



Department  
for Education

# **Children in need census 2020 to 2021**

**Guide for local authorities – version 1.1**

**November 2019**

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## Legislation

The data in this census are collected under section 83 of the Children Act 1989.

## Contact details

Please contact the EDD, Data Collections Helpdesk for help and information using the [data collections service request form](#).

## Other children in need documents

Other documentation can be found on the [children in need website](#).

## Data protection and data sharing

Data from which it is possible to identify children and parents / carers (in any medium, including within a MIS) is personal data.

The General Data Protection Regulation (GDPR) and the Data Protection Act 2018 (DPA 2018) put in place certain safeguards regarding the use of personal data by organisations, including the department, local authorities and schools. Both give rights to those (known as data subjects) about whom data is processed, such as children, their parents / carers and staff. This includes (amongst other information that we are obliged to provide):

- the right to know the types of data being held
- why it is being held
- to whom it may be communicated

For the purposes of data protection legislation, the terms 'process', 'processed' or 'processing' apply to any activity involving the personal data, such as:

- collecting
- storing
- sharing
- destroying
- etcetera – please note: this list is not exhaustive

## Legal duties under the General Data Protection Regulation: privacy notices

Being transparent and providing accessible information to individuals about how you will use (process) their personal data is a key element of both the GDPR and the DPA 2018. The most common way to provide such information is through a privacy notice. Please see the Information Commissioner's Office (ICO) website for further guidance on privacy notices.

For local authorities, this means that you must provide clear and accessible privacy notices that inform children, parents / carers and staff:

- what data is collected about them
- for what purposes the data is collected

- how the data is used (processed)
- what the lawful basis is for processing
- for how long the data is retained
- with whom the data is shared
- why the data is shared
- whether we intend to transfer it to another country, and
- whether we do automated decision-making or profiling

The department provides suggested wording for privacy notices that local authorities may wish to use. However, where the suggested wording is used, the local authority must review and amend the wording to reflect local business needs and circumstances. This is especially important, as the local authority will process data that is not solely for use within departmental data collections. The privacy notice should also include this link to the gov.uk webpage, which provides information on how the department processes data.

It is recommended that the privacy notice is made available to data subjects via the internet as well as handed out in paper form or placed on an accessible noticeboard. Privacy notices do not need to be issued on an annual basis as long as new children and parents / carers are made aware of the notices and they are readily available electronically or in paper format.

## **Legal duties under the General Data Protection Regulation: data security**

Providers and local authorities have a (legal) duty under the General Data Protection Regulation (GDPR) and the Data Protection Act 2018 to ensure that any personal data they process is handled and stored securely. Further information on data security is available from the Information Commissioner's Office.

Where personal data is not properly safeguarded, it could compromise the safety of individuals and damage your reputation. Your responsibility as a data controller extends to those who have access to your data beyond your organisation where they are working on your behalf; for example, where external IT suppliers can remotely access your information. The 'Responsible for information' page provides further guidance and advice.

It is vital that all staff with access to personal data understand the importance of:

- protecting personal data



- being familiar with your security policy
- putting security procedures into practice

As such, you should provide appropriate initial and refresher training for your staff.

Where schools chose to use cloud software services, additional information on handling data securely within such environments is available within the department guidance on data protection for schools considering cloud software services.

## Version history

Version	Comments	Date
1.0	Baseline version	September 2019
1.1	Change to codes used for new factors identified at the end of assessment following feedback from software suppliers	November 2019

# 1. Introduction

## 1.1 Background

This is the eleventh collection of the revised children in need (CIN) census, collecting data over the full financial year, from 1 April to 31 March. The Children in need census 2020 to 2021 covers the financial year **1 April 2020 to 31 March 2021**.

Data will be submitted by local authorities to the Department for Education (DfE) between **1 April 2021 and 30 July 2021**.

If a local authority fails to submit its data by **30 July 2021**, it will not be included in the children in need figures published by the department, or may not be used by Ofsted as part of their inspection of local authority arrangements for the protection of children.

## 1.2 Scope

### **1.2.1 The children in need census 2020 to 2021 covers all children who are referred to children's social care services even if no further action is taken**

This includes children looked after (CLA), those supported in their families or independently (CSF/I), and children who are the subject of a child protection plan.

A child in need is defined under the Children Act 1989 as a child who is 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, or the child is disabled.

In these cases, assessments by a social worker are carried out under section 17 of the Children Act 1989. The purpose of an assessment is to gather information and evidence about a child's developmental needs and the parents' capacity to meet these needs within the context of the wider family and community. This information should be used to inform decisions about the help needed by the child.

The children in need census includes all vulnerable children, including: unborn children; babies; older children; young carers; disabled children; and those who are in secure settings. Please note whilst most children will be aged under 18, your return should include young people aged 18 or over who are still receiving care and accommodation or post-care support from children's services.

### **1.2.2 Children who were referred but with no further action**

Include all children who were referred to children's social care services even if no further action was taken. The information required is limited given that local authorities will not

have spent a lot of time responding to the referral regarding these children (see section 4.3).

### **1.2.3 Cases that were open between 1 April 2020 and 31 March 2021**

The census will include cases that were open before and during any part of the year between 1 April 2020 and 31 March 2021. A case may have been opened before 1 April 2020, but it must have been open at some point between 1 April 2020 and 31 March 2021 to be counted. The census will also include cases that are referred and assessed to be in need, and so become open, after 1 April 2020 (and before 31 March 2021).

Local authorities should maintain records of all cases of children in need that were open during the collection period. Open refers to children's cases where the local authority which assessed the child to be in need took some sort of action during the collection period or, as at 31 March 2021, was planning to take action sometime in the future. These are cases for which the local authority is committed to taking an initiative, irrespective of any new information that comes to light that the local authority will act upon.

Taking an initiative means any of the following:

- active case work (assessment, planning, intervention and review);
- making regular payments where the case remains open to children's social care services;
- where funding for on-going services such as respite care has been agreed;
- maintaining a child with care and accommodation;
- a commitment to review the case at a predetermined date;
- maintaining the child's name on a register that ensures the child and family received targeted information or other special consideration.

Such cases may include:

- young people aged 18 or over who are still receiving care and accommodation or post-care support (leaving care services) from children's social care services;
- unborn children if there are concerns about their safety or welfare.

Please do not include cases where a child is receiving a regular payment but there is no actual or expected further input from children's social care services such as reviews, assessments or receipt of other services.

The census should include all children who children's social care services assess to be in need and as a result incur financial costs, including:

- provision via adults social care service teams;

- nursery provision where this is paid for by children's social care services and not reimbursed from anywhere else;
- contracted out provision where the service is provided by an organisation funded by children's social care services. This means that local authorities will need to require contracted organisations to provide them with information regarding children who receive contracted out services.

#### **1.2.4 Children awaiting services, children who are the subject of statutory orders, and privately fostered children**

Local authorities should also include in their children in need return those children who are assessed as being children in need but who are waiting for a service. By definition, these are open cases.

Children who are the subject of statutory orders and living with their parents are open cases because a social worker should be visiting and statutory reviews must take place.

Children in need who are also privately fostered should be included. However, being privately fostered does not automatically mean the child is a child in need. To be included, the privately fostered child must have been assessed to be in need and requiring children's social care services in addition to receiving the required statutory visits because they are privately fostered. If a privately fostered child is only receiving the required statutory visits from children's social care services, then the child is not included in the children in need census.

#### **1.2.5 Disabled children**

Disabled children living with their parents and for whom it has been planned and agreed that they will have a series of short-term placements are open cases because funding has been agreed and the arrangement will need to be reviewed.

Only disabled children who have been assessed as requiring children's social care services should be included in the collection, not those disabled children who receive mail outs (for example newsletters) only. If the disability register is shared with other agencies or does not imply any activity on behalf of children's social care services, then these children's cases should not be included in the collection purely on the basis of their names being on the register. The key issue for the census is whether the presence of the child's name on the register triggers any activity by children's social care services.

#### **1.2.6 Children from another local authority**

A local authority (the service authority) may provide a service to a child on behalf of another authority (the assessing local authority). In this instance, the assessing authority would have carried out the assessment of the child which determined them to be in need.

The assessing local authority has responsibility for the child and, therefore, it has responsibility for reporting the child in the children in need census.

The service authority should not also report the child in the children in need census otherwise, the child will be counted twice. It is recognised that the service authority may be spending significant resources on providing a service to a child for whom it is not responsible. Although this resource will not be captured in the children in need census, it will be captured in financial terms in the section 251 return. This is in line with the information collected in previous years.

### **1.2.7 Adopted children**

The only children going through adoption who should automatically be included in the children in need census are those who have been adopted from care.

Step-parent adoptions are not in the scope of the children in need census. Although a referral may be opened for a step-parent/relative adoption, this does not automatically mean that the child is in need. Of course, a child who is adopted by a step-parent or relative may be in need for some other reason, in which case they would be included.

Children who have had an adoption order granted who are in receipt of post adoption service (not just payments) where there is a risk of breakdown, or behavioural support required should be included in the census. Children receiving adoption allowances only should not be included in the census. For the children in need census, post adoption support does not cover payments made, in accordance with the Adoption Allowance Regulations 1991, to a family after an adoption order has been made. Children in receipt of these payments alone, on a case closed to children's social care services, should not be returned in the census.

### **1.2.8 Formerly looked after children**

Formerly looked after children receiving follow-up support from children's social care services should be recorded in the census. Local authorities have a proactive duty to offer support until the young person's 21<sup>st</sup> birthday and these cases should be logged as ongoing episodes of need for that purpose. After that point the young person may engage with support from children's social care until their 25<sup>th</sup> birthday and such an instance may be logged as a new episode of need.

## **1.3 Rationale**

The children in need census is the only national source of data on children referred to children's social care services and those that are the subject of child protection plans (CPPs). These are a vulnerable group of children for whom both central and local government have a responsibility. Reviews, such as Professor Munro's review of child protection have highlighted the importance of good quality performance information,

including nationally collected data as part of helping to map children's journeys, and understand the impact of services on their lives. In addition, the state is required to collect information on vulnerable children to fulfil its international obligations under the [1989 Convention on the Rights of the Child](#).

The children in need census is a child-level data collection. This means the department can track and analyse the journeys of individual children and explore how these vary according to their characteristics and needs. This information can help local authorities when planning and commissioning services and also central government when developing and monitoring its policies. It helps us to answer questions such as are younger children more likely to become the subject of a child protection plan.

The department can add value to these data by linking them to other data sources such as the national pupil database (NPD) and the children looked after data collection. Linking to the children looked after data allows, for example, the analysis of the proportion of looked after children who are disabled and analysis of the original reasons for the child being identified as being in need. Over time, linking to the NPD allows the analysis of the effectiveness of services on pupil outcomes, which will lead to better commissioning of services in the future. It will allow the department to identify attainment of children in need and the progression between key stages following the receipt of services. It will also allow exploration of other relationships with absence, exclusions and characteristics (such as free school meal (FSM) eligibility, looked after and special educational need (SEN) status) and to build a more complete local and national picture of the children in need population.

## **1.4 Benefits of the children in need census to local authorities**

Data collected at a national level is of value to local authorities and others as part of a wider system of improvement and accountability. Collecting and holding information centrally as with the children in need census data enables valuable local comparisons to be made that would otherwise be very difficult without the structure of a centrally defined data collection. It enables local authorities to have a more robust and richer data source when linked to other central data collections.

A fully completed census allows local authorities to better understand variations in social care activity and practice and benchmark themselves against national averages and their peers. Local authorities can draw from this nationally held data and use comparative information from other local authorities to evaluate the effectiveness of their local services to drive commissioning, as well as to improve working practices and improve the outcomes of some their most vulnerable and disadvantaged children. Furthermore, the children in need census can encourage local authorities to construct robust systems for collecting information on and monitoring disabled children and other children in need. This will help local authorities ensure that they meet their duties under the [Disability Discrimination Act 2005](#) (DDA).

Information from the children in need census, when used alongside local authorities own locally held information, such as that described within the [Children's Safeguarding Performance Information Framework](#), can be used to help understand and provide context for discussion and debate about the effectiveness of services and an understanding of what is working and where there may be problems to resolve.

## 1.5 Data structure

The number of instances of each module per child is shown in the children in need 2020 to 2021 logical data model:

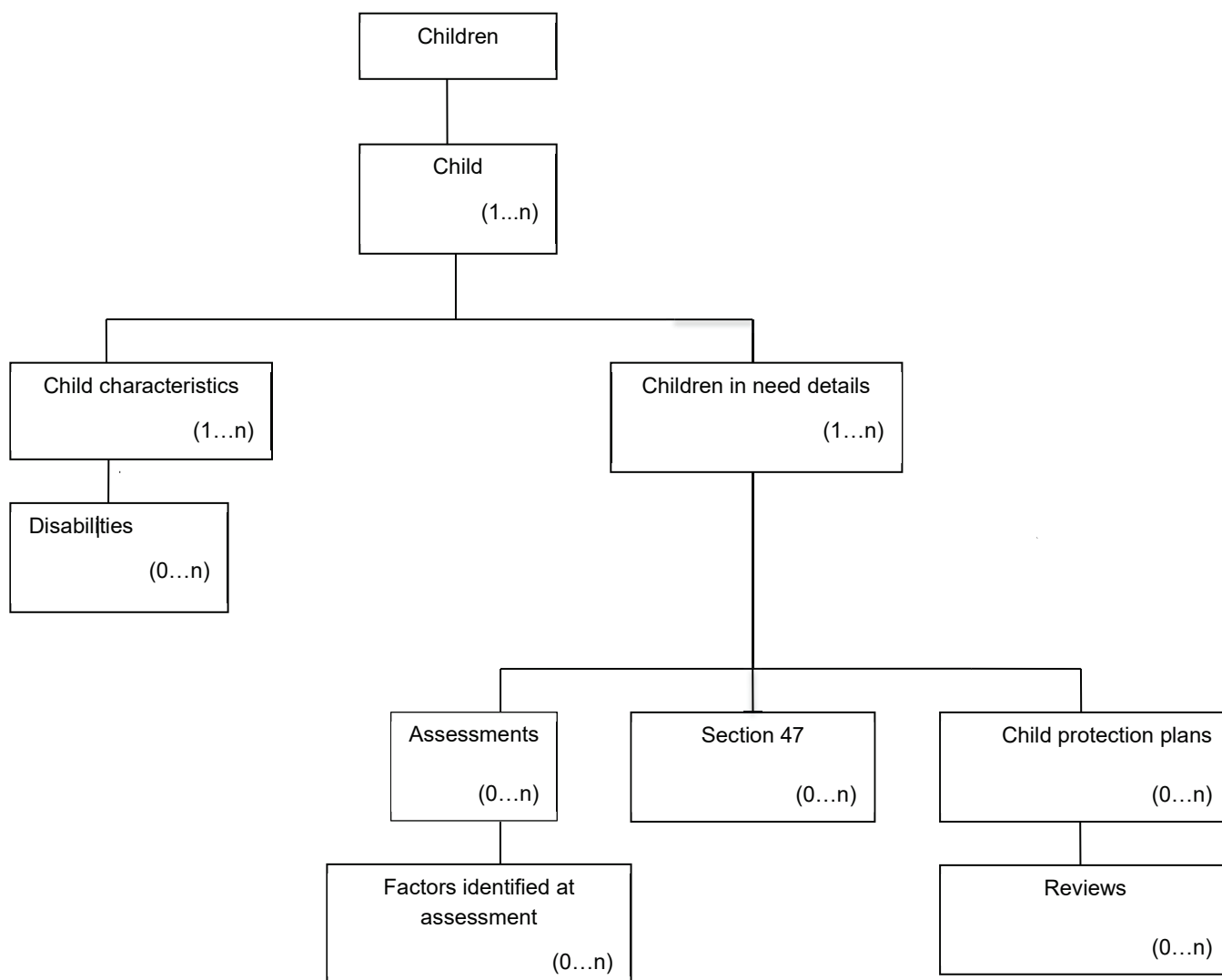


Fig 1: children in need census 2020 to 2021 structure

## 1.6 Children in need census data modules

There are four modules of data in this children in need census, each with its own set of data items:

1. Child identifiers
  - 1.1. 'LA child ID';
  - 1.2. Unique pupil number (UPN);
  - 1.3. Pupils former unique pupil number;
  - 1.4. UPN unknown reason (optional);
  - 1.5. Date of birth;



- 1.6. Expected date of birth;
  - 1.7. Gender;
  - 1.8. Date of death.
2. Child characteristics
- 2.1. Child ethnicity;
  - 2.2. Type of disability.
3. Children in need details
- 3.1. Referral date;
  - 3.2. Referral no further action;
  - 3.3. Source of referral;
  - 3.4. Primary need code;
  - 3.5. 'CIN' closure date;
  - 3.6. Reason for closure;
  - 3.7. Date of initial child protection conference (transfer in cases);
  - 3.8. Assessment group:
    - 3.8.1. Assessment actual start date;
    - 3.8.2. Assessment internal review point date (optional);
    - 3.8.3. Assessment authorisation date.
  - 3.9. Factors at assessment (factors at end of assessment process);
  - 3.10. Section 47 group:
    - 3.10.1. Section 47 enquiry actual start date;
    - 3.10.2. Target date for initial child protection conference (optional);
    - 3.10.3. Date of initial child protection conference;
    - 3.10.4. Initial child protection conference not required.
4. Child protection plans
- 4.1. Child protection plan start date;
  - 4.2. Initial category of abuse;
  - 4.3. Latest category of abuse;
  - 4.4. Number of previous child protection plans;
  - 4.5. Plan review date;
  - 4.6. Child protection plan end date.

## 1.7 Multiple entries of some types of data

Since a particular child can have more than one 'CIN' episode or child protection plan, some of the data in these modules can be repeated for each child.

### 1.7.1 Technical note

For staff preparing XML outputs, please note that care must be taken with the repetition of modules. This is described fully in the technical specification and examples of multiple instances are given in the example files that are part of the documentation pack.

## 1.8 Submission

The final deadline for submitting the completed return is **30 July 2021**. Only returns submitted by this deadline will be included in published figures.

Children's social care services local authority numbers were aligned to the local authority code set used in education data collections as of April 2019. Your children in need census 2020 to 2021 return should include the three digit numeric code used only for education data collections. A complete list of codes is provided in appendix D.

The output of children in need data from local authority systems should be an XML file that is loaded into the COLLECT (collections online for learning, education, children and teachers) system.

COLLECT is the department's centralised data collection system. The COLLECT portal can be used by local authorities and the department for processing children in need and other data returns. The COLLECT portal provides real-time data collection monitoring and progress reporting, and allows those involved in a collection to view consistent and up-to-date details of a data return. The department collects data from a wider community than just local authorities and the COLLECT software has been designed in a way that allows data to be collected from any source without having to redesign major components of the software each time a collection is undertaken.

The children in need COLLECT blade can be accessed through DfE Sign-in (DSI), which was implemented in December 2018, replacing the Secure Access system. For any access queries please refer to [DfE Sign-in help](#).

DfE Sign-in information is published on the [DfE Sign-in website](#).

Details of how to access DfE Sign-In and the COLLECT portal will be sent to local authority contacts nearer the time that the census collection goes live in a communication.

## 1.9 Validation checks

Validation checks will be applied to your data once it has been loaded into COLLECT. These will identify missing data, invalid data, and other anomalies. The validation checks can be found in the published technical specification for this collection.

Validation checks are classified as either errors or queries. A query can be distinguished from an error by the validation rule number, which has a 'Q' suffix (for example 8530Q), and by the fact that the associated message begins, "Please check ...".

DfE classifies rules as errors where a correction is required in all cases. However, for queries, although DfE would expect a correction in most cases, there will be exceptional circumstances under which the data are correct and may remain. The COLLECT system enables users to annotate queries with an explanation and we request this is undertaken to assist with data cleaning.

Some of the validation rules that are built into COLLECT have an automatic OK function. This means for these queries when you have checked all the records and you know the data is correct you can add specific text to the return level notes field and overnight an algorithm is run on the data and these records are automatically okayed within the COLLECT system. The following queries are covered:

**8670Q:** 'Please check: Assessment started more than 45 working days before the end of the census year. However, there is no Assessment end date'.

If this query triggers on your return please check every assessment that it appears against. If all the instances are correct and have been open longer than 45 working days, please add the following exact wording (including the full stop) as a return level note:

8670Q: All open assessments recorded that are longer than 45 working days have been checked and are correct.

**8899Q:** Please check: A child identified as having a disability does not have a disability factor recorded at the end of assessment.

If this query triggers on your return please check every record that it appears against. If all the instances are correct, please add the following exact wording (including the full stop) as a return level note:

8899Q: All records have been checked and confirm that the child's disability was not deemed to be a factor in the child receiving services.

**8675Q:** Please check: S47 Enquiry started more than 15 working days before the end of the census year. However, there is no date of Initial Child Protection Conference.

If this query triggers on your return please check every record that it appears against. If all the instances are correct, please add the following exact wording (including the full stop) as a return level note:

8675Q: All records have been checked and confirm that the initial child protection conference took place after the year end.

## 1.10 Year on year checks

Year on year checks are built into COLLECT and applied to a number of the key headline figures and to the number of child records on the return. These checks look at the data within the current data collection and make a comparison to the previous year figures. Where there are substantial increases or decreases between the current year and the previous year these will be highlighted within the COLLECT system.

These year on year checks are as follows:

Validation YonY 02	Number of referrals: This checks the number of referrals included in the return with the number returned in the previous year.
Count of referrals in the collection year	Count of all referrals within the collection year: Count of records where ReferralDate >=01/04/2020 and <=31/03/2021  And calculate percentage change of the number of Referral records in last year's data submitted by the LA.  The validation will appear if there is a percentage increase or decrease of 25 percent or more.
Validation YonY 03	Number of Assessments: This checks the number of assessments included in the return with the number returned in the previous year.
Count of Assessments in the collection year	Count of assessments with an assessment authorisation date recorded within the collection year 1 <sup>st</sup> April 2020 – 31 March 2021: Count of Assessment records where Assessment Authorisation Date is >= 01/04/2020 and <= 31/03/2021 And calculate percentage change of the number of Assessment records in last year's data submitted by the LA.  The validation will appear if there is a percentage increase or decrease of 25 percent or more.
Validation YonY 04	Number of S47: This checks the number of Section 47's included in the return with the number returned in the previous year.

Count of S47 in the collection year	<p>Count of S47 queries where the section 47 actual start date is present and within the collection year (1 April 2020 to 31 March 2021). Any duplicates (based on LA, LACHILDID and section 47 actual start date) are removed.</p> <p>Count of Section 47 records where Section 47 Actual Start Date is <math>\geq</math> 01/04/2020 and <math>\leq</math> 31/03/2021</p> <p>And calculate percentage change of the number of Section 47 records in last year's data submitted by the LA.</p> <p>The validation will appear if there is a percentage increase or decrease of 25 percent or more.</p>
Validation YonY 05	<p>Number of CPP's at 31<sup>st</sup> March: This checks the number of CPP's at the 31<sup>st</sup> March included in the return with the number in the previous year.</p>
Count of CPP's at 31 <sup>st</sup> March in the collection year	<p>Count of CPP's open at 31<sup>st</sup> March with a child protection plan start date before 31 March 2021 and missing end date:</p> <p>Count of CPP records where CPP Start date is <math>\leq</math> 31/03/2021 and CPP end date is <math>\geq</math> 01/04/2021</p> <p>And calculate percentage change of the number of CPPs at 31<sup>st</sup> March in last year's data submitted by the LA.</p> <p>The validation will appear if there is a percentage increase or decrease of 25 percent or more.</p>
Validation YonY 06	<p>Number of CPP starting in the year: This checks the number of CPP's starting included in the return with the number in the previous year.</p>
Child protection plans starting in the year	<p>Count of the child protection plan start dates where the date lies within the collection year (1 April 2020 to 31 March 2021):</p> <p>Count of CPP records where CPP start date is <math>\geq</math> 01/04/2020 and <math>\leq</math> 31/03/2021</p> <p>And calculate percentage change of the number of CPPs starting in the year in last year's data submitted by the LA.</p> <p>The validation will appear if there is a percentage increase or decrease of 25 percent or more.</p>
Validation YonY 07	<p>Number of CPP ending in the year: This checks the number of CPP's ending included in the return with the number in the previous year.</p>
Child protection plans ending in the year	<p>A count of the child protection plan end dates where the date lies within the collection year (1 April 2020 to 31 March 2021):</p> <p>Count of CPP records where CPP end date is <math>\geq</math> 01/04/2020 and <math>\leq</math> 31/03/2021</p>

	<p>And calculate percentage change of the number of CPPs starting in the year in last year's data submitted by the LA.</p> <p>The validation will appear if there is a percentage increase or decrease of 25 percent or more.</p>
Validation YonY 08	Records open at 31 March 2020 returned in the previous year: Checks that all records that were returned in the previous year as being 'in need' at 31 March 2020 are in the current return
Count of records returned last year as 'in need' at 31 March 2020	<p>Count of records that were returned in the previous year and counted as 'in need' at 31 March 2020, that do not appear in your current return.</p> <p>Record matching is based on the LACHildID and ReferralDate.</p> <p>The validation will appear if there are any of these cases.</p>
Validation YonY 09	Records in the current return which begin before or on 31 March 2020, but were not included in the previous years return
Count of records returned this year as 'in need' at 31 March 2020, but didn't appear in the previous years return	<p>Count of records in the current year's return that are counted as 'in need' at 31 March 2020, but didn't appear in the previous years return.</p> <p>Record matching is based on the LACHildID and ReferralDate.</p> <p>The validation will appear if there are any of these cases.</p>

When year on year checks 02 to 07 appear you will be asked to confirm that you have reviewed the change and are content that it is a valid change. All of these validations have an automatic ok function. In order to automatically ok this validation you will need to review the change and include the exact wording, relevant to the specific validation, into the return level notes. The notes that you need to add are below, please note that they should only be added if they are relevant to the specific instance

<b>Validation rule</b>	<b>Automatic ok message to be input</b>
YonY 02	The validation YonY 02 has been reviewed and the change in referrals from the previous return to this is as expected
YonY 03	The validation YonY 03 has been reviewed and the change in assessments from the previous return to this is as expected

<b>Validation rule</b>	<b>Automatic ok message to be input</b>
YonY 04	The validation YonY 04 has been reviewed and the change in S47 enquiries from the previous return to this is as expected
YonY 05	The validation YonY 05 has been reviewed and the change in CPP from the previous return to this is as expected
YonY 06	The validation YonY 06 has been reviewed and the change in CPP starting from the previous return to this is as expected
YonY 07	The validation YonY 07 has been reviewed and the change in CPP ending from the previous return to this is as expected

Overnight an algorithm is run on the data, and validations that hold the text specific to them will be automatically okayed within the COLLECT system.

Where significant year on year changes have occurred, we encourage local authorities to provide further context within their return level notes to explain any known reasons for changes.

## **1.11 General notes**

### **1.11.1 Date fields**

This guide assumes that each management information system (MIS) in use within local authorities will have standard conventions for recording dates with which users will be familiar. However, the XML format for the children in need census defines all dates as being in the format 'CCYY-MM-DD', in accordance with the XML standard. The export functionality for any system will therefore have to convert any dates into this format. Any local authority making its own software arrangements rather than using a commercial system should take this into account.

### **1.11.2 True/false fields**

There are two items within the children in need census that can be either true or false. These items are initial child protection conference not required and referral, no further action. The format for the children in need census follows the XML standard in allowing true or 1 for the true state, and false or 0 for the false state. However, this guide recognises that users of MISs may be presented with a number of ways of recording this such as with check boxes or a suitable drop down list. The export functionality for any system will therefore have to convert these fields accordingly.

## 2. Data module 1: child identifiers

This module contains details about the child's identity and it must be completed for every child record.

If a child is adopted from care during the year and remains in need, then the child should have two separate unlinked records entered for them: one for pre-adoption and one for post-adoption with appropriate new child identifiers.

Items 2.1 to 2.7 are used for identifying and matching purposes.

### 2.1 'LA child ID'

This must be a unique id for each child (no longer than 10 characters), and it should be retained from year to year. The 'LA child ID' can only contain alphabetic or numeric characters. It must be the same id that is used for other purposes, for example in the children looked after data collection return.

Local authorities are free to choose their own child ids according to the above format.

If you are planning to change the 'LA child ID', either for a single child or for a whole group of children, it will prevent DfE from analysing across different children in need census years, or analysing between the children in need and the children looked after data collection. For this reason, any proposal to change ids should be discussed with DfE at an early stage and in advance of any changes. DfE can be contacted via the details [a data collections service request form](#).

Unborn children should be allocated their own 'LA child ID'.

### 2.2 Unique pupil number (UPN)

A unique pupil number (UPN) is automatically allocated to each child in maintained schools in England and Wales. It is an identifier only for use in an educational context during a child's school career and it is subject to data protection restrictions.

The UPN must be 13 characters in the format 'Annnnnnnnnnnnn' or 'AnnnnnnnnnnnnA' (for a temporary UPN) where A is a character and n is numeric. Temporary UPNs may only be issued as an interim measure until the permanent UPN is obtained.

UPNs enable the department to match data to to KS1, KS2 and KS4 results and report on the outcomes of children in need. Policy development designed to improve the outcomes of children in need is also dependent on the availability of UPNs. Every attempt must therefore be made by the local authority to track down a child's UPN. If a child has not been assigned a UPN by a maintained school, then they may have been assigned one by the education department within the local authority, which has the ability



to assign a UPN for those in, for example, alternative provision. Only where it is impossible to discover the UPN should the item be left blank.

Note that maintained nursery schools also allocate UPNs, so children may have a UPN from the age of 2 or 3 years onwards.

Key to Success can be used to identify the UPNs of pupils attending schools within your borough or local authority; more information is available on the [Key to Success website](#).

Once obtained, the child's UPN may be retained on the local authority children's social care services database for the purposes of returning the information to the department. It is up to the local authority how they track down the UPN and we cannot offer legal advice to local authorities on obtaining UPNs.

For looked after children that have been adopted during the year, the UPN on the child's pre and post-adoption records should be different.

Further information on UPNs is available on the [department's website](#). This link also contains information on the assignment of new UPNs to adopted children.

### **2.2.1 UPNs for children educated outside of a local authority**

The use of Key to Success (KtS) is derived from legislation which gives the Secretary of State (SoS) the power to grant a certain degree of sharing; more information is available on the [Key to Success website](#).

However, Key to Success cannot be used to identify the details of pupils attending schools in boroughs or local authorities who are not your own, unless the child is a looked after child (your local authority is the corporate parent) and the child is placed outside your own local authority.

Where there are a large number of children attending schools outside of your local authority it may not be possible for you to return the UPN for these children if you do not already hold it for other reasons. If this is the case, please make sure a note is added to your children in need return to explain why some of the UPN information is not available.

### **2.3 Pupil's former UPN**

This is where a pupil had held another UPN, for example a temporary UPN when the pupil was first admitted to a school, but has subsequently been given a permanent UPN.

Where a looked after child has been adopted during the year and this is the child's post-adoption record, do not enter the pre-adoption UPN in this field; leave it blank instead.

## 2.4 UPN unknown reason

This item was reintroduced for 2011 to 2012 on an optional basis when a child's UPN is not known and remains optional in 2020 to 2021. It is included to assist local authorities in informing the department why a UPN is missing. The following are the full list of codes available for local authorities to use:

Code	Description
UN1	Child is not of school age and is not yet assigned a UPN.
UN2	Child has never attended a maintained school in England and has not been assigned a UPN.
UN3	Child is educated outside of England and has not been assigned a UPN.
UN4	Child is newly in need (one week before the end of the collection period) and the UPN is not yet known at the time of the children in need census return.
UN5	Sources collating UPNs reflect discrepancy/ies for the child's name and/or surname and/or date of birth therefore prevent reliable matching (for example duplicated UPN).
UN6	Child is not looked after and the local authority is unable to obtain the UPN.
UN7	Child referred but no further action taken.

## 2.5 Date of birth

The date of birth should be recorded according to the formatting covered in the general notes (See section [general notes, date fields](#)). If the exact date of birth is not known, record an approximate date of birth based on the child's estimated age at date of referral.

This field will be blank for unborn children. If an unborn child is subsequently born in the period of need then the date of birth should be entered and the expected date of birth should be deleted.

## 2.6 Expected date of birth

Record the expected date of birth (due date) for a child who is unborn at the time of referral and who remains unborn at 31 March or when the case is closed.

If the child is born before 31 March 2021 or before the case is closed, then the return for that child should not include both the date of birth and the expected date of birth.

Please note that users may wish to retain the expected date of birth on their systems, but it must not be included within the census return if the date of birth is present. It will be

possible for us to assess whether the child was unborn at the time of the referral if the date of birth is later than the referral date. See section [general notes, date fields](#) for date formats.

If a child is stillborn, or the mother suffers a miscarriage (including a chemical pregnancy) or a phantom pregnancy, please record the expected date of birth, and leave the date of birth blank. The children in need closure date does not need to match the date on the death certificate. The date of death and the final closure date can both be recorded. The reason for closure should be 'RC2 died'.

## 2.7 Gender

Enter:

- 1 for male;
- 2 for female;
- 0 for not recorded or unborn at 31 March 2021;
- 9 for indeterminate gender (unable to be classed as either male or female).

Code 0 should be used when the gender of the child has not been recorded. It should also be used to code the gender of unborn children, even if the gender of the unborn child is known.

Code 9 should only be used when the child is unable to be classified as either male or female.

## 2.8 Date of death

The collection of date of death information reflects the legislation introduced on 1 April 2008, which made reviews into child deaths a statutory requirement.

This is required as it shows more clearly where services continue to be provided after a child has died. The final case closure date should also be provided; this may be after the date of death if the case remains open for a short time after the death.

Record the date of death according to the formatting covered in the general notes (See section [general notes, date fields](#)), which should be verified from the death certificate.

If a child in need dies outside of the 2020 to 2021 collection period but the case is still open for investigation, the child should be included in the new collection period. The date of death and the final closure date should both be recorded.

If a child died or was still born, or there was a miscarriage or termination of the pregnancy before referral to children's social care services, they should not be included in the children in need census; whether or not services were provided after the death.

## 3. Data module 2: child characteristics

### 3. Child ethnicity

The children's social care services method of determining a child's ethnicity involves first asking the child about their ethnic identity. If they are not yet old enough to respond, ask their primary carer.

Ethnicity is specified using the codes within the common basic dataset (CBDS).

The ethnicity of unborn children should be coded under Information not yet obtained (code NOBT), even if it is thought to be known.

This data item should not be left blank. Code ethnicity using the following table:

Code	Description
White	
WBRI	White British
WIRI	White Irish
WIRT	Traveller of Irish heritage
WOTH	Any other White background
WROM	Gypsy/Roma
Mixed	
MWBC	White and Black Caribbean
MWBA	White and Black African
MWAS	White and Asian
MOTH	Any other mixed background
Asian or Asian British	
AIND	Indian
APKN	Pakistani
ABAN	Bangladeshi
AOTH	Any other Asian background
Black or Black British	
BCRB	Caribbean
BAFR	African
BOTH	Any other black background

Code	Description
Other ethnic groups	
CHNE	Chinese
OOTH	Any other ethnic group
REFU	Refused
NOBT	Information not yet obtained

### 3.2 Type of disability

The [Disability Discrimination Act 2005 \(DDA\)](#) defines a disabled person as a person with a physical or mental impairment which has a substantial and long-term adverse effect on his/her ability to carry out normal day-to-day activities. The condition must have lasted, or be likely to last at least 12 months in order to be counted as a disability.

Certain conditions are not regarded as impairments for the purposes of the act:

- addiction to, or dependency on, alcohol, nicotine, or any other substance (other than as a result of the substance being medically prescribed);
- the condition known as seasonal allergic rhinitis (hay fever), except where it aggravates the effect of another condition;
- tendency to start fires;
- tendency to steal;
- tendency to physical or sexual abuse other persons;
- exhibitionism;
- voyeurism

In addition, disfigurements such as tattoos, non-medical body piercing, or something attached through such piercing, are not regarded as having a substantial adverse effect on the person's ability to carry out normal day-to-day activities.

Further information on the Disability Discrimination Act 2005 (DDA) can be found on the government's [legislation website](#).

Record if a child has been disabled (as defined above) in any of the categories in the following table at any time during the year.

Children may have multiple disabilities in which case more than one category can be indicated, as appropriate. 'Other DDA' can also be indicated in conjunction with any of the other listed categories.

Record all the relevant disabilities that have affected the child.

If your MIS does not allow the identification of individual disabilities then the code 'Other DDA' may be used for all your children with a disability, however this must be noted in your COLLECT return level notes so your data can be analysed appropriately.

If a child has no disability, do not leave this item blank; use the code 'NONE'. However if a child is unborn then the disability item should be left blank.

Code disability using the information in the following table:

<b>Code</b>	<b>Description</b>
NONE	'NO DISABILITY'.
MOB	'MOBILITY' – getting about the house and beyond.
HAND	'HAND FUNCTION' – holding and touching.
PC	'PERSONAL CARE' – For example, eating, washing, going to the toilet dressing.
INC	'INCONTINENCE' – controlling the passage of urine or faeces.
COMM	'COMMUNICATION' – speaking and/or understanding others.
LD	'LEARNING' – For example, having special educational needs.
HEAR	'HEARING'.
VIS	'VISION'.
BEH	'BEHAVIOUR' – a condition entailing behavioural difficulties, includes attention deficit hyperactivity disorder (ADHD).
CON	'CONCIOUSNESS' – seizures.
AUT	'DIAGNOSED WITH AUTISM OR ASPERGER SYNDROME' – diagnosed by a qualified medical practitioner as having classical autism or Asperger syndrome. Do not include children who have merely been identified as having an autistic spectrum disorder (ASD), for example by their school. This can be associated with the behaviour and learning categories above.
DDA	'OTHER DDA' – one or more of the child's disabilities under the Disability Discrimination Act 2005 (DDA) does not fall into any of the above categories.

## 4. Data module 3: children in need

This module can be entered more than once for a particular child record if that child has received more than one episode of need during the year.

It includes details for each of the children in need episodes active or reviewed during the period. This includes episodes that started prior to the data collection period, but remained open on 1 April 2020.

The first part of this section (4.1) gives an overview as to what is required from a child who is referred, as the level of detail is dependent on whether further action is taken.

### 4.1 Information required for referrals

The data collection allows referrals to be followed by more than one section 47 enquiry. For this reason, these groups may repeat within the census's data structure so that multiple instances can be included. Please note however that these activities should not overlap. The census will validate the data provided and query any overlaps that are included.

The data collection allows for a number of variations in process. For this reason, none of the three groups are mandatory. The following alternatives are therefore the minimum valid content for one instance of the children in need details module:

Option	Option criteria
Either option A: for a 2020 to 2021 referral that leads to further action	the referral date; the primary need code; at least one assessment actual start date; the referral no further action flag with a value of false or 0; the source of referral.
Or option B: for a 2020 to 2021 referral that does not lead to any further action (see note below)	the referral date; the referral no further action; flag with a value of true or 1; the source of referral.

For option B, a no further action case is only where the initial consideration of the referral means that no action is taken by children's social care services. This initial consideration should take place within one working day. For the purposes of the children in need census this can also include cases, for example, where the only action taken once a referral has been received is to provide information or advice to the referring organisation, or referral of the case onto other services. However initial contacts should not be included in the children in need census.



A referral with no further action is not the same as a case that is closed immediately following assessment.

Cases closed following assessment should use the reason for closure code 'RC8' and set the referral no further action flag to false and should have no other activities linked in the return (for example, other assessments or child protection plans).

For a 'no further action case', primary need code, children in need closure date and reason for closure are not required.

A referral resulting in no further action should not have any other activities linked to it in your return (for example assessments or child protection plans).

When new information is received on an already open case, this should not be counted and recorded as a referral in the census. Any resultant activity (for example, assessments) should be recorded against the child's open episode.

#### **4.1.1 Information required for transfer in cases**

If a child who was the subject of a child protection plan in their previous local authority moves to your local authority, then all data modules need to be completed, however the children in need details module should include:

- a referral date (which should be the date your local authority received formal notification that the child had permanently moved to your local authority);
- a source of referral;
- a primary need code;
- the referral no further action flag should equal 0 or false;
- the date of initial child protection conference should be provided, but within the children in need details group, not as part of the section 47 enquiries sub group.

The section 47 enquiries group should not be returned for these children unless a subsequent section 47 enquiry is carried out.

If the child's case is closed within the 2020 to 2021 census period then the children in need closure date and the reason for closure code should be completed.

## **4.2 Referral date**

Enter the date that the child was referred to children's social care services, using the formatting covered in the general notes (See section [general notes, date fields](#)). This date can be a non-working day and should be the date the child was referred, not the date the child became in need, but the assessment completion date.

The referral date can be before 1 April 2020 as long as the case was open at some point between 1 April 2020 and 31 March 2021.

A referral is defined as a request for services to be provided by local authority children's social care via the assessment process outlined in [Working Together 2018](#) and is either in respect of a child not previously known to the local authority, or where a case was previously open but is now closed. New information about a child who is already an open case does not constitute a referral for the purposes of this return.

Reception and initial contact activity is not in itself a referral. Such activity may, or may not lead to a referral.

If this record is for a child who has remained in need after being adopted from care and this is the child's post-adoption record, then the referral date should match the date of the court's adoption order.

If a number of agencies refer the child at a similar time, then the first referral date should be recorded as the referral date.

### **4.3 Referral no further action**

The referral no further action flag allows the reporting of children who were referred but after initial consideration no further action was taken. Enter:

- 1 (or true) if the referral was received but after initial consideration no further action was taken;
- 0 (or false) if the referral was received and after initial consideration further action was taken.

This data item should not be left blank.

### **4.4 Source of referral**

For each new referral, record the source of referral from the list below.

Where there is more than one referral for the same child on the same day, the first referral should be recorded and it is this referral source that should be recorded here. The data should be returned each year the episode remains open.

Code	Description
1A	'INDIVIDUAL' – family member, relative or carer.
1B	'INDIVIDUAL' – acquaintance (including neighbours and child minders).
1C	'INDIVIDUAL' – self.
1D	'INDIVIDUAL' – other (including strangers or Members of Parliament (MPs)).
2A	'SCHOOLS'.
2B	'EDUCATION SERVICES'.
3A	'HEALTH SERVICES' – general practitioner (GP).
3B	'HEALTH SERVICES' – health visitor.
3C	'HEALTH SERVICES' – school nurse.
3D	'HEALTH SERVICES' – other primary health services.
3E	'HEALTH SERVICES' – A&E (accident and emergency department).
3F	'HEALTH SERVICES' – other (for example hospice).
4	'HOUSING' - local authority housing or housing association.
5A	'LA SERVICES' – social care, for example, adults social care services.
5B	'LA SERVICES' – other internal (department other than children's social care in local authorities, for example, youth offending (excluding housing)).
5C	'LA SERVICES' – external, for example, from another local authority's adults social care services.
6	'POLICE'.
7	'OTHER LEGAL AGENCY' – including courts, probation, immigration, 'CAFCASS' (Children and Family Court Advisory and Support Service) or prison.
8	'OTHER' – including children's centres, independent agency providers or voluntary organisations.
9	'ANONYMOUS'.
10	'UNKNOWN'.

## 4.5 Primary need code

This code indicates the main reason why a child started to receive services. It should not be left blank. Only one reason can be recorded.

If a child is also looked after, the primary need code might not necessarily be the same as on the children looked after data collection return if the child became looked after at a later date than when they became a child in need.

The categories are designed only to identify what kind of pressures are placed on social services. They have no diagnostic value with regard to the children themselves and must not be used to determine what type of service the child should receive.

If there is difficulty choosing between two or more categories of need, choose the category that comes highest up in the table, for example, if trying to decide between family in acute stress and family dysfunction, choose family in acute stress.

The order of the categories relate to the specificity of the description and not necessarily importance. However, the order is fixed so that there is consistency.

Further information on choosing a primary need category is in [appendix A](#).

The children in need census for 2005 and earlier tried to account for all money spent in a census week. To allow for this, 'N9' was created, but as this census is specifically child based, the definition of 'N9' from 2005 is not applicable. As in previous years, 'N9' can be used if a child is no longer in need and the only service they are receiving is adoption support (on an open case) immediately after they have been in need.

Enter the primary need code using the table below:

<b>Category</b>	<b>Code</b>	<b>Description</b>
Abuse or neglect	N1	Children in need as a result of, or at risk of, abuse or neglect; also includes children at risk because of domestic violence.
Child's disability	N2	Children and families whose main need for services arises because of their child's disability, illness or intrinsic condition.
Parental disability or illness	N3	Children whose main need for services arises because the capacity of their parent(s) (or carer(s)) to care for them is impaired by the parent(s) (or carer(s)) disability, physical or mental illness, or addictions.
Family in acute stress	N4	Children whose needs arise from living in a family that is going through a temporary crisis that diminishes the parental capacity to adequately meet some of the children's needs.
Family dysfunction	N5	Children whose needs primarily arise from living in a family where the parenting capacity is chronically inadequate.
Socially unacceptable behaviour	N6	Children and families whose need for services primarily arise out of the child's behaviour impacting detrimentally on the community.
Low income	N7	Children, living in families or independently, whose needs primarily arise from being dependent on an income below the standard state entitlements.
Absent parenting	N8	Children whose needs for services arise mainly from having no parents available to provide for them.

Cases other than children in need	N9	Children who have been adopted and, although they are no longer a child in need, receive adoption support from children's social services immediately after adoption. This should not be used where a child receives an adoption payment only as these children should not be included in the census.  The previous definition of 'N9' from 2005 was casework which is required for a legal and administrative reason only and there is no child in the case who is in need.
Not stated	N0	Children whose reference data is not completely entered on the system and whose need code is yet to be determined, or, the case is a referral that has been closed following assessment.

## 4.6 'CIN' closure date

A case is closed if the local authority has no intention of taking any initiative with respect to the child or family concerned, unless the local authority receives new information that requires it to take some sort of action.

Enter the date that the case was closed, according to the formatting covered in the general notes (See section [general notes, date fields](#)).

If the case is still open at 31 March 2021, then leave this item blank.

A children in need closure date can be the same as the referral date but, in practice, this should only very rarely occur. Closure date is not required for a referral that leads to no further action.

### 4.6.1 Children in need closure in the case of adoption

When a child's case is closed because of adoption (reason for closure code 'RC1'), the children in need closure date will normally be the day when the court granted the adoption order.

It is recognised that an adoption case may sometimes remain open to allow all procedures to be completed. In these cases the census will allow for the case to extend up to one month after the date of the adoption order without having to open a new record. The need code would stay the same in these cases. Anything above one month will require a new record to be created. If a child remains in need after being adopted from care, then the new post-adoption child record should be opened with a children in need referral date that is the date of the court's adoption order. If the child is receiving post-adoption support it should be recorded in this new record.

## 4.6.2 Children in need closure in the case of death

When a child is no longer in need because the child dies (or an unborn child is stillborn), (reason for closure code 'RC2'), the closure date and the date of death recorded on the death certificate no longer need to match. It is recognised that the case may remain open for investigation and review procedures after the child dies, the date of death field allows local authorities to separately record the date of death and final case closure date in the census. This will allow local authorities to record the services they provide between the death and the case closure.

## 4.7 Reason for closure

This is the reason the local authority stops providing services to the child.

Enter the reason that the case was closed using the code table below:

Description	Code
Adopted.	RC1
Died.	RC2
Child arrangements order.	RC3
Special guardianship order.	RC4
Transferred to services of another local authority.	RC5
Transferred to adult social care services.	RC6
Services ceased for any other reason, including child no longer in need.	RC7
Case closed after assessment, no further action.	RC8

If the case is still open at the end of the year, then leave this item blank.

'RC8 - case closed after assessment, no further action'

This allows local authorities to correctly categorise a closed case for children who they assess following a referral, but for whom they do not provide services and whose case is closed. It should not be used for any other reason.

This is different from cases that were closed at the referral stage when the referral no further action flag is used (see [section 4.3](#)). The reason for closure code ('RC8') should not be used for cases that were closed prior to assessment or for cases where services were provided following assessment.

In cases where the child has been assessed not to be in need after an assessment, the reason for closure code used should be 'RC8'. If a primary need code is retained on your system for these children then this can be returned using the full code set listed in [section](#)

[4.5](#). However, if you do not retain a primary need code for some or all of these children use code 'N0' for this field. This allows for children whose reference data is not completely entered on the system and whose need code is yet to be determined, or, the case is a referral that has been closed following assessment.

## 4.8 Date of initial child protection conference

This data item in the children in need details module should only be completed where a child who is the subject of a child protection conference transfers into your local authority.

In these cases, the receiving local authority should convene a child protection conference within 15 working days of being notified of the move and you should record the date of this child protection conference here and not in the section 47 group.

## 4.9 Assessments group

Under the [Children Act 1989](#), local authorities are required to provide services for children in need for the purposes of safeguarding and promoting their welfare. Local authorities undertake assessments of the needs of individual children to determine what services to provide and action to take.

Assessments should be recorded only at significant points such as the beginning of a new episode of need. It is not necessary to log new assessments at the point of closing an episode of need.

As set out in '[Working together to safeguard children](#)' (2018), where the outcome of the assessment is continued through an agreed plan of action, the plan should be reviewed regularly, the outcomes of these reviews do not need to be recorded. However if the situation changes significantly, this may result in the need for the completion of a new assessment, in which case this new assessment should be recorded.

Include all assessments that fall all or part in the 2020 to 2021 collection year, including those that had started but had not finished by 31 March 2021, and those that started prior to 1 April 2020 and were completed within 2020 to 2021 collection year. Please note, if a child is referred to a local authority and has been classified as in need following an assessment they should be included in the children in need census regardless of whether they are receiving youth offending or any other service.

Within one working day of a referral being received, a decision should be made about the type of response required. The maximum timeframe from the assessment to arrive at a decision on the action to be taken should be no longer than 45 working days from the point of referral. This should be recorded as the end date of the assessment.

Assessments may lead to no further action, the direct provision of services, and section 47 enquiries. See '[Working together to safeguard children](#)' for further information.

There must always be an assessment actual start date, but if the assessment authorisation date falls after the end of the census year, it should be left blank. The assessment internal review point date is optional.

#### **4.9.1 Assessment actual start date**

Enter the date the assessment actually started, according to the formatting covered in the general notes (See section [general notes, date fields](#)). This is the actual start date of the continuous assessment.

#### **4.9.2 Assessment internal review point date (optional)**

How quickly an assessment has been carried out after a child's case has been referred into children's social care services will be determined by the needs of the child and the nature and level of harm being suffered. The local assessment framework must have an internal review point set at the outset for completing assessments. This must be shared with the lead social worker and all relevant partners – cases must be reviewed by managers regularly to monitor whether assessments are being completed by this date. Enter the internal review point date, according to the formatting covered in the general notes (See section [general notes, date fields](#)). If the internal review point date falls beyond the census year, this should be included.

#### **4.9.3 Assessment authorisation date**

Enter the actual date on which an assessment is completed and authorised, according to the formatting covered in the general notes (See section [general notes, date fields](#)). If the assessment authorisation date falls after the end of the census year, it should be left blank. This is the date the assessment is completed and authorised.

An assessment is deemed to be completed once the social worker has informed, in writing, all the relevant agencies and the family of their decisions and if the child is a child in need, of the plan for providing support/or once the assessment has been discussed with the child's family (or carers) and the team manager has viewed and authorised the assessment.

### **4.10 Factors identified at the end of assessment**

Record the factors as understood at the end of the assessment relevant to:

- the impairment of the child's health and development ('Child');
- the parent(s)/carer(s) capacity to respond to the child's needs ('Parenting capacity');
- other people in the family/household, for example, a sibling or lodger ('Other').



This applies to all assessments completed within the 2020 to 2021 year.

The information should be recorded at the end of the assessment and all factors which are felt to be relevant to the child's assessment should be reported from the list below. This includes factors where services are put in place to mitigate the effect of the factor as well as factors which need to be taken into account in providing other support.

Please only record factors which are currently an issue of concern, for example if domestic violence is a current issue of concern please record it. If domestic violence was an issue in a previous relationship and is not an issue of concern now then do not record it. Factors such as mental health concerns do not need to be confined to medically defined conditions. Rather this is intended, for example, to record where the professional, as part of the assessment process, feels that mental health is of concern to the child's health and development or parenting capacity to respond to the child's needs.

If an assessment is triggered by new information on an already open case, and the assessment ends in the outcome of no further action, please record the factors relevant to the existing case. This will ensure errors are not triggered, because the case did not close.

The codeset for factors identified at the end of assessment on physical abuse (18A) and sexual abuse (19A) have been expanded in 2020-21, to identify child on child physical and sexual abuse, as well as adult on child physical and sexual abuse. Collecting and publishing this data will support future child on child abuse policy development. More information on the new factors is provided in the below table and appendix C.

Please report all the following factors that apply:

<b>Code</b>	<b>Description</b>
1A	Alcohol misuse: concerns about alcohol misuse by the child.
1B	Alcohol misuse: concerns about alcohol misuse by the parent(s)/carer(s).
1C	Alcohol misuse: concerns about alcohol misuse by another person living in the household.
2A	Drug misuse: concerns about drug misuse by the child.
2B	Drug misuse: concerns about drug misuse by the parent(s)/carer(s).
2C	Drug misuse: concerns about drug misuse by another person living in the household.
3A	Domestic violence: concerns about the child being the subject of domestic violence.
3B	Domestic violence: concerns about the child's parent(s)/carer(s) being the subject of domestic violence.
3C	Domestic violence: concerns about another person living in the household being the subject of domestic violence.
4A	Mental health: concerns about the mental health of the child.

4B	Mental health: concerns about the mental health of the parent(s)/carer(s).
4C	Mental health: concerns about the mental health of another person in the family/household.
5A	Learning disability: concerns about the child's learning disability.
5B	Learning disability: concerns about the parent(s)/carer(s) learning disability.
5C	Learning disability: concerns about another person in the family/household's learning disability.
6A	Physical disability or illness: concerns about a physical disability or illness of the child.
6B	Physical disability or illness: concerns about a physical disability or illness of the parent(s)/carer(s).
6C	Physical disability or illness: concerns about a physical disability or illness of another person in the family/household.
7A	Young carer: concerns that services may be required or the child's health or development may be impaired due to their caring responsibilities.
8B	Privately fostered: concerns that services may be required or the child may be at risk as a privately fostered child - overseas children who intend to return
8C	Privately fostered: concerns that services may be required or the child may be at risk as a privately fostered child - overseas children who intend to stay
8D	Privately fostered: concerns that services may be required or the child may be at risk as a privately fostered child - UK children in educational placements
8E	Privately fostered: concerns that services may be required or the child may be at risk as a privately fostered child - UK children making alternative family arrangements
8F	Privately fostered: concerns that services may be required or the child may be at risk as a privately fostered child - other
9A	UASC: concerns that services may be required or the child may be at risk of harm as an unaccompanied asylum-seeking child.
10A	Missing: concerns that services may be required or the child may be at risk of harm due to going/being missing.
11A	Child sexual exploitation: concerns that services may be required or the child may be at risk of harm due to child sexual exploitation.
12A	Trafficking: concerns that services may be required or the child may be at risk of harm due to trafficking.
13A	Gangs: concerns that services may be required or the child may be at risk of harm because of involvement in/with gangs.
14A	Socially unacceptable behaviour: concerns that services may be required or the child may be at risk due to their socially unacceptable behaviour.
15A	Self-harm: concerns that services may be required or due to suspected/actual self-harming child may be at risk of harm.
16A	Abuse or neglect – 'NEGLECT': concerns that services may be required or the child may be suffering or likely to suffer significant harm due to abuse or neglect.

17A	Abuse or neglect – ‘EMOTIONAL ABUSE’: concerns that services may be required or the child may be suffering or likely to suffer significant harm due to abuse or neglect.
18B	Abuse or neglect – ‘PHYSICAL ABUSE’ (child on child): concerns that services may be required or the child may be suffering or likely to suffer significant harm due to abuse or neglect by another child.
18C	Abuse or neglect – ‘PHYSICAL ABUSE’ (adult on child): concerns that services may be required or the child may be suffering or likely to suffer significant harm due to abuse or neglect by an adult.
19B	Abuse or neglect – ‘SEXUAL ABUSE’ (child on child): concerns that services may be required or the child may be suffering or likely to suffer significant harm due to abuse or neglect by another child.
19C	Abuse or neglect – ‘SEXUAL ABUSE’ (adult on child): concerns that services may be required or the child may be suffering or likely to suffer significant harm due to abuse or neglect by an adult.
20	Other.
21	No factors identified - only use this if there is no evidence of any of the factors above and no further action is being taken.
22A	Female genital mutilation (FGM) - concerns that services may be required or the child may be at risk due to female genital mutilation.
23A	Abuse linked to faith or belief - concerns that services may be required or the child may be at risk due to abuse linked to faith or belief.

Code 21 (no factors identified) should only be used for cases which are closed following assessments which result in no further action (closure code RC8) and should be the only factor listed. However, if factors are identified for cases which are closed following assessment, please record these using the list above, excluding code 21.

If a **section 47 enquiry** has commenced on a case then code 21 (no factors identified) should not be reported at the end of assessment even if it was found that the allegations that triggered the section 47 enquiry are unfounded. Instead the relevant factors that were considered at the assessment that initiated the section 47 enquiry should be recorded. The case should then be closed with the reason for closure code: ‘RC7 - services ceased for any other reason, including child no longer in need’ used as at the point the section 47 started the child would be counted as a child in need even if the case closed shortly after. Code 21 should only be used in cases where the section 47 enquiry was automatically triggered alongside the assessment and both the assessment and section 47 resulted in no further action.

More detailed descriptions and definitions of the factors are in the supplementary document [‘Additional information on definitions for factors identified at the end of assessment’](#).

## 4.11 Section 47 enquiries group

This item refers to enquiries conducted under the provisions of section 47 of the Children Act 1989. The objective of such enquiries is to determine whether action is needed to promote and safeguard the welfare of the child or children who are the subject of the enquiries.

References to section 47 enquiries relate to those that started during the period 1 April 2020 to 31 March 2021 inclusive, even if they carry on into the next data collection year. Also, include cases where the section 47 enquiries started on 31 March 2020 or before, but that led to an initial child protection conference (ICPC) with a date on or after 1 April 2020.

If a child was the subject of section 47 enquiries on more than one occasion during the year, record each occasion separately. An assessment should also be recorded on each occasion a child is subject to a section 47 enquiry.

We are aware that in some local authorities a section 47 enquiry is automatically triggered alongside the assessment. In these cases, where both resulted in no further action, a section 47 should not be recorded.

Each section 47 group will comprise one of the following:

<b>Option</b>	<b>Option criteria</b>
Either option A: for a section 47 enquiry that does not lead to any further action	the section 47 enquiry start date, the ICPC not required flag with a value of true or 1
Or option B: for a section 47 enquiry where the initial child protection conference has taken place	the section 47 enquiry start date, the initial child protection conference target date (optional), the date of initial child protection conference, the ICPC not required flag with a value of false or 0
Or option C: For a section 47 enquiry where the initial child protection conference has not yet taken place	the section 47 enquiry start date, the initial child protection conference target date (optional), the ICPC not required flag with a value of false or 0

### **4.11.1 Section 47 enquiry start date**

Enter the date of the strategy discussion at which the section 47 enquiries were initiated, using the formatting covered in the general notes (See section [general notes, date fields](#)). This can be a non-working day.

### **4.11.2 Target date for initial child protection conference (optional)**

Enter the date that is 15 working days after the strategy discussion at which section 47 enquiries were initiated, using the formatting covered in the general notes (See section [general notes, date fields](#)). The date should be supplied even if it falls within the year 2020 to 2021.

### **4.11.3 Date of initial child protection conference**

Enter the date on which the initial child protection conference takes place, using the formatting covered in the general notes (See section [general notes, date fields](#)). If the initial child protection conference has not yet taken place please leave blank. Please note, this date within the section 47 section should not be used for children transferring between local authorities. Further information on how information should be recorded for transfer in cases is given [section 4.1.1](#).

### **4.11.4 Initial child protection conference not required**

This indicates that section 47 enquiries were commenced, but that an initial child protection conference was not deemed necessary. Enter:

- 1 (or true) if the section 47 enquiry was commenced, but an initial child protection conference was not deemed necessary;
- 0 (or false) if the section 47 enquiry was commenced, and an initial child protection conference was deemed necessary.

## 5. Data module 4: child protection plans

This module contains information on child protection plans. A child can have none, one or more than one child protection plan (CPP). A child who is not in need cannot have a child protection plan.

This module is required where any of the following conditions apply:

- the child protection plan start date or end date fall within the census year;
- the plan was already open at the start of the year and no child protection plan end date within the year.

The collection allows more than one plan review date to be provided and all reviews within the year should be included. A child protection plan being transferred from another local authority should be recorded as a new plan, even if the child had previously received services in the local authority they are transferring to.

This module is repeatable.

### 5.1 Child protection plan start date

If a child is the subject of a child protection plan, enter the start date of that plan, using the formatting covered in the general notes (See section [general notes, date fields](#)). Otherwise, leave blank.

### 5.2 Initial and latest category of abuse

Using the code set in the table below record the category of abuse as assessed when the child protection plan commenced and the most recent category of abuse assigned to the child protection plan. The latest category of abuse may be the same as the initial category of abuse.

Both initial and latest category of abuse variables use the following codes:

Description	Code
Neglect	NEG
Physical abuse	PHY
Sexual abuse	SAB
Emotional abuse	EMO
Multiple/not recommended	MUL

The multiple category is for when more than one category of abuse is relevant to the child's current protection plan. It is not for children who have been the subject of more than one child protection plan during the year.

The category of abuse under which a child is made the subject of a child protection plan will have been decided upon at the child protection conference. However, if the category of abuse applicable to the current child protection plan has changed as a result of subsequent child protection conferences, then enter the latest category of abuse. Overall, the initial category of abuse is that decided upon at the conference, any amended category is to be recorded as the latest category of abuse.

The categories are defined for statistical purposes as follows:

## **Neglect**

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, which is likely to result in the serious impairment of the child's health or development.

For instance, a parent or carer may fail to:

- provide adequate food, shelter, or clothing (including exclusion from home or abandonment);
- protect a child from physical harm, emotional harm, or danger;
- ensure adequate supervision (including the use of inadequate care-givers);
- ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs. More information on childhood neglect including training and resource materials can be found on the [Safeguarding children](#) section of the department's website.

## **Physical abuse**

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer deliberately fabricates symptoms or induces illness in a child. The fabrication and deliberate inducement or symptoms relate to conditions such as Munchausen syndrome by proxy.

## **Sexual abuse**

Sexual abuse involves forcing or enticing a child to take part in sexual activities, including prostitution, regardless of whether or not the child is aware of what is happening. Such activities may involve physical contact, including non-penetrative and penetrative acts (for example rape, buggery, or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact

activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

## **Emotional abuse**

Emotional abuse is the persistent ill-treatment of a child that causes severe and continual adverse effects on the child's emotional development. It may involve conveying to the child that they are inadequate, worthless or unloved, or valued only as far as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or making fun of what they say or how they communicate. It may feature the imposing of age or developmentally inappropriate expectations on the child. Such expectations may include interactions that are beyond the child's developmental capability. It includes overprotection and limitation of exploration and learning, or preventing the child from participating in normal social interactions. It may involve the child seeing or hearing the ill-treatment of another. It may also involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is implied in all types of ill-treatment of a child, although it may occur on its own. Use this category when it is the main or sole form of abuse.

## **Multiple/not recommended**

This category is used to record multiple categories or where no category is recommended.

## **5.4 Number of previous child protection plans**

The number of previous times that a child was made the subject of a child protection plan by the same local authority. If this is the first plan then the value should be zero. Child protection plans issued by other local authorities should not be counted. The number of previous child protection plans includes the number of times the child was on the child protection register.

## **5.5 Plan review date**

Enter the date of the child protection plan reviews in 2020 to 2021, using the formatting covered in the general notes (See section [general notes, date fields](#))

If more than one review has taken place then each should be provided. If there have been no reviews for this plan, leave this blank.



### **5.5.1 Dates of plan reviews held in 2019 to 2020**

If the child is the subject of a child protection plan at 1 April 2020, and any child protection plan review was carried out in the previous year you should include the details of the last review that was carried out in 2019 to 2020.

### **5.6 Child protection plan end date**

Enter the end date of the plan, using the formatting covered in the general notes (See section [general notes, date fields](#)). Otherwise, leave blank.

# Appendix A: definitions and guidance for primary need codes (see module 3)

## A1. Abuse or neglect (code 'N1')

### A1.1 Definition

Children in need as a result of, or at risk of, abuse or neglect.

### A1.2 Guide to inclusion or exclusion from this category

All children who are the subject of a child protection plan or enquiries under section 47 of the Children Act 1989 should be included.

Children who have just been referred with evidence of possible neglect or abuse should be included.

Children who are living in a situation of domestic violence which triggers section 47 enquiries should be included.

Children whose needs arise out of their involvement (actual or suspected) in prostitution which has triggered section 47 enquiries should be included.

Children whose needs arise primarily out of their abusing other children which has triggered section 47 enquiries should be included.

Children whose needs arise from being abandoned by their families in circumstances which trigger section 47 enquiries should be included.

### A1.3 Possible sub-categories to help define main category

- Physical abuse;
- Sexual abuse;
- Emotional abuse;
- Domestic abuse.

## A2. Child's disability or illness (code 'N2')

### A2.1 Definition

Children and their families whose main need for services arises because of the child's disability, illness, or intrinsic condition.

## **A2.2 Guide to inclusion or exclusion from this category**

This category encompasses children who are suffering impairment to their health and development as a result of their own intrinsic condition. The resulting needs require more support than is available through the capacity of their parent(s) or carer(s) and hence the need for children's social care services. These are likely to be provided in conjunction with other services, particularly health and education.

The use of the term disability in this category embraces any illness that causes the disability.

Although the majority of the children included in this category will be permanently disabled, this does not necessarily have to be the case. A child who requires children's social care services during the course of recovery from a disabling illness or whose prognosis is uncertain should be included here.

Most children whose needs fall within this category will have a medically diagnosed condition, such as cerebral palsy, autism, or Down's syndrome.

There are some conditions where it is uncertain or controversial to regard them as intrinsic to the child. This used to be the case with autism, but scientists now acknowledge that there is a significant genetic component to this condition. Currently, the cause of attention deficit hyperactive disorder (ADHD) is not fully understood. For the purposes of this collection, if the main reason why children's social care services are involved is because the child is thought to have this disorder, then it should be included here.

Children who have been diagnosed as suffering from a psychiatric illness should be included.

If there is no medical diagnosis, or if the diagnosis is clearly framed in terms of family functioning, then family dysfunction would be a more appropriate category.

Children with emotional and behavioural difficulties will present particular difficulties of classification. If there is a medically diagnosed condition attributed then the child should be included. Otherwise, family dysfunction should be used.

## **A2.3 Possible sub-categories to help define main category**

- children with physical disabilities;
- children with sensory disabilities;
- children with learning disabilities;
- children with emotional and behavioural difficulties;
- children with other mental health conditions.

## **A3. Parental disability or illness (code 'N3')**

### **A3.1 Definition**

Children whose main need for services arises because the capacity of their parent(s) (or carer(s)) to care for them is impaired by the parent(s) (or carer(s)) disability, physical or mental illness, or addictions.

### **A3.2 Guide to inclusion or exclusion from this category**

The key to inclusion in this category is that the parent(s) have a diagnosable medical condition which is primary in limiting their parenting capacity and there is insufficient or no compensatory help available other than via social services.

The parental medical conditions include seriously disabling mental illness. However, in the case of reactive depression episodes or anxiety accompanying acute family stress, the category, family in acute stress should be used.

Children who are in need because their parent or parents have learning disabilities that reduce their parenting capacity should be included.

This category should be used in cases where the need for services stems from parental alcoholism and drug taking which have been diagnosed as such by a doctor or specialist service.

The category also included the needs of young carers who take on caring responsibilities for a disabled or chronically ill parent(s).

In cases where children are in need because the parent(s) have a personality disorder, but there is doubt as to whether a clear medical condition exists, use the category family dysfunction.

### **A3.3 Possible sub-categories to help define main category**

- children whose parent(s) are diagnosed alcoholics;
- children whose parent(s) are diagnosed drug-takers;
- children with acutely ill parent(s) (short-term);
- children being cared for by parent(s) with learning disabilities;
- children being cared for by a chronically disabled parent or parents (mental or physical disability), but who are not taking responsibility for the parent(s);
- children assuming caring responsibility for chronically ill or disabled parent(s) (mental or physical).

## **A4. Family in acute stress (code 'N4')**

### **A4.1 Definition**

Children whose needs arise from living in a family that is going through a temporary crisis that diminishes the parental capacity to adequately meet some of the children's needs.

### **A4.2 Guide to inclusion or exclusion from this category**

This category encompasses families that are in difficulty but where the basic positive relationship between the parent(s) and their children is not in question.

This includes families where the parenting capacity is normally good enough but they face circumstances, factors, or events that undermine that capacity. This would include events such as:

- upheaval in family relationships;
- loss of employment;
- reduced income;
- adverse housing;
- loss of amenities important to the care of children;
- the death of a parent or other family member.

It includes the sporadic needs of children that arise out of living in socially isolated or poorly resourced communities.

It includes a single parent who generally manages fine but occasionally needs additional help.

It includes families that generally function adequately but have been rendered homeless.

It includes families that generally function adequately but face a temporary explosion from an adolescent member.

### **A4.3 Possible sub-categories to help define main category**

- homeless family;
- single parent;
- death of a parent or carer.

## **A5. Family dysfunction (code 'N5')**

### **A5.1 Definition**

Children whose needs primarily arise from living in a family where the parenting capacity is chronically inadequate.

### **A5.2 Guide to inclusion or exclusion from this category**

This category should not be chosen if the main reason for inadequate parenting capacity is parental illness or disability.

This category includes families where the low parenting capacity is at risk of, or actually is, impairing the child's health and development.

The category includes children who do not receive any of the following:

- basic care;
- consistent emotional warmth;
- adequate stimulation;
- adequate guidance and boundaries;
- a stable relationship with carers.

For inclusion in this category, parenting capacity must be a long-term concern and not just a reaction to adverse circumstance. This is a key factor distinguishing this category from family in acute stress.

Within this category there will be degrees of severity in the extent to which the parenting capacity is inadequate.

It will also include children whose safety is in concern because of family dysfunction, but for whom there is not yet hard enough evidence to invoke child protection measures. If a child is the subject of a child protection plan or section 47 enquiries then the abuse and neglect category must be chosen.

This category could include children who are abandoned because the parent(s) do/does not have the necessary parenting capacity to care for them.

### **A5.3 Possible sub-categories to help define main category**

- child's poor attachment to carer(s);
- low stimulation for child;
- erratic relationship between carers;
- chronic violence between carers;
- low control of child's boundaries of behaviour.

## **A6. Socially unacceptable behaviour (code 'N6')**

### **A6.1 Definition**

Children and families whose need for services primarily arise out of the child's behaviour impacting detrimentally on the community.

### **A6.2 Guide to inclusion or exclusion from this category**

This would include children who require services because they:

- actually offend;
- are considered to be at risk of offending;
- are below the age of criminal responsibility but would otherwise be breaking the law;
- are behaving in such a disorderly way that they cause alarm or disturb the peace.

This would also include another group of children who create concern within the community because they put themselves at unacceptable risk, for example, children who truant, or children who are sexually active.

This category would include the needs of children and young people being served by staff in a youth offending team (YOT) paid from the Social Services department budget.

This category also includes children who are receiving services as part of the Crime Reduction Strategy, either with or without YOT involvement. However, a referral made by a YOT for reasons that are not connected with the child's offending may indicate that another needs category is more applicable.

A defining factor for this category is that the child's behaviour pushes at the boundaries of community acceptance; it has gone beyond the family.

Children for whom the primary concern is that they are suspected to be, or actually are, sexually exploited should trigger child protection measures and be categorised under the abuse or neglect category.

### **A6.3 Possible sub-categories to help define main category**

- disorderly behaviour;
- offending;
- truancy;
- unsafe sexual behaviour;
- substance abuse.

## **A7. Low income (code 'N7')**

### **A7.1 Definition**

Children, living in families or independently, whose needs primarily arise from being dependent on an income below the standard state entitlements.

### **A7.2 Guide to inclusion or exclusion from this category**

This category is reserved for families or children whose special circumstances mean that their income is below the standard state entitlements.

It does not include people who are simply poor or who cannot manage on their entitlements.

It does include families who are asylum seekers and who do not have the means to provide adequately for their children.

It may include young people entering independence who, because of the rules relating to employment and training, are not eligible for full benefits and there is no other reason for contact with children's social care services.

### **A7.3 Possible sub-categories to help define main category**

- asylum-seeking families;
- non-habitually resident status;
- independent young people.

## **A8. Absent parenting (code 'N8')**

### **A8.1 Definition**

Children whose needs for services arise mainly from having no parent(s) available to provide for them.

### **A8.2 Guide to inclusion or exclusion from this category**

This category must not be used loosely for children looked after for whatever reason.

This category is reserved for the needs of children who simply do not have a source of parenting.

This category should be chosen for children whose birth parent(s) make a well-intentioned and rational decision that they cannot care for the child and that it is in the child's best interests to be adopted.



The category also includes:

- children whose needs arise because their parent(s) have died or are lost;
- children whose parent(s) have sent them away for good motives;
- children who have become separated from their parent(s) due to civil or natural disaster, or due to political events;
- children who are unaccompanied asylum seeking children (UASC).

The category could also include children who are in need simply because a parent has been imprisoned but the reason for imprisonment bears no relation to the child being in need.

### **A8.3 Possible sub-categories to help define main category**

- parent(s) die/s;
- unaccompanied asylum seeking children;
- separated from parent(s) by natural or civil disaster, or political events;
- private fostering.

## **A9. Cases other than children in need (code 'N9')**

### **A9.1 Definition**

Children who are receiving services but who are not strictly children in need.

This category must never be used because children do not appear to fit into other categories.

This code can be used if a child has been adopted and although no longer a child in need, receives adoption support from social services immediately after the adoption.

This is not to be used where a child only receives an adoption payment.

## **A10. Need code to stated (code 'N0')**

### **A10.1 Definition**

Children whose reference data is not completely entered on the system and whose need code is yet to be determined.

This category is to enable the loading of data where the need codes are not immediately to hand. It is assumed that this will only apply to children who are supported in their

families or who are independent; as looked after children will have had a need code allocated.

The number of children in this category should be kept to a minimum.

## Appendix B: codesets

### B1. Gender

Code	Description
1	Male
2	Female
0	Not recorded or unborn at 31 March 2021
9	Indeterminate gender (unable to be classed as either male or female)

### B2. Ethnicity

Code	Description
White	
WBRI	White British
WIRI	White Irish
WIRT	Traveller of Irish heritage
WOTH	Any other White background
WROM	Gypsy/Roma
Mixed	
MWBC	White and Black Caribbean
MWBA	White and Black African
MWAS	White and Asian
MOTH	Any other mixed background
Asian or Asian British	
AIND	Indian
APKN	Pakistani
ABAN	Bangladeshi
AOTH	Any other Asian background
Black or black British	
BCRB	Caribbean
BAFR	African
BOTH	Any other black background

Code	Description
Other ethnic groups	
CHNE	Chinese
OOOTH	Any other ethnic group
REFU	Refused
NOBT	Information not yet obtained

### B3. Disability

Code	Description
NONE	'NO DISABILITY'.
MOB	'MOBILITY' – getting about the house and beyond.
HAND	'HAND FUNCTION' – holding and touching.
PC	'PERSONAL CARE' – For example eating, washing, going to the toilet, dressing.
INC	'INCONTINENCE' – controlling the passage of urine or faeces.
COMM	'COMMUNICATION' – speaking and/or understanding others.
LD	'LEARNING' – For example having special educational needs.
HEAR	'HEARING'.
VIS	'VISION'.
BEH	'BEHAVIOUR' – a condition entailing behavioural difficulties, includes attention deficit hyperactivity disorder (ADHD).
CON	'CONCIOUSNESS' – seizures.
AUT	'DIAGNOSED WITH AUTISM OR ASPERGER SYNDROME' – diagnosed by a qualified medical practitioner as having classical autism or Asperger syndrome.  Do not include children who have merely been identified as having an autistic spectrum disorder (ASD), for example, by their school. This can be associated with the behaviour and learning categories above.
DDA	OTHER DDA – one or more of the child's disabilities under the Disability Discrimination Act 2005 does not fall into any of the above categories.

### B4. Source of referral

Code	Description
1A	'INDIVIDUAL' – family member, relative or carer.

Code	Description
1B	'INDIVIDUAL' – acquaintance (including neighbours and child minders).
1C	'INDIVIDUAL' – self.
1D	'INDIVIDUAL' – other (including strangers or Members of Parliament (MPs)).
2A	'SCHOOLS'.
2B	'EDUCATION SERVICES'.
3A	'HEALTH SERVICES' – general practitioner (GP).
3B	'HEALTH SERVICES' – health visitor.
3C	'HEALTH SERVICES' – school nurse.
3D	'HEALTH SERVICES' – other primary health services.
3E	'HEALTH SERVICES' – A&E (accident and emergency department).
3F	'HEALTH SERVICES' – other (for example hospice).
4	'HOUSING' - local authority housing or housing association.
5A	'LA SERVICES' – social care for example adults social care services.
5B	'LA SERVICES' – other internal (department other than social care in local authorities, for example, youth offending (excluding housing)).
5C	'LA SERVICES' – external, for example, from another local authority's adults social care services.
6	'POLICE'.
7	'OTHER LEGAL AGENCY' – including courts, probation, immigration, CAFCASS (Children and Family Court Advisory and Support Service) or prison.
8	'OTHER' – including children's centres, independent agency providers or voluntary organisations.
9	'ANONYMOUS'.
10	'UNKNOWN'.

## B5. Primary need code

Code	Description
N1	Abuse or neglect - children in need as a result of, or at risk of, abuse or neglect; also includes children at risk because of domestic violence.
N2	Child's disability - children and families whose main need for services arises because of their child's disability, illness or intrinsic condition.
N3	Parental disability or illness - children whose main need for services arises because the capacity of their parent(s) (or carer(s)) to care for them is impaired by the parent's (or carer's) disability, physical or mental illness, or addictions.

Code	Description
N4	Family in acute stress - children whose needs arise from living in a family that is going through a temporary crisis that diminishes the parental capacity to adequately meet some of the children's needs.
N5	Family dysfunction - children whose needs primarily arise from living in a family where the parenting capacity is chronically inadequate.
N6	Socially unacceptable behaviour - children and families whose need for services primarily arise out of the child's behaviour impacting detrimentally on the community.
N7	Low income - children, living in families or independently, whose needs primarily arise from being dependent on an income below the standard state entitlements.
N8	Absent parenting - children whose needs for services arise mainly from having no parents available to provide for them.
N9	Cases other than children in need - children who have been adopted and, although they are no longer a child in need, receive adoption support from social services immediately after adoption. This should not be used where a child receives an adoption payment only as these children should not be included in the census.
N0	Not stated - children whose reference data is not completely entered on the system and whose need code is yet to be determined, or, the case is a referral that has been closed following assessment.

## B6. Reason for closure

Code	Description
RC1	Adopted.
RC2	Died.
RC3	Child arrangements order.
RC4	Special guardianship order.
RC5	Transferred to services of another local authority.
RC6	Transferred to adult social care services.
RC7	Services ceased for any other reason, including child no longer in need.
RC8	Case closed after assessment, no further action.

## B7. Factors identified at the end of assessment

Code	Description
1A	Alcohol misuse: concerns about alcohol misuse by the child.
1B	Alcohol misuse: concerns about alcohol misuse by the parent(s) or carer(s).

<b>Code</b>	<b>Description</b>
1C	Alcohol misuse: concerns about alcohol misuse by another person living in the household.
2A	Drug misuse: concerns about drug misuse by the child.
2B	Drug misuse: concerns about drug misuse by the parent(s) or carer(s).
2C	Drug misuse: concerns about drug misuse by another person living in the household.
3A	Domestic violence: concerns about the child being the subject of domestic violence.
3B	Domestic violence: concerns about the child's parent(s) or carer(s) being the subject of domestic violence.
3C	Domestic violence: concerns about another person living in the household being the subject of domestic violence.
4A	Mental health: concerns about the mental health of the child.
4B	Mental health: concerns about the mental health of the parent(s) or carer(s).
4C	Mental health: concerns about the mental health of another person in the family/household.
5A	Learning disability: concerns about the child's learning disability.
5B	Learning disability: concerns about the parent(s) or carer(s) learning disability.
5C	Learning disability: concerns about another person in the family/household's learning disability.
6A	Physical disability or illness: concerns about a physical disability or illness of the child.
6B	Physical disability or illness: concerns about a physical disability or illness of the parent(s) or carer(s).
6C	Physical disability or illness: concerns about a physical disability or illness of another person in the family/household.
7A	Young carer: concerns that services may be required or the child's health or development may be impaired due to their caring responsibilities.
8B	Privately fostered: concerns that services may be required or the child may be at risk as a privately fostered child - overseas children who intend to return
8C	Privately fostered: concerns that services may be required or the child may be at risk as a privately fostered child - overseas children who intend to stay
8D	Privately fostered: concerns that services may be required or the child may be at risk as a privately fostered child - UK children in educational placements

<b>Code</b>	<b>Description</b>
8E	Privately fostered: concerns that services may be required or the child may be at risk as a privately fostered child - UK children making alternative family arrangements
8F	Privately fostered: concerns that services may be required or the child may be at risk as a privately fostered child - other
9A	UASC: concerns that services may be required or the child may be at risk of harm as an unaccompanied asylum-seeking child.
10A	Missing: concerns that services may be required or the child may be at risk of harm due to going/being missing.
11A	Child sexual exploitation: concerns that services may be required or the child may be at risk of harm due to child sexual exploitation.
12A	Trafficking: concerns that services may be required or the child may be at risk of harm due to trafficking.
13A	Gangs: concerns that services may be required or the child may be at risk of harm because of involvement in/with gangs.
14A	Socially unacceptable behaviour: concerns that services may be required or the child may be at risk due to their socially unacceptable behaviour.
15A	Self-harm: concerns that services may be required or due to suspected/actual self-harming child may be at risk of harm.
16A	Abuse or neglect – ‘NEGLECT’: concerns that services may be required or the child may be suffering or likely to suffer significant harm due to abuse or neglect.
17A	Abuse or neglect – ‘EMOTIONAL ABUSE’: concerns that services may be required or the child may be suffering or likely to suffer significant harm due to abuse or neglect.
18B	Abuse or neglect – ‘PHYSICAL ABUSE’: concerns that services may be required or the child may be suffering or likely to suffer significant harm due to abuse or neglect by another child.
18C	Abuse or neglect – ‘PHYSICAL ABUSE’: concerns that services may be required or the child may be suffering or likely to suffer significant harm due to abuse or neglect by an adult.
19B	Abuse or neglect – ‘SEXUAL ABUSE’: concerns that services may be required or the child may be suffering or likely to suffer significant harm due to abuse or neglect by another child.
19C	Abuse or neglect – ‘SEXUAL ABUSE’: concerns that services may be required or the child may be suffering or likely to suffer significant harm due to abuse or neglect by an adult.
20	Other.
21	No factors identified - only use this if there is no evidence of any of the factors above and no further action is being taken.
22A	Female genital mutilation (FGM) - concerns that services may be required or the child may be at risk due to female genital mutilation.



<b>Code</b>	<b>Description</b>
23A	Abuse linked to faith or belief - concerns that services may be required or the child may be at risk due to abuse linked to faith or belief.

## **B8. Child protection plan – initial and latest category of abuse**

<b>Code</b>	<b>Description</b>
NEG	Neglect
PHY	Physical abuse
SAB	Sexual abuse
EMO	Emotional abuse
MUL	Multiple/not recommended

## Appendix C: Further definitions of factors identified at assessment

### Codes 1A-1C: Alcohol misuse

The primary concern therefore is not the amount of alcohol consumed, but how it impacts on the individual and on their role as a parent. There are three main types of alcohol misuse which are defined as:

1. Hazardous drinking – a person drinks over the recommended weekly limit of alcohol
2. Harmful drinking – a person drinks over the recommended weekly limit of alcohol and experiences health problems directly related to alcohol
3. Dependent drinking – a person feels they are unable to function without alcohol, and consumption of alcohol becomes an important, sometimes the most important, factor in their life.

### Codes 2A-2C: Drug misuse

Drug misuse is defined as intoxication by or regular excessive consumption of and/or dependence on psychoactive substances, leading to social, psychological, physical or legal problems. It includes problematic use of both legal and illegal drugs (including alcohol when used in combination with other substances).

### Codes 3A-3C: Domestic violence

Domestic Violence has been defined by the Home Office as:

“any incident of threatening behaviour, violence or abuse psychological, physical, sexual, financial or emotional between adults who are or have been intimate partners or family members, regardless of gender or sexuality.”

Note: This definition is under consideration following consultation. The definition is not restricted to behaviour that is inherently violent so some people prefer the term domestic abuse.

The Home Office recommended source of guidance on domestic abuse is '[ACPO: Guidance on Investigating Domestic Abuse](#)'. This guidance provides the police service with detailed information relating to the investigation and policing of domestic abuse cases.

## **Codes 4A-4C: Mental health disorder**

The Mental Health Act 2007 defines mental disorder as any disorder or disability of the mind. This process is broad, capturing where there are concerns about mental health that are not categorised as a disorder or disability.

## **Codes 5A-5C: Learning disability**

The Department of Health's definition of learning disability encompasses people with a broad range of disabilities.

Learning disability includes the presence of:

- a significantly reduced ability to understand new or complex information, to learn new skills (impaired intelligence); with
- a reduce ability to cope independently (impaired social functioning);
- which started before adulthood, with a lasting effect on development.

## **Codes 6A-6C: Physical disability or illness**

This is to record where there are concerns about the impairment to the child's health or development due to their physical disability or illness; or concerns about the capacity of a parent to respond to the child's needs because of the parent's physical disability or illness. Please include where the concern is a result of physical or sensory disability or [acute] illness.

Some of the information about the child's disability will already be captured. In addition, there may be overlap between recording a physical disability or which impacts on parenting capacity and means support is needed and the child being a young carer.

## **Code 7A: Young carers**

Young carers are children and young persons under 18 who provide or intend to provide care assistance or support to another family member. They carry out on a regular basis, significant or substantial caring tasks and assume a level of responsibility, which would usually be associated with an adult. The person receiving care is often a parent but can be a sibling, grandparent or other relative who is disabled, has some chronic illness, mental health problem or other condition connected with a need for care support or supervision.

## Code 8B-8F: Private fostering

Private fostering occurs when a child under the age of 16 (under 18, if disabled) is provided with care and accommodation by a person who is not a parent, person with parental responsibility for them or a relative in their own home. A child is not privately fostered if the person caring for and accommodating them has done so for less than 28 days and does not intend to do so for longer.

Private foster carers may be from the extended family, such as a cousin or great aunt. However, a person who is a relative under the Children Act 1989 i.e. a grandparent, brother, sister, uncle or aunt (whether of the full or half blood or by marriage) or step-parent will not be a private foster carer.

## Code 9A: Unaccompanied asylum seeker

These are children who are separated from their country of origin who are without the care and protection of their parents or legal guardian. In most cases unaccompanied asylum seekers (UASC) will be referred to local authorities by UK Visas and Immigration (UKVI) shortly after they arrive in the United Kingdom.

## Code 10A: Missing children

Children and young people up to the age of 18 who have run away from their home or care placement, have been forced to leave, or whose whereabouts is unknown. More information is available in the [statutory guidance on children who run away and go missing from home or care](#).

## Code 11A: Child sexual exploitation

The February 2017 non-statutory guidance [Child sexual exploitation: definition and guide for practitioners](#) sets out the definition of child sexual exploitation as follows:

*Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.*

Like all forms of child sexual abuse, child sexual exploitation:

- can affect any child or young person (male or female) under the age of 18 years, including 16 and 17 year olds who can legally consent to have sex;

- can still be abuse even if the sexual activity appears consensual;
- can include both contact (penetrative and non-penetrative acts) and non-contact sexual activity;
- can take place in person or via technology, or a combination of both;
- can involve force and/or enticement-based methods of compliance and may, or may not, be accompanied by violence or threats of violence;
- may occur without the child or young person’s immediate knowledge (through others copying videos or images they have created and posting on social media, for example);
- can be perpetrated by individuals or groups, males or females, and children or adults. The abuse can be a one-off occurrence or a series of incidents over time, and range from opportunistic to complex organised abuse; and
- is typified by some form of power imbalance in favour of those perpetrating the abuse. Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, sexual identity, cognitive ability, physical strength, status, and access to economic or other resources.

## Code 12A: Trafficking

The United Nations Convention Against Transnational Organised Crime to the UN Convention (the ‘Palermo Protocol’) defines trafficking as

*“the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs.”*

Any child transported for exploitative reasons is considered to be a trafficking victim, whether or not they have been forced or deceived.

## Code 13A: Gangs

Being part of a friendship group is a normal part of growing up and it can be common for groups of children and young people to gather together in public places to socialise. Belonging to such a group can form a positive and normal part of young people’s growth and development. These groups should be distinguished from ‘street gangs’ for whom

crime and violence are a core part of their identity, although 'delinquent peer groups' can also lead to increased antisocial behaviour and youth offending. Although some group gatherings can lead to increased antisocial behaviour and youth offending, these activities should not be confused with the serious violence of a gang.

## **Code 14A: Socially unacceptable behaviour**

Children and families whose need for services primarily arise out of the child's behaviour impacting detrimentally on the community.

This would include children who require services because they:

- actually offend
- are considered to be at risk of offending
- are below the age of criminal responsibility but would otherwise be breaking the law
- are behaving in such a disorderly way that they cause alarm or disturb the peace.

This would also include another group of children who create concern within the community because they put themselves at unacceptable risk. This category would include the needs of children and young people being served by staff in a Youth Offending Team (YOT) paid from the Social Services Department budget.

This category also includes children who are receiving services as part of the Crime Reduction Strategy, either with or without YOT involvement. However, a referral made by a YOT for reasons that are not connected with the child's offending may indicate that another needs category is more applicable.

A defining factor for this category is that the child's behaviour "pushes at the boundaries" of community acceptance; it has gone beyond the family.

## **Code 15A: Self-harm**

Self-harm is defined as self-poisoning or self-injury, irrespective of the apparent purpose of the act. Self-harm is an expression of personal distress, not an illness, and there are many varied reasons for a person to harm him or herself.

## **Codes 16A – 19C: Abuse or neglect**

These are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm or which in itself harms a child.

Children may be abused in a family or in an institutional or community setting, by those

known to them or, more rarely, by a stranger for example, via the internet. They may be abused by an adult or adults, or another child or children.

### **Neglect (code 16A)**

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- protect a child from physical and emotional harm or danger
- ensure adequate supervision (including the use of inadequate caregivers); or
- ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

### **Emotional abuse (code 17A)**

Emotional abuse is the persistent ill-treatment of a child that causes severe and continual adverse effects on the child's emotional development. It may involve conveying to the child that they are inadequate; worthless or unloved; or valued only as far as they meet the needs of another person. It may feature the imposing of age- or developmentally inappropriate expectations on the child. Such expectations may include interactions that are beyond the child's developmental capability. It includes overprotection and limitation of exploration and learning, or preventing the child from participating in normal social interactions. It may involve the child seeing or hearing the ill-treatment of others. It may also involve serious bullying; causing children to frequently feel frightened or in danger; or the exploitation and corruption of children. Some level of emotional abuse is implied in all types of ill-treatment of a child, although it may occur on its own. Use this category when it is the main or sole form of abuse.

### **Physical abuse (codes 18B and 18C)**

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer, or another child, fabricates the symptoms of, or deliberately induces, illness in a child. Child on child (code 18B) physical abuse involves a person, or group of persons under the age of 18 physically abusing another person under the age of 18. Adult on child physical abuse (code 18C) involves a person aged 18 or over physically abusing a person under 18.

## Sexual abuse (codes 19B and 19C)

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. Child on child (code 19B) sexual abuse involves a person, or group of persons under the age of 18 sexually abusing another person or persons under the age of 18. Adult on child sexual abuse (code 19C) involves a person aged 18 or over sexually abusing a person under 18.

## Code 22A: Female genital mutilation (FGM)

FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons.

FGM has been classified by the World Health Organization into four types:

- Type 1 – Clitoridectomy: partial or total removal of the clitoris (a small, sensitive and erectile part of the female genitals) and, in very rare cases, only the prepuce (the fold of skin surrounding the clitoris).
- Type 2 – Excision: partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora (the labia are the ‘lips’ that surround the vagina).
- Type 3 – Infibulation: narrowing of the vaginal opening through the creation of a covering seal. The seal is formed by cutting and repositioning the inner, or outer, labia, with or without removal of the clitoris.
- Type 4 – Other: all other harmful procedures to the female genitalia for non-medical purposes, e.g. pricking, piercing, incising, scraping and cauterising the genital area.

These types are for information only and the type of FGM does not need to be recorded.

The FGM factor should be reported when it is known or suspected that a girl has been subjected to FGM, or is perceived to be at risk of FGM. With regard to ‘at risk’, it should only be recorded if the girl herself is perceived to be at risk, not if the only ‘risk factor’ is that her family are from a ‘practising community’.



## Code 23A: Abuse linked to faith or belief

The abuse concerned may be of any form: physical (including excessive physical discipline), sexual, emotional, neglect (including the denial of necessary medical treatment), domestic slavery, sexual exploitation.

This factor should be recorded when a child is perceived to be subject to, or at risk of abuse because of his or her parents or carers' belief system. This includes, but is not limited to, belief in witchcraft, spirit possession, demons or the devil, the evil eye or djinns, dakini, kindoki, ritual or muti murders and use of fear of the supernatural.

The beliefs involved are not confined to one faith, nationality or ethnic community.

The following should be seen as out of scope for the recording of this factor:

- cultural practices that are in themselves a specific form of abuse, for example female genital mutilation or forced marriage;
- child abuse in faith settings which are incidental to the abuse, for example, sexual abuse by paedophiles in a religious community.

## Appendix D: local authority codes

Code	Local authority	Code	Local authority	Code	Local authority
201	City of London	355	Salford	855	Leicestershire
202	Camden	356	Stockport	856	Leicester
203	Greenwich	357	Tameside	857	Rutland
204	Hackney	358	Trafford	860	Staffordshire
205	Hammersmith and Fulham	359	Wigan	861	Stoke-on-Trent
206	Islington	370	Barnsley	865	Wiltshire
207	Kensington and Chelsea	371	Doncaster	866	Swindon
208	Lambeth	372	Rotherham	867	Bracknell Forest
209	Lewisham	373	Sheffield	868	Windsor and Maidenhead
210	Southwark	380	Bradford	869	West Berkshire
211	Tower Hamlets	381	Calderdale	870	Reading
212	Wandsworth	382	Kirklees	871	Slough
213	Westminster	383	Leeds	872	Wokingham
301	Barking and Dagenham	384	Wakefield	873	Cambridgeshire
302	Barnet	390	Gateshead	874	Peterborough
303	Bexley	391	Newcastle upon Tyne	876	Halton
304	Brent	392	North Tyneside	877	Warrington
305	Bromley	393	South Tyneside	878	Devon
306	Croydon	394	Sunderland	879	Plymouth
307	Ealing	420	Isles of Scilly	880	Torbay
308	Enfield	800	Bath and North East Somerset	881	Essex
309	Haringey	801	Bristol, City of	882	Southend-on-Sea
310	Harrow	802	North Somerset	883	Thurrock
311	Havering	803	South Gloucestershire	884	Herefordshire
312	Hillingdon	805	Hartlepool	885	Worcestershire
313	Hounslow	806	Middlesbrough	886	Kent

<b>Code</b>	<b>Local authority</b>	<b>Code</b>	<b>Local authority</b>	<b>Code</b>	<b>Local authority</b>
314	Kingston upon Thames	807	Redcar and Cleveland	887	Medway
315	Merton	808	Stockton-on-Tees	888	Lancashire
316	Newham	810	Kingston Upon Hull, City of	889	Blackburn with Darwen
317	Redbridge	811	East Riding of Yorkshire	890	Blackpool
318	Richmond upon Thames	812	North East Lincolnshire	891	Nottinghamshire
319	Sutton	813	North Lincolnshire	892	Nottingham
320	Waltham Forest	815	North Yorkshire	893	Shropshire
330	Birmingham	816	York	894	Telford and Wrekin
331	Coventry	821	Luton	895	Cheshire East
332	Dudley	822	Bedford Borough	896	Cheshire West and Chester
333	Sandwell	823	Central Bedfordshire	908	Cornwall
334	Solihull	825	Buckinghamshire	909	Cumbria
335	Walsall	826	Milton Keynes	916	Gloucestershire
336	Wolverhampton	830	Derbyshire	919	Hertfordshire
340	Knowsley	831	Derby	921	Isle of Wight
341	Liverpool	838	Dorset	925	Lincolnshire
342	St Helens	839	Bournemouth, Christchurch and Poole	926	Norfolk
343	Sefton	840	Durham	928	Northamptonshire
344	Wirral	841	Darlington	929	Northumberland
350	Bolton	845	East Sussex	931	Oxfordshire
351	Bury	846	Brighton and Hove	933	Somerset
352	Manchester	850	Hampshire	935	Suffolk
353	Oldham	851	Portsmouth	936	Surrey
354	Rochdale	852	Southampton	937	Warwickshire
				938	West Sussex



Department  
for Education

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