Key Definitions and Concepts

1. Children

A child is anyone who has not reached their 18th Birthday and therefore includes the term 'young people'.

- 2. <u>Safeguarding and promoting the welfare</u>
- Protecting children from maltreatment
- Preventing impairment of children's health or development
- Ensuring 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.

3. <u>Child protection</u>

This is a part of safeguarding and promoting welfare and refers and is carried out to protect specific children who are suffering or who are at risk of suffering significant harm.

4. Child in need

S17 Children Act 1989 – Those children whose vulnerability is such that they are unlikely to reach or maintain a satisfactory level of health or development, or their health or development will be significantly impaired, without the provision of services and those children who are disabled. The critical factors to be taken into account in deciding whether a child is in need are

- What will happen to a child's health or development without services being provided
- The likely effect the services will have on the child's standard of health and development.

5. <u>Significant harm</u>

Introduced in the Children Act 1989 as the threshold that justifies intervention in family life in the best interests of children and gives Las a duty to make enquiries to decide whether they should take action to safeguard or promote the welfare of a child who is suffering or <u>likely</u> to suffer, <u>significant harm.</u>

NB: For the court to make a care order or supervision order the harm, or likelihood of harm, must be attributable to a lack of adequate parental care or control (s31 CA 1989)

• <u>Harm</u> – defined as *ill-treatment* or the impairment of *health* or *development* including impairment suffered from seeing or hearing the ill-treatment of another (s31(9) Children Act 1989 as amended by the Adoption and Children Act 2002). Also includes electronic seeing/hearing.

Ill-treatment – includes sexual abuse and forms of ill-treatment which are not physical

Health – means physical/mental health

Development – means physical/intellectual/emotional/social or behavioural development

When deciding if a child is suffering significant harm in relation to his health or development, his health or development should be compared to that which could be reasonably expected of a similar child.

- <u>Likely</u> means a real possibility that cannot sensibly be ignored
- <u>What constitutes significant harm?</u>

There are no absolute criteria on which to rely. Consideration should be given to:

- Degree and extent of the harm
- Duration and frequency of the abuse
- Extent of premeditation
- Presence or degree of threat, coercion, sadism and bizarre or unusual elements
- A single traumatic event may constitute significant harm

- Or a compilation of significant events, both acute and long standing may constitute significant harm
- Neglect some children live in families where the corrosiveness of long-term emotional, physical or sexual abuse causes impairment to the extent of constituting significant harm

To understand and identify significant harm the following factors should be considered

- The nature of the harm
- The impact on the child's health and development
- The child's development within the context of their family and the wider environment
- Any special needs such as a medical condition/disability
- The capacity of the parents to meet the child's needs adequately
- The wider and environmental family context

JD (FC) v East Berkshire Community Health NHS trust and Others (2005)

85. ... A doctor is obliged to act in the best interests of his patient. In these cases the child is his patient. The doctor is charged with the protection of the child, not with the protection of the parent. The best interests of a child and his parent normally march hand-in-hand. But when considering whether something does not feel 'quite right', a doctor must be able to act single-mindedly in the interests of the child. He ought not to have at the back of his mind an awareness that if his doubts about intentional injury or sexual abuse prove unfounded he may be exposed to claims by a distressed parent."

The child's wishes and feelings should be ascertained and taken account of according to the child's age and understanding.

It is therefore important that children are communicated with effectively. It is essential that any accounts of adverse experiences coming from children are as accurate and complete as possible – inaccurate accounts can lead to children remaining unsafe.