



## Multi-agency Protocol for the Resolution of Professional Differences

### THE MID AND WEST WALES SAFEGUARDING BOARD

| Version | Revision Date | Owner   | Date approved by Exec Board    | Review Date |
|---------|---------------|---|--------------------------------|-------------|
| V1      | April 2012    | Dyfed-Powys Safeguarding Children Forum                                   | Approved by all regional LSCBs | April 2013  |
| V2      | December 2017 | Mid and West Wales Safeguarding Board (Policies and Procedures Sub-Group) | 19 <sup>th</sup> April 2018    | April 2020  |
| V3      | October 2022  | Mid and West Wales Safeguarding Board (Policies and Procedures Sub-Group) |                                |             |

# **Multi-Agency Safeguarding Protocol for the Resolution of Professional Differences**

## **1. Introduction**

1.1 Regional Safeguarding Boards operate under Part 7 of The Social Services and Wellbeing (Wales) Act 2014. Key functions and principles are to protect children and adults in their area who may be experiencing or at risk of abuse, neglect and other kinds of harm and; to prevent children and adults in their area from becoming at risk of abuse, neglect and other kinds of harm.

This requires professionals and agencies to work together collaboratively and in partnership via the various arrangements that are in place under the Mid & West Wales Safeguarding Board's Structure (Appendix A). The Mid and West Wales region has a strong history of multi-agency partnership working. It is inevitable that on occasions professional differences will occur within the context of complex safeguarding work.

1.2 Each agency working with children and adults at risk has an important contribution to make towards safeguarding and promoting wellbeing and good outcomes in accordance with their roles and responsibilities. All individual practitioners or staff members are required to work cooperatively within the context of relevant legislation, which includes the Social Services and Wellbeing (Wales) Act 2014, the 1989 Children Act, as well as the Wales Safeguarding Procedures.

The CYSUR Regional Thresholds & Eligibility for Support document for Children 'The Right Help At The Right Time and the CWMPAS Regional Adult Safeguarding Threshold Guidance Document will help establish consistent thresholds in respect of safeguarding practice for children and adults across the Mid and West Wales region and help alleviate any professional/and/or practitioner differences that may occur in respect of thresholds.

1.3 However, when professional differences occur that cannot be resolved informally, it is essential that all individual practitioners and/ or staff members are able to constructively and critically challenge the practice and decisions of others. Managers are therefore responsible for ensuring that their staff are supported when they want to report concerns and disagreements within their own organisation and/or between agencies.

1.4 The Resolution of Professional Differences Protocol does not replace Wales Safeguarding Procedures and is separate and distinct from whistle blowing arrangements within agencies.

## **2. Principles for Managing Professional Differences**

2.1 Some common reasons for professional disagreements within a safeguarding context include:

- *Criteria for referrals*
- *Outcome of assessments*
- *Roles and responsibilities of workers*

- *Service provision*
- *Timeliness of intervention*
- *Information sharing and communication*
- *Practice case/management issues.*
- *Thresholds*

2.2 Professional differences of opinion should always be resolved in a constructive and time limited manner. It is therefore necessary for all parties to ensure that the resolution process does not adversely affect a child or adult's circumstances. It is important to note this protocol encourages any professional differences that are identified to be resolved via discussion and resolution wherever possible as opposed to unnecessary escalation

### 3. Process for Resolution

3.1 The dispute resolution must be achieved within the following three stages.

#### **Stage 1:**

3.2 The practitioners and/ or staff members should initially attempt to resolve the differences together through discussion and/or a meeting. The practitioner and/ or staff member should put their concerns in writing to the individual with whom they have the professional difference, and ask to discuss/meet within 5 working days, or within a timescale that ensures the child or adult is safeguarded from harm, whichever is less. The practitioners/and/or staff members will seek to resolve their differences and work towards a mutually acceptable solution.

3.3 All parties should keep a written record of the disagreement and the agreed resolution, which is signed by both parties and maintained within the child/adult's case file held by the respective agencies. A record of the disagreement and agreed resolution should be communicated to the local safeguarding lead via email.

3.4 If the professional difference has arisen because of a lack of clarity about a procedure or the absence of a procedure, internal processes are to be followed. Within 10 working days of resolution, the issue should also be referred to the individual organisation's representative on the Regional Policies & Procedures Sub Group who will highlight the matter to the Board Business Unit for consideration by the Sub Group.

#### **Stage 2:**

3.6 If the matter is not resolved at Stage 1 or within 10 working days, the individual practitioner and/ or staff members should bring the matter to the attention of their line managers, or appropriate manager within their organisation, who should have a discussion with relevant parties and/or convene a meeting.

3.7 It is the responsibility of each respective manager to access and review any relevant information in advance of the meeting, and arrange a discussion with the relevant

practitioner/and/or staff member. A record of the disagreement and agreed resolution should be made and communicated to the LOG Chair via email.

3.8 The following steps are required:

- Recognition and acknowledgement that there is a disagreement about a significant safeguarding issue;
- Identification and clarity about the nature of the disagreement and the desired outcome of both parties;
- Acknowledgment of any agreed outcome and the identification of any continuing concerns expressed by either party.

3.9 There should be a written record of all discussions/meetings/consultations. This must include written confirmation about agreed outcomes and in the event of continuing unresolved matters how they will be addressed.

### **Stage 3:**

3.10 In exceptional circumstances, when individual professionals or staff members are unable to resolve their differences in Stage 2, the matter must be reviewed by an agency senior manager within 10 working days of the completion of Stage 2, or within a timescale that protects the child or adult from harm, whichever is sooner. The Statutory Director/Agency Senior Strategic Lead and Chair of the relevant Safeguarding Board (CYSUR/CWMPAS) will be sighted on any dispute that reaches Stage 3 and the outcome, which will be shared with the Executive Board.

3.11 The managers in Stage 2 will discuss the issue with the Senior Operational Manager who will brief the Head of Service (or Agency Equivalent). The Head of Service (or Agency Equivalent) will decide the appropriate Senior Management level at which the matter should be reviewed based on the nature and seriousness of the dispute.

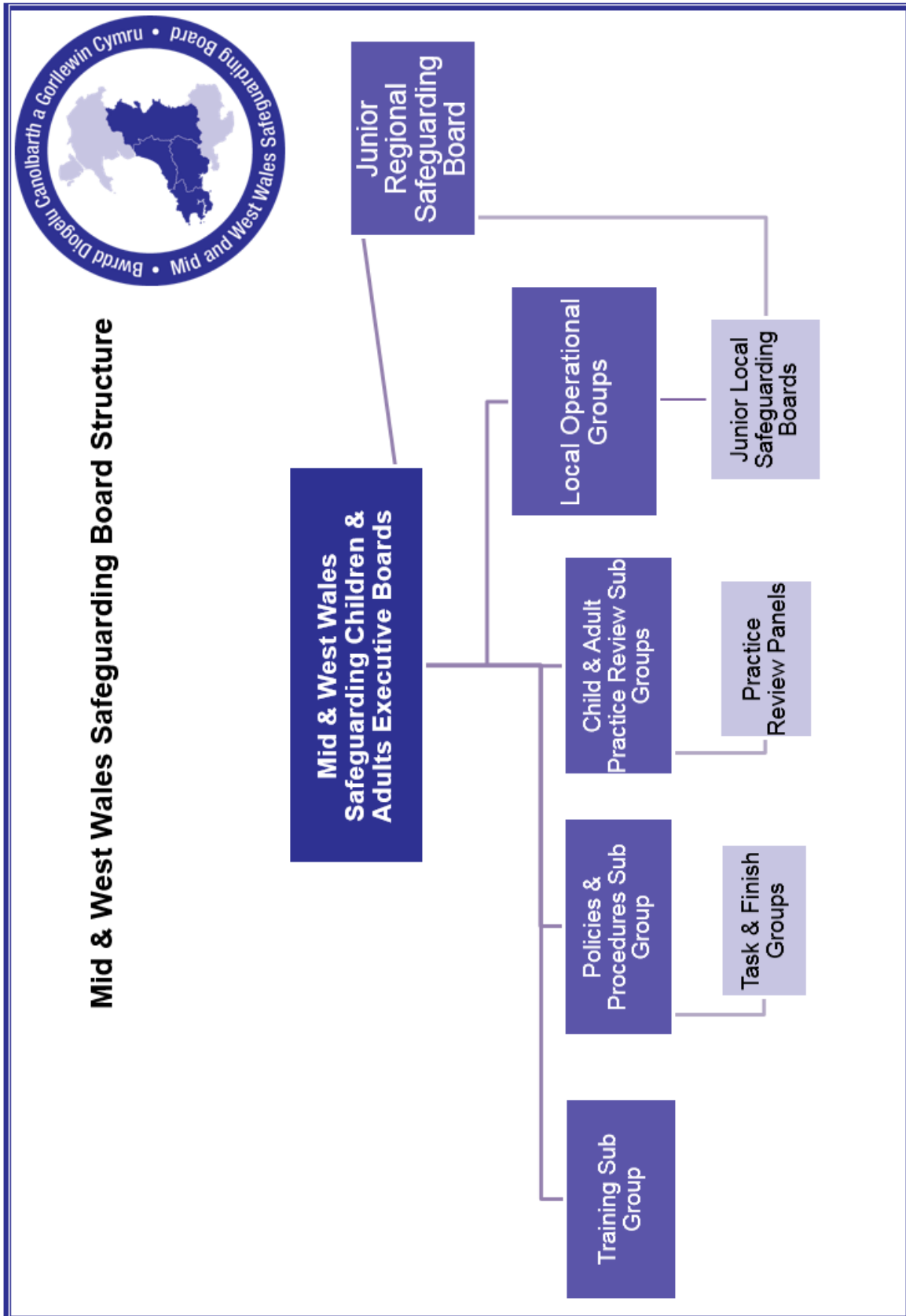
3.12 The Designated Senior Manager will arrange a meeting and contact the relevant individual professionals or staff members. The meeting will be arranged and conducted in the following way:

- The senior managers will agree an attendance list, which may include the managers or designated staff with responsibility for safeguarding children/adults in the respective agencies;
- The identified lead agency senior manager will chair the meeting and provide administrative support;
- The senior managers conducting the meeting will have access to appropriate records and have the discretion to instigate an internal management review within their own agency if they consider this appropriate;
- The meeting will decide on an outcome of the dispute and record this; and
- All parties should accept the outcome of the dispute resolution meeting.

#### 4. Monitoring and Quality Assurance

4.1 The Regional Safeguarding Board will monitor, periodically review and audit the number of cases in which the dispute resolution protocol has been instigated as part of its quality assurance/performance framework. This will help identify any particular themes and trends within a regional context. Local Operational Groups are required, as part of their quarterly data set, to capture and record this information and report it to the Executive Board.

**Appendix A**



**Appendix B**

**Dispute Resolution Process Flowchart**

