childcare Service

<http://www.lancashire.gov.uk/education/childcare>

O F ST ED

<http://www.ofsted.gov.uk>

Link to Early Years Effective Practice/ keeping safe

[http://www.standards.dfes.gov.uk/eyfs/resources/downloads/1\\_3\\_ep.pdf](http://www.standards.dfes.gov.uk/eyfs/resources/downloads/1_3_ep.pdf)

Every Child Matters

[www.everychildmatters.gov.uk](http://www.everychildmatters.gov.uk)

Children Act 2004

<http://www.opsi.gov.uk/acts/acts2004/20040031.htm>

'What to do if You're Worried a Child is Being Abused'

<http://www.everychildmatters.gov.uk/resources-and-practice/IG00182/>

Common assessment Framework (CAF)

[www.lancashire.gov.uk/education/every\\_child\\_matters](http://www.lancashire.gov.uk/education/every_child_matters)

Parental Substance Misuse and Domestic Violence

[www.dcsf.gov.uk](http://www.dcsf.gov.uk)

Improving safeguarding practice: Study of Serious Case Reviews 2001-2003 (DCSF 2008)

[www.dcsf.gov.uk/research](http://www.dcsf.gov.uk/research)

Early Years Foundation Stage

[www.standards.dcsf.uk/eyfs](http://www.standards.dcsf.uk/eyfs)

## Appendix 11: Lancashire Safeguarding Children Procedures (2009)

### EXECUTIVE SUMMARY

#### Introduction

Following the publication of "Working Together to Safeguard Children" (2006), Lancashire's Multi-Agency Policy, Guidance and Procedures, in respect of children in need of protection have been updated and are now superseded by the "Lancashire Safeguarding Children Procedures" (2006).

The Executive Summary highlights the key changes introduced, but where there are concerns about the welfare of a child, reference should be made to the procedures themselves. They have been made available electronically to promote wider access, and to facilitate updates when required. Wherever possible within the electronic document, links have been made to any additional guidance referred to.

### Key Developments

#### Chapter 1: Introduction

Chapter 1 outlines the principles underpinning work with children and families. It also includes key definitions and concepts used (see also Appendix A LSCB procedures). There is an emphasis on the wider responsibilities of agencies to **safeguard and promote the welfare of children**, which, if effective, should reduce the need for action to protect children from harm. Effective measures to safeguard children should not be seen in isolation from the wider range of support and services which may be required to meet the needs of children and families.

The definitions of **emotional abuse and neglect have been extended**. Emotional abuse now includes "seeing or hearing the ill-treatment of another". This recognises the long-term damage to children as a result of witnessing domestic violence. The definition of neglect is widened to include "neglect during pregnancy as a result of maternal substance misuse".

#### Chapter 2: Roles and Responsibilities of Agencies

Safeguarding and promoting the welfare of children is a shared responsibility which requires effective joint working and partnerships between all agencies, professionals, children and young people, parents and carers and the wider community. Chapter 2 sets out the requirements for all organisations who provide services for, or who work with children in meeting their safeguarding responsibilities. The roles, responsibilities and duties of specific agencies are briefly outlined. (For more detailed descriptions, reference should be made to "Working Together to Safeguard Children").

#### Chapter 3: Local Safeguarding Children Board

Chapter 3 explains the role, functions, governance and operation of the Lancashire Safeguarding Children Board (LSCB), which replaced the Lancashire Area Child Protection Committee in April 2006. Significant changes include:

- The Children Act 2004 places the LSCB on a statutory footing.
- The Board will hold agencies to account in fulfilling their statutory obligations in relation to safeguarding and promoting the welfare of children. This will be achieved by a peer review process based on self evaluation, performance indicators and joint audit.
- The membership of the LSCB has been widened to reflect its wider safeguarding responsibilities.
- The LSCB will be assisted in achieving its objectives by four Locality Safeguarding Children Groups.
- A Child Death Overview Panel was established in 2008 to review all child deaths.

#### Chapter 4: Procedures for the Management of Individual Cases

Chapter 4 provides guidance on what should happen if anyone has concerns about the welfare of a child, and in particular concerns that a child may be suffering, or may be at risk of suffering, significant harm. Whilst the processes and timescales for action remain the same, the following should be noted:

- The four key processes which underpin all work with children and families (assessment, planning, intervention and review, as set out in the Integrated Children's System) apply equally to work to safeguard and promote the welfare of children. A series of flowcharts at the end of Chapter 4 provide an easy to follow guide of the processes (and timescales) for action from the point of referral to the child protection conference, and review.

- When making a referral to Children's Integrated Services, if the referrer has not received an acknowledgement within **three working days**, they should contact the Directorate again.
- The guidance relating to information sharing has not changed, although a link is available to the DfES guidance "Information Sharing: Practitioner's Guide".
- Where there are concerns that a child may be at risk of significant harm, the overriding objective must be to safeguard the interests of the child.
- Whenever Children's Integrated Services has a case referred to them which constitutes, or may constitute, a criminal offence against a child, they should always discuss the case with the Police at the earliest opportunity. Similarly, when other agencies, or the Local Authority in its other roles, believe this to be the case, they must always consider sharing the information with Children's Integrated Services or the Police in order to protect the child or other children from the risk of significant harm. If a decision is taken not to share information, the reasons must be clearly recorded.
- Where there are child protection concerns, the social worker should always record this as an expression of concern on ISSIS (the child's case record). If **two** expressions of concern are logged within a **12-month period**, the Children's Integrated Services Team Leader should undertake an initial assessment to determine if the child is a child in need.
- Where a strategy discussion is held (either by telephone or a meeting), the information shared, all decisions reached and the basis for those decisions should be clearly recorded and circulated by the chairperson **within one working day** to all parties to the discussion, using the ICS Record of Strategy Discussion.
- Parents and children of sufficient age and understanding (together with professionals and agencies significantly involved) should receive a copy of the Outcome of S47 Enquiries Record, in particular, in advance of any initial child protection conference that is convened.
- Any decision not to proceed to a child protection conference where it is known that a child has suffered significant harm must be taken in consultation with all the agencies involved. The Children's Integrated Services Team Leader must discuss the outcome with the Independent Reviewing Officer before taking and recording a decision not to proceed to a child protection conference. Where there are differences of opinion, the final decision rests with the Children's Integrated Services Area Manager.
- Those professionals and agencies most involved with the child and family and those who have taken part in enquiries have the right to request that Children's Integrated Services convene a child protection conference if they have serious concerns that a child may not otherwise be adequately safeguarded. Any such request which is supported by a senior manager or a named/designated professional will normally be agreed.
- If consideration is being given to the initiation of care proceedings, a child protection conference must be held, even if the child has been removed from the situation where the harm was incurred.
- The social worker and the line managers will ensure that all significant events that are potentially life-threatening are immediately notified, via the full line management route, to the Head of Children's Integrated Services. This should be done verbally in the first instance, and followed up in writing as soon as possible. Examples of occurrences which constitute a significant event are detailed at the end of Chapter 4.

## Chapter 5: The Child Protection Conference, Child Protection Plan

Chapter 5 outlines the circumstances for holding a child protection conference. The conference must consider all the children in the household, even if concerns are only being expressed about one child.

The following key points should be noted:

- Participation of children, parents, and carers should be encouraged. The child's voice should always be heard at the conference. This can be achieved in a variety of ways, and detailed guidance is given.
- It is important that children and parents/carers (where appropriate) have been given the opportunity to read the Social Worker's report in advance of the conference to allow them to digest the information and comment on the content. The report should therefore be completed **at least 24 hours** before the initial conference or **48 hours** before the review conference.
- Other professionals should also provide reports, in advance, that should be consistent with the domains and dimensions of the Assessment Framework.
- A copy of the Conference Decision Record detailing the decision of the conference, recommendations, Outline Child Protection Plan and core group membership will be sent to all attendees and core group members **within one working day** of the conference.
- The minutes should be sent to all those professionals who attended the conference, core group members and the medical consultant in charge of the case **within ten working days**.
- The role of the key worker is outlined, which includes seeing the child **at least every four weeks** to ascertain their wishes and feelings, and to ensure they are up to date with the child protection plan.
- Emphasis is placed on the child protection plan (as opposed to the act of registration) as the means to ensure the child is safe and protected from further suffering or harm. There is a register of children who are subject to a child protection plan.
- Enquiries regarding children subject to child protection plans can be made by authorised representatives of agencies (listed in Appendix W) who have concerns about the welfare of a child. The process and circumstances under which enquiries can be made are outlined. If **two enquiries** are made to the register **within a 12-month period**, the responsible team leader will undertake an initial assessment to determine if the child is a child in need.
- When a child subject to a CP plan moves or goes missing, the key worker should inform the Register Administrator, Team Leader and other professionals.
- As part of the independent reviewing officer's quality assurance role, a quality assurance checklist will be completed after every child protection conference.

## Chapter 6: Protecting children in Specific Circumstances

Chapter 6 outlines the circumstances of children who may be particularly vulnerable. The purpose is to help inform the procedures for the Management of Individual Cases (Chapter 4). The chapter is considerably more detailed than previously and includes reference to the following:

- Children being sexually exploited;
- Child abuse and information communication technology;
- Child victims of trafficking;
- Sexually active children and young people (incorporates the LSCB Protocol for working with sexually active young people under the age of 18);
- Fabricated or induced illness (detailed new guidance outlines the process from point of referral to the child protection conference);
- Investigating complex (organised or multiple abuse);
- Historical abuse;
- Female genital mutilation;
- Forced marriage (includes new flowchart);
- Allegations of abuse made against a person who works with children (this is supplemented by Appendix R which provides new guidance on the role of the Local Authority Designated Officer);
- Essential safeguards where children are living away from home;

- A private fostering arrangement (a link is available to the new Private Fostering Procedures);
- Children in custody;
- Children in hospital;
- Children cared for by day;
- Abuse of children with disabilities;
- Children and young people who abuse others (this section has been updated and should be read in conjunction with Chapter 7: Managing Individuals Who Pose a Risk of Harm to Children);
- Bullying;
- Children whose behaviour indicates a lack of parental control;
- Children who self harm;
- Future risk of harm to an unborn child;
- Sudden unexplained child deaths (more detailed guidance is to follow);
- Race and racism;
- Domestic violence;
- Parental mental ill-health (this section contains more detailed guidance in respect of multi-agency work and agency responsibilities consistent with "Working Together". Reference should also be made to Appendix T, the "Multi-Agency Adult Mental Health and Child Protection Guidance and Protocol");
- Parental substance misuse;
- Child abuse linked to spiritual and religious belief: "possession" or "witchcraft";
- Missing children and families (reference should also be made to Appendix U, the Joint Protocol, "Young People Missing from Care");
- Children and Families living in temporary accommodation;
- Children from abroad;
- Children whose parents are in the armed services.

### **Chapter 7: Managing Individuals who pose a Risk of Harm to Children**

The chapter provides practice guidance and information about a range of mechanisms that are available when managing people who have been identified as presenting a risk or potential risk of harm to children.

The Sexual Offences Act 2003 introduced a number of new offences to deal with those who abuse and exploit children in this way (listed within the chapter). The term "Schedule One offender" should no longer be used for anyone convicted of a crime against a child. The focus should be on whether the individual poses a "risk of harm to children".

The Multi Agency Public Protection Arrangements (MAPPA) provide a national framework for the assessment and management of risks posed by serious and violent offenders. The criteria and processes for managing risk are detailed in this chapter.

Other mechanisms for working with and monitoring people who may present a risk to children are also documented. For example, Offending Behaviour Programmes, Disqualification Orders, the Protection of Children Act, DfES List 99, the Sex Offender Register, Notification Orders, Sexual Offences Prevention Orders and Risk of Sexual Harm Orders.

### **Chapter 8: Local Agency Procedures**

This chapter should include links to the internal procedures of LSCB partner agencies, outlining the specific procedural requirements of each agency in relation to safeguarding and promoting the welfare of children. Currently, this consists of a section relating to Children's Integrated Services.



## Appendices

There are 23 appendices to the procedures, which include a range of materials to support practice, from a glossary of terms, to multi-agency protocols which have been endorsed by the Lancashire Safeguarding Children Board (or its predecessor, the Lancashire Area Child Protection Committee). The purpose is to pull together any additional guidance in relation to safeguarding so that it is accessible within one document. Electronic links to the appendices enable quick and easy reference to the materials.