



Department
for Education

Children in need census 2025 to 2026

**Guide for local authorities – version 1.1
October 2025**

Contents

Contents	2
Legislation	7
Contact details.....	7
Other children in need census documents	7
Data protection and data sharing	8
Legal duties under the UK General Data Protection Regulation and Data Protection Act 2018: privacy notices	8
Legal duties under the UK General Data Protection Regulation and Data Protection Act 2018: data security.....	9
Version history.....	9
1. Introduction	10
1.0 Summary of main changes for 2025 to 2026	10
1.1 Background	10
1.2 Scope	10
1.2.1 Children who are referred to children's social care services	10
1.2.2 Children who were referred but with no further action.....	12
1.2.3 Cases that were open between 1 April 2025 and 31 March 2026	12
1.2.4 Children awaiting services, children that are the subject of statutory orders and privately fostered children.....	13
1.2.5 Disabled children	13
1.2.6 Children from another local authority.....	13
1.2.7 Adopted children	14
1.2.8 Formerly looked after children.....	14
1.3 Rationale	14
1.4 Benefits of the children in need census to local authorities	15
1.5 Data structure	16
1.6 Children in need census data modules	16
1.7 Multiple entries of some types of data.....	18
1.7.1 Technical note	18
1.8 Submission.....	18
1.9 Validation checks.....	19

1.10	Year on year checks	20
1.11	General notes	20
1.11.1	Date fields.....	20
1.11.2	True/false fields.....	20
2.	Data module 1: child identifiers	21
2.1	'LA child ID'	21
2.2	Unique pupil number (UPN)	21
2.2.1	UPNs for children educated outside of a local authority	23
2.3	Pupil's former UPN	23
2.4	UPN unknown reason.....	23
2.5	Date of birth	24
2.6	Expected date of birth.....	24
2.7	Sex	24
2.8	Date of death	25
3.	Data module 2: child characteristics	26
3.1	Child ethnicity	26
3.2	Type of disability	27
4.	Data module 3: children in need	29
4.1	Information required for referrals.....	29
4.1.1	Information required for transfer in cases	30
4.2	Referral date.....	31
4.3	Referral no further action	31
4.4	Source of referral	32
4.5	Primary need code.....	33
4.6	'CIN' closure date	35
4.6.1	Children in need closure in the case of adoption	35
4.6.2	Children in need closure in the case of death.....	35
4.7	Reason for closure	36
4.7.1	'RC8 - case closed after assessment, no further action' and 'RC9 - case closed after assessment, referred to early help'	37
4.8	Date of initial child protection conference.....	37

4.9 Assessments group	37
4.9.1 Assessment actual start date	38
4.9.2 Assessment internal review point date (optional).....	38
4.9.3 Assessment authorisation date	39
4.10 Factors identified at the end of assessment	39
4.11 CIN Plan dates group.....	43
4.12 Section 47 enquiries group	44
4.12.1 Section 47 enquiry start date	45
4.12.2 Target date for initial child protection conference (optional)	45
4.12.3 Date of initial child protection conference	45
4.12.4 Initial child protection conference not required	46
5. Data module 4: child protection plans	47
5.1 Child protection plan start date	47
5.2 Initial and latest category of abuse	47
Neglect	48
Physical abuse	48
Sexual abuse	48
Emotional abuse	49
Multiple/not recommended	49
5.4 Number of previous child protection plans	49
5.5 Plan review date	49
5.5.1 Dates of plan reviews held in 2024 to 2025	49
5.6 Child protection plan end date	50
Appendix A: definitions and guidance for primary need codes (see section 4.5)	51
A1. Abuse, neglect and exploitation (code 'N1')	51
A1.1 Definition.....	51
A1.2 Guide to inclusion or exclusion from this category	51
A1.3 Possible sub-categories to help define main category.....	51
A2. Child's disability or illness (code 'N2').....	51
A2.1 Definition.....	51

A2.2 Guide to inclusion or exclusion from this category	52
A2.3 Possible sub-categories to help define main category.....	52
A3. Parental disability or illness (code 'N3')	53
A3.1 Definition.....	53
A3.2 Guide to inclusion or exclusion from this category	53
A3.3 Possible sub-categories to help define main category.....	53
A4. Family in acute stress (code 'N4').....	54
A4.1 Definition.....	54
A4.2 Guide to inclusion or exclusion from this category	54
A4.3 Possible sub-categories to help define main category.....	54
A5. Family dysfunction (code 'N5')	55
A5.1 Definition.....	55
A5.2 Guide to inclusion or exclusion from this category	55
A5.3 Possible sub-categories to help define main category.....	55
A6. Socially unacceptable behaviour (code 'N6')	56
A6.1 Definition.....	56
A6.2 Guide to inclusion or exclusion from this category	56
A6.3 Possible sub-categories to help define main category.....	56
A7. Low income (code 'N7')	57
A7.1 Definition.....	57
A7.2 Guide to inclusion or exclusion from this category	57
A7.3 Possible sub-categories to help define main category.....	57
A8. Absent parenting (code 'N8').....	57
A8.1 Definition.....	57
A8.2 Guide to inclusion or exclusion from this category	57
A8.3 Possible sub-categories to help define main category.....	58
A9. Cases other than children in need (code 'N9').....	58
A9.1 Definition.....	58
A10. Need code to stated (code 'N0')	58
A10.1 Definition.....	58

Appendix B: Additional guide on factors identified at the end of assessment

.....	59
B1. The purpose of collecting the factors identified at the end of assessment data	59
B2. The process of selecting factors identified at the end of assessment data ...	60
B3. Factors Identified at the end of assessment – additional information	62

Legislation

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

Contact details

If you require help or further information, please contact the Data Operations Service Desk using the [data collections service request form](#).

Other children in need census documents

More information on the children in need census, including the technical specification and validation rules, is available in the [Children in need census: guide to submitting data](#).

Data protection and data sharing

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

The UK 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 for Education (DfE) and local authorities. 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 DfE is obliged to provide) the right to know:

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

As data processors and controllers in their own right, it is important that local authorities process all data (not just that collected for the purposes of the Children in Need census) in accordance with the full requirements of the UK GDPR. Further information on the UK GDPR can be found in the Information Commissioner's Office (ICO) overview of the [UK General Data Protection Regulation \(GDPR\)](#).

Legal duties under the UK General Data Protection Regulation and Data Protection Act 2018: privacy notices

Being transparent and providing accessible information to individuals about how you will process their personal data is a key element of UK GDPR and the DPA 2018. The most common way to provide such information is through a privacy notice. Please refer to the ICO website for further guidance on privacy notices.

DfE 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 DfE data collections.

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 or young people, parents and staff are made aware of the notices, and they are readily available electronically or in paper format.

Legal duties under the UK General Data Protection Regulation and Data Protection Act 2018: data security

Providers and local authorities have a (legal) duty under the UK 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 organisation's reputation. Your responsibility as a data controller extends to those who have access to your organisation's data where they are working on your behalf; for example, where external IT suppliers can remotely access your organisation's information. The '[Guide to data protection](#)' 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.

Version history

Version	Comments	Date
1.0	Baseline version.	October 2024
v.1.1	• Updated links to Working Together to Safeguard Children throughout the document • A wording change to the Primary Need code N1 from 'Abuse or neglect' to 'Abuse, neglect and exploitation'. • Updated wording for Neglect and Sexual Abuse categories of abuse • Updated wording for guide for inclusion/exclusion for Socially Unacceptable Behaviour • Addition of Factors at end of assessment guidance at Appendix B, rather than as a separate document • Updated additional information for Domestic Abuse factor in Appendix B	October 2025

1. Introduction

1.0 Summary of main changes for 2025 to 2026

There are no new data items for the 2025 to 2026 children in need census collection. There is a wording change to the Primary Need code N1 from 'Abuse or neglect' to 'Abuse, neglect and exploitation'. LAs do not need to make any change to what is collected or reported. This change is a definitional clarification to bring guidance in line with [Working Together to Safeguard Children](#) and to reflect current practice.

1.1 Background

This is the latest 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 2025 to 2026 covers the financial year **1 April 2025 to 31 March 2026**.

Census data will be submitted by local authorities to the Department for Education (DfE) between **1 April 2026** and **31 July 2026**.

If a local authority fails to submit its data by **31 July 2026**, it will not be included in the children in need figures published by DfE and 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 Children who are referred to children's social care services

The children in need census covers all children who are referred to children's social care services, even if no further action is taken.

This includes children looked after, those supported in their families or independently 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 in need 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 2025 and 31 March 2026

The census includes cases that were open before and during any part of the year from 1 April 2025 to 31 March 2026: a case may have opened before 1 April 2025, but it must have been open at some point between 1 April 2025 and 31 March 2026 to be counted. The census also includes any cases that are referred and opened between 1 April 2025 and 31 March 2026.

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 2026, was planning to take action. 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 adult's 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 that 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 information on this resource is not collected in the children in need census, it will be captured in financial terms in the annual section 251 return.

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 21st 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 25th 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 DfE 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.

DfE 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 us 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).

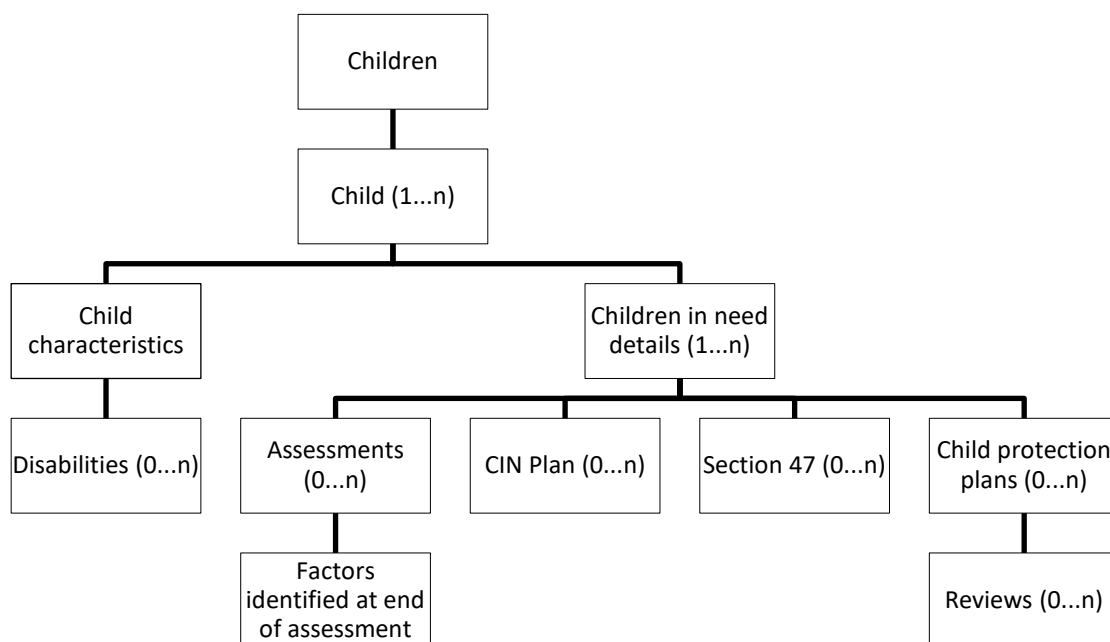
Information from the children in need census, when used alongside local authorities own locally held information, such as that described within the [Children's Safeguarding Performance Information Framework](#), can be used to help understand and provide

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 2025 to 2026 logical data model:

Figure 1: children in need census 2025 to 2026 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. Pupil's former unique pupil number;
 - 1.4. UPN unknown reason (optional);
 - 1.5. Date of birth;
 - 1.6. Expected date of birth;
 - 1.7. Sex;
 - 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. CIN Plan dates group:
 - 3.10.1. CIN Plan start date;
 - 3.10.2. CIN Plan end date.
 - 3.11. Section 47 group:
 - 3.11.1. Section 47 enquiry actual start date;
 - 3.11.2. Target date for initial child protection conference (optional);
 - 3.11.3. Date of initial child protection conference;
 - 3.11.4. 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, child protection plan, etc., 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 **31 July 2026**. 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 2025. Your children in need census 2025 to 2026 return should include the three digit numeric code used only for education data collections.

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.

The children in need COLLECT blade can be accessed through DfE Sign-in. DfE Sign-in is accessed via the [DfE Sign-in website](#). For any queries, please use [DfE Sign-in help](#).

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

1.9 Validation checks

Validation checks will be applied to your data once it has been loaded into COLLECT. These checks help to identify missing data, invalid data, and other anomalies. The validation checks can be found in the accompanying 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 that the associated message begins, "Please check ...".

DfE classifies validation rules as errors where a correction is required in all cases. However, for queries, although DfE would expect a correction in most cases, there may be circumstances under which the data is 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 once you have checked all the records where these rules have triggered and you are content the data is correct, you can add specific text to the return level notes field to explain the query. These records are then automatically authorised overnight within the COLLECT system.

Details of the acceptable notepad entries for all queries along with the text to include for automatic OK queries are listed in the separate acceptable notepad entries document, available on the CIN census data collection [website](#).

1.10 Year on year checks

Year on year checks are built into COLLECT and applied to a number of the headline measures and the number of child records in the return. The checks compare the data in the current data collection and to that in the previous year. Substantial increases or decreases between the current and the previous year will be highlighted. Details of these validation checks can be found in the [validation rules document](#).

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 which makes 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, we recognise that users of MISs may be presented with a number of ways of recording this type of information, such as check boxes or a drop down list. In this case the export functionality of any system will need to convert these fields to the XML standard format.

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 20 characters), and it should be retained from year to year. Unborn children should be allocated their own 'LA child ID'. A 'LA child ID' should not be reused after a period of time, it should be unique to a single child in your local authority. The 'LA child ID' can only contain alphabetic or numeric characters and should not contain leading zeros. It must be the same id that is used for other purposes, for example in the children looked after data collection return. The ID is the sole means of DfE computer identification of each child record and is used to match between children in need census years and between the children in need and the children looked after collections.

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 data across different children in need census years and between the children in need and the children looked after collections. For this reason, any proposal to change ids should be discussed with DfE at an early stage and in advance of any changes. Identifying child information, for example names, dates of birth, unique pupil numbers (UPNs) or local authority child ids, should not be sent in email communications to the department or in data collection service requests.

Details of changes to child IDs should be sent via the [School to School \(S2S\) file transfer system](#) which is accessed via DfE sign in. You will then need to send us a [data collections service request form](#) informing us that the file has been uploaded.

2.2 Unique pupil number (UPN)

A unique pupil number (UPN) is allocated at the point of a pupil's first entry into the state funded school sector. It is an identifier only for use in an educational context during a child's school years 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.

In 2018 we began cross referencing the UPNs returned on the children in need census and the children looked after census.

Please ensure that the correct UPN for a child is returned in both collections. This will help the Department to match children accurately between different datasets to produce statistics on [outcomes for children in need and children looked after](#); including special educational needs, educational attainment, destinations from school, absence from school, suspensions and permanent exclusions from school, free school meal eligibility and type of school attended.

Policy development designed to improve the outcomes of children in need is therefore dependent on the availability of UPNs. In that case, local authorities must make every attempt to track down missing UPNs. If a child has not been assigned a UPN by a state-funded 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 not possible to locate the UPN should the item be left blank.

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

It is possible to do a non-UPN search using a child's first name and/or surname to obtain a child's UPN, using the service [Get Information About Pupils \(GIAP\)](#). It is then possible to filter further using middle name, date of birth and gender if required.

GIAP is accessed through [DfE Sign-in](#). You can create an account if you have not used DfE Sign-in before. User access to GIAP is administered directly by local authorities. Please contact the approver in your local authority to arrange access to GIAP. If you require further assistance, please contact the department via a [data collections service request form](#).

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 DfE. 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 in DfE's [UPN guide for schools and local authorities](#). 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 GIAP is derived from legislation which gives the Secretary of State (SoS) the power to grant a certain degree of sharing.

However, GIAP 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 children attend schools outside of your local authority it is possible you may not hold their UPN, if you do not already do so for other reasons. In this case, please add a note to your children in need return to explain why 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 they were 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 is optional for referral no further action cases or where a child is not of school age and is included to assist local authorities in informing DfE why a UPN is missing. The UPN unknown reason codes are listed below:

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 using the format specified in [date fields](#) of the general notes section. 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. The expected date of birth should be recorded using the format specified in [date fields](#) of the general notes section.

If a child is stillborn, or the mother suffers a miscarriage (including a chemical pregnancy) or a phantom pregnancy, or there is a termination of the pregnancy, please record the expected date of birth and leave the date of birth blank. In cases where a death certificate is issued, 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 should both be recorded. The reason for closure should be recorded as 'RC2 died'.

If the child is born before 31 March 2026 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; only the date of birth should be returned.

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.

2.7 Sex

Children in Need should have their sex reported, as recorded on a birth certificate or on a gender recognition certificate. This is a value which identifies the sex of a person as recognized in law.

Enter:

- M for male;

- F for female;
- U for unknown.

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

2.8 Date of death

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

This information is required to help show 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.

The date of death should be verified from the death certificate and recorded using the format specified in [date fields](#) of the general notes section. 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 should both be recorded. The reason for closure should be recorded as 'RC2 died'.

If a child died or was stillborn, 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.

If a child in need dies outside of the 2025 to 2026 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.

3. Data module 2: child characteristics

3.1 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
CHNE	Chinese
AOTH	Any other Asian background
Black or Black British	
BCRB	Caribbean
BAFR	African
BOTH	Any other black background
Other ethnic groups	
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 physically or sexually 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.

If a child is disabled or becomes disabled at any time during the collection year, record all the relevant disabilities that have affected the child. For example, children may have multiple disabilities in which case more than one category from the below list can be selected. 'Other DDA' can also be used in conjunction with any of the other categories.

If your MIS does not allow for the identification of individual disabilities, then the code 'Other DDA' may be used for all children with a disability. However, this must be recorded 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.

Disability codes:

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 (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 had 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 2025.

The first part of this section (4.1) gives an overview as to what information is required for 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. The following two alternatives are therefore the minimum valid content for one instance of the children in need details module.

In each instance, a referral is a request for children's social care services from someone not currently in receipt of them from the local authority. When new information is received on an already open case, it should not be counted and recorded as a new referral in the census. Any resultant activity (for example, assessments) should be recorded against the child's open episode.

Option	Option criteria
Either option A: for a 2025 to 2026 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 2025 to 2026 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.
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For option B, the no further action flag should only have a value of 1 (true) where after initial consideration of the referral 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 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 on to other services. However, initial contacts should not be included in the children in need census.

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

Furthermore, a referral resulting in no further action should not have any other activities (that is assessments, assessment factors, CIN plans, section 47 enquiries or child protection plans) linked to it in your return.

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

Cases closed following an assessment should use the reason for closure code 'RC8 – case closed after assessment, no further action' or 'RC9 – case closed after assessment, referred to early help', with the referral no further action flag set to 0 (false). No other activity (that is other assessments, assessment factors, section 47 enquiries, CIN plans or child protection plans) should be linked to the case in your return. The case should be closed on the same date as the assessment ends or, if this is not practical, as soon as possible afterwards.

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 and 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 at your local authority.

If the child's case is closed in the year 1 April 2025 to 31 March 2026, 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 format specified in [date fields](#) of the general notes section. This date can be a non-working day and should be the date the child was referred to children's social care services, not the date the child was assessed to be in need.

The referral date can be before 1 April 2025, provided the case was open at some point between 1 April 2025 and 31 March 2026.

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 statutory guidance, [Working Together to Safeguard Children](#) 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 the 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.

Refer to [section 4.1](#) for more information on the appropriate use of the no further action flag. 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 for 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 services, not including social care or early help.
5C	'LA SERVICES' – external, from another local authority's services, for example social care or early help.
5D	'LA SERVICES' – early help.
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 for children in need might not necessarily be the same as that recorded in the children looked after data collection. For example, this may occur if a 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 relates 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](#).

'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, selecting from the table below:

Code	Category	Description
N1	Abuse, neglect and exploitation	Children in need as a result of, or at risk of, abuse, neglect and exploitation – inside or outside the home or online. This category also includes children at risk because of domestic abuse. Children may be experiencing one or more of these forms of harm.
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.
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 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.
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.

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, using the format specified in [date fields](#) of the general notes section.

If the case is still open at 31 March 2026, 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 this situation 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 that the case was closed.

The reason for closure codes RC1 to RC7 should be used by local authorities to categorise a case for a child who they assess as in need following a referral and for whom they provide services and whose case is subsequently closed.

If a section 47 enquiry had commenced on a case, then RC7 should be used even if it was found that the allegations that triggered the section 47 enquiry were unfounded, as at the point the section 47 started the child would be counted as in need, even if services were not necessarily provided.

Codes RC8 and RC9 should only be used by local authorities to categorise a case for a child who they assess as **not** in need following a referral, and for whom they **do not** provide services and whose case is subsequently closed (refer to section 4.7.1 for further information).

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

Enter the reason that the case was closed, selecting from the codes provided in the table below:

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.
RC9	Case closed after assessment, referred to early help.

4.7.1 'RC8 - case closed after assessment, no further action' and 'RC9 - case closed after assessment, referred to early help'.

The reason for closure code RC8 should be used by local authorities to categorise a case for a child who they assess as **not** in need following a referral, and for whom they do not provide services and whose case is subsequently closed. It should not be used for any other reason.

The reason for closure code RC9 should be used by local authorities to categorise a case for a child who they assess as **not** in need following a referral, and for whom they do not provide services, but is subsequently referred to early help and whose case is then closed.

These are different from cases that were closed prior to assessment, at the referral stage; the referral no further action flag should be used in these cases (refer to [section 4.3](#)). The reason for closure codes RC8 and RC9 should not be used for cases that were closed prior to assessment, or for cases where, following a referral, the child was assessed as being in need at any point and services were provided at any point.

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 where the case is a referral that has been closed following assessment.

When the reason for closure code RC8 or RC9 is used the case should be closed on the same date as the assessment ends or, if this is not practical, as soon as possible afterwards.

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.

As set out in statutory guidance, [Working Together to Safeguard Children](#), 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 entirely or partly in the 2025 to 2026 collection year, including those that had started but had not finished by 31 March 2026, and those that started prior to 1 April 2025 and were completed within the 2025 to 2026 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 statutory guidance, [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, using the format specified in [date fields](#) of the general notes section. 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, using the format specified in [date fields](#) of the general notes section. 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, using the format specified in [date fields](#) of the general notes section. 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 year 1 April 2025 to 31 March 2026, which are recorded in the assessments group (refer to [section 4.9](#) for more information).

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 abuse is a current issue of concern, please record it. If domestic abuse 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. They may also refer to situations where, for example, the social worker identifies a child's mental health is of concern or a parent's mental health may affect their parenting capacity.

Code 21 (no factors identified) should be used for cases where, following a referral, the child was assessed as not in need, services were not provided and the case was closed with no further action (reason for closure code RC8 or RC9). In these instances, code 21 should be the only factor listed.

For cases where, following a referral, a child was assessed as being in need and services were provided, please record all relevant factors, selecting from the list below, but excluding code 21. If a subsequent assessment ended in the outcome that services were no longer required and the case was then closed:

- all relevant factors (other than Code 21) should be recorded, together with a reason for closure code RC1 to RC7, where factors were still identified at that point;
- code 21 (no factors identified) should be recorded as the sole factor, together with a reason for closure code RC1 to RC7, where **no** factors were identified at that point.

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 using the reason for closure code: 'RC7 - services ceased for any other reason, including child no longer in need', 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.

[Appendix B](#) provides more detailed information on the factors.

Please report all the following factors that apply:

Code	Description
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 abuse: concerns about the child being the subject of domestic abuse.
3B	Domestic abuse: concerns about the child's parent(s)/carer(s) being the subject of domestic abuse.
3C	Domestic abuse: concerns about another person living in the household being the subject of domestic abuse.
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).

Code	Description
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.

Code	Description
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 code if there is no evidence of any of the factors listed above or below 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.
24A	Child criminal exploitation: concerns that services may be required or the child may be at risk of harm due to child criminal exploitation.

4.11 CIN Plan dates group

CIN plan dates were initially introduced as new data items for the 2021 to 2022 and 2022 to 2023 collections, with the intention of helping DfE develop its understanding of the child’s journey following a referral to children’s social care services. The value of collecting and publishing this data was reviewed, and the department took the decision to continue to collect CIN plan dates for subsequent collections.

The CIN plan start date and CIN plan end date should be recorded, using the format specified in date fields of the general notes section.

A CIN plan should be developed where the outcome of an assessment is that a local authority children’s social care should provide services. The CIN plan sets out which organisations and agencies will provide which services to the child and family. The plan should also set clear measurable outcomes for the child and expectations for the

parent(s) or carer(s). More information on CIN plans is provided in statutory guidance, [Working Together to Safeguard Children](#).

CIN plan dates should be recorded where the following conditions apply:

- A CIN plan start date and/or end date fall within the census year;
- The plan was already open at the start of the year, that is, there is a CIN plan start date for the episode even if it is before the census year

If neither of the above conditions applies, information on CIN plans is not required.

A CIN plan should be recorded as ended when the period of the CIN plan ends. This may be because the child becomes the subject of a child protection plan; the child becomes looked after; or the child ceases receiving support from children's social services (due to no longer needing support, being stepped down to early help, or reaching adulthood).

A child can have one, more than one or no CIN plan(s) – but can only have one at a time.

CIN plans do not include other plans such as leaving care support or adoption support.

We are aware there will be some variation in how local authorities record this data and part of the reason for collecting the data item is to help us understand these differences.

4.12 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.

Include section 47 enquiries that started during the year 1 April 2025 to 31 March 2026 inclusive, even if they carry on into the next data collection year. Also, include cases where the section 47 enquiries started on or before 31 March 2025, but that led to an initial child protection conference (ICPC) with a date on or after 1 April 2025.

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:

Option	Option criteria
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

4.12.1 Section 47 enquiry start date

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

4.12.2 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 format specified in [date fields](#) of the general notes section. The date should be supplied, even if it falls within the year 2025 to 2026.

4.12.3 Date of initial child protection conference

Enter the date on which the initial child protection conference takes place, using the format specified in [date fields](#) of the general notes section. 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](#).

4.12.4 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 format specified in [date fields](#) of the general notes section. Otherwise, leave blank.

5.2 Initial and latest category of abuse

Using the code set in the table below record the initial category of abuse as assessed when the child protection plan commenced and the most recent (latest) 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:

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

The multiple category is for when more than one category of abuse is relevant to the child's current protection plan. It is not intended to record information 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 the purpose of this collection 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. 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, 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;
- provide suitable education

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

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 of 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, , 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.

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 should be used where more than one category of abuse is relevant to the child's current protection plan 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 the year 1 April 2025 to 31 March 2026, using the format specified in [date fields](#) of the general notes section.

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 2024 to 2025

If the child is the subject of a child protection plan at 1 April 2025 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 the year 1 April 2024 to 31 March 2025.

DfE uses this information to help identify which child protection plans were reviewed within the required timescales.

5.6 Child protection plan end date

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

Appendix A: definitions and guidance for primary need codes (see section 4.5)

A1. Abuse, neglect and exploitation (code 'N1')

A1.1 Definition

Children in need as a result of, or at risk of, abuse, neglect and exploitation – inside or outside the home, or online. This category also includes children at risk because of domestic abuse. Children may be experiencing one or more of these forms of harm.

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, whether concerns about actual significant harm, or risk of significant harm, relate to inside or outside the home, or online.

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

Children who are living in a situation of domestic abuse which triggers 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 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.

This would also include children who create concern within the community because they put themselves at unacceptable risk, for example, children who are out late at night in unsafe locations.

Children for whom the primary concern is that they are being exploited or experiencing other forms of harm outside the home should trigger child protection measures and be categorised under the abuse, neglect and exploitation 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: Additional guide on factors identified at the end of assessment

B1. The purpose of collecting the factors identified at the end of assessment data

The effective assessment of an individual child's needs is a process requiring the skills, knowledge and professional judgement of practitioners. This is in order to ascertain the child's needs, the parent's ability to meet those needs, and the impact of wider family and environmental factors.

Recording this data after assessment means that the professional skills taken to complete the assessment can be utilised to record findings, from the assessment, systematically in a manner which facilitates analysis and service planning based on the social worker's understanding. For example, the prevalence of domestic abuse and substance misuse has an impact on the services (including multi-agency services) needed. It can also be used to gain an understanding of the impact of services over time for example by looking at what happens to children where there are these factors present and by looking at trends of prevalence. It means that information informed by professional skills about the needs of children can then inform other processes such as the work of the local safeguarding partners.

B2. The process of selecting factors identified at the end of assessment data

Children's social care assessment aims to gather important information about a child and family, analyse their needs and/or the nature and level of any risk and harm being suffered by the child, including where harm or risk of harm is from outside the home, and to provide support to address those needs to improve the child's outcomes and, where necessary, to make them safe.

The framework for assessment set out in statutory guidance, [Working Together to Safeguard Children](#), provides an example of a conceptual model which facilitates a systematic approach to delivering a comprehensive assessment for all children, recognising that it is important to understand all the factors which may be contributing to a child needing support or protection and that the relationship between these factors can be complex. The model investigates three domains:

- the child's developmental needs
- the capacity of parents or carers (resident and non-resident) and any other adults living in the household to respond to those needs
- the impact and influence of the family network and any other adults living in the household as well as community and environmental circumstances

While it is in no way exhaustive we have included the key data items which have been suggested in terms of facilitating service planning and that would become evident through the assessment process. This is in terms of an analysis of the needs of the child and parenting capacity within their family and community context (including concerns about harm outside the home) as a basis for formulating a plan for the child.

We have included key factors which affect the child's health and development and are factors which mean the child may be at risk of harm. The needs of the parents and carers are an integral part of assessment. Providing services which meet the needs of the parents or carers is often the most effective means of promoting the welfare of children.

We have also included key issues which research has shown affects parents' ability to respond appropriately to the child's needs in terms of the ability to nurture their children, protect them from risk and support their development. In addition, we have included some environmental and family factors which play a role in reducing or increasing the stresses on families, depending on the support available to them. We have included a 'no factors identified category' in the end of assessment factors although in practice it is unlikely that no factors would be identified though an assessment. **We would only expect this category to be used in cases which were closed following assessment where it was determined the child was not in need.**

Our knowledge and understanding of children's welfare – and how to respond in the best interests of a child to concerns – develops over time, informed by research, experience and the critical scrutiny of practice. Sound professional practice involves making

judgements supported by evidence: evidence derived from research and experience about the nature and impact of maltreatment, and when and how to intervene to improve outcomes for children; and evidence derived from a thorough assessment of a specific child's health, development and welfare, and his or her family circumstances, as well as any risks from outside the home.

B3. Factors identified at the end of assessment – additional information

Code	Code descriptor	Additional Information
1A, 1B and 1C	Alcohol Misuse	The alcohol misuse factor should be recorded where problem, harmful or dependent drinking impacts on the individual, and if applicable, their role as a parent /carer. Code (1A) should be used for concerns about the child's alcohol misuse, (1B) for concerns about the parent's or carer's alcohol misuse and (1C) for concerns about alcohol misuse by another person in the household. Further information about problem drinking is available from the National Institute for Health and Care Excellence (NICE).
2A, 2B and 2C	Drug misuse	The drug misuse factor should be recorded where an individual is intoxicated by regular excessive consumption of and /or dependence on substances, which has led 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). Code (2A) should be used for concerns about the child's drug misuse, (2B) for concerns about the parent's or carer's drug misuse and (2C) for concerns about drug misuse by another person in the household.
3A, 3B and 3C	Domestic Abuse	The domestic abuse factor should be recorded where a child has experienced domestic abuse, directly or indirectly, as a victim in their own right. This is due to the impact the abuse has on them as well as others such as the non-abusive parent. Code (3A) should be used where the child is a direct or indirect victim of domestic abuse, (3B) where the parent or carer is a victim of domestic abuse and (3C) where another person in the household is a victim of domestic abuse. The Domestic Abuse Act 2021, section 3 recognises that a child, classed as anyone under the age of 18, is a victim of domestic abuse in their own right if they see, hear or experience the effects of domestic abuse and are related to either victim or perpetrator of the abuse, or either the victim or perpetrator of the abuse has parental responsibility for that child. Therefore, we would expect that if code 3B is selected, 3A should also be selected whether a child was present or

Code	Code descriptor	Additional Information
		not. If the person in the household who is a victim or perpetrator of domestic abuse (3C) is related to the child, 3A would also need to be selected whether a child is present or not. Domestic abuse can encompass a wide range of behaviours and may be a single incident or a pattern of incidents. Domestic abuse is not limited to physical acts of violence or threatening behaviour, and can include emotional, psychological, controlling or coercive behaviour, sexual and/or economic abuse. Types of domestic abuse include intimate partner violence, abuse by family members including honour or faith-based abuses, teenage relationship abuse (peer on peer abuse) and adolescent to parent violence. Anyone can be a victim of domestic abuse, regardless of gender, age, ethnicity, socio-economic status, sexuality or background and domestic abuse can take place inside or outside of the home.
4A, 4B and 4C	Mental health disorder	The mental health factor should be recorded where the effects of mental health impact on a child. Code (4A) should be used for concerns about the child's mental health, (4B) for concerns about the parent's or carer's mental health and (4C) for concerns about the mental health of another person in the household. The Mental Health Act 2007 defines mental disorder as any disorder or disability of the mind. This assessment factor is broader than mental disorders and can be used where there are concerns about mental health that are not categorised as a disorder or disability.
5A, 5B and 5C	Learning disability	The learning disability factor should be recorded where a learning disability impacts on a child. This could include, but is not limited to, a reduced ability to understand new or complex information or to learn new skills, a reduced ability to cope independently and a lasting effect on development. Code (5A) should be used for concerns about the child's learning disability, (5B) for concerns about the parent's or carer's learning disability and (5C) for concerns about the learning disability of another person in the family/household.
6A, 6B and 6C	Physical disability or illness	The physical disability or illness factor should be recorded where the child's health or development is impacted due to their physical disability or illness; or the capacity of a parent to respond to the child's needs is impacted because of the parent's physical disability

Code	Code descriptor	Additional Information
		or illness. If recording a parent's physical disability or illness which impacts on parenting capacity, consider whether there is a need to record the young carer factor for the child. Code (6A) should be used for concerns about the child's physical disability or illness, (6B) for concerns about the parent's or carer's physical disability or illness and (6C) for concerns about the physical disability or illness another person in the family/household.
7A	Young carers	The young carers factor should be recorded for children under 18 who provide or intend to provide care assistance or support to another family member. The child intends to or will 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 could be a parent, sibling, grandparent or other relative who is disabled, has a chronic illness, mental health problem or other condition connected with a need for care support or supervision. Code (7A) should be used for concerns that services may be required, or the child's health or development may be impaired due to their caring responsibilities.
8B, 8C, 8D, 8E and 8F	Private fostering	The private fostering factor should be recorded where an arrangement has been made privately for the care of a child under the age of 16 (or under 18 if disabled) by someone other than a parent or close relative with the intention that it should last for 28 days or more. Private foster carers may be from the extended family, such as a cousin or great aunt. A person who is a relative under the Children Act 1989 i.e., a grandparent, brother, sister, uncle or aunt (whether full or half blood or by marriage) or stepparent will not be a private foster carer. Code (8B) should be used where there are 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) should be used where there are 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) should be used where there are concerns that services may be required or the child may be at risk as a privately fostered child (UK children in educational placements), (8E) should be used where there are concerns that services may be required or the child may be at risk as

Code	Code descriptor	Additional Information
		a privately fostered child (UK children making alternative family arrangements), (8F) should be used where there are concerns that services may be required or the child may be at risk as a privately fostered child ('Other').
9A	Unaccompanied asylum seeker	The unaccompanied asylum seeker (UASC) factor should be recorded where a child is separated from their country of origin and are without the care and protection of their parents or a legal guardian. The child (aged under 18) is applying for asylum in their own right. The child must be without the care of both parents and are not being cared for by any other adult who, by law, has responsibility to do so. Code (9A) should be used where there are concerns that services may be required, or the child may be at risk of harm as an unaccompanied asylum-seeking child.
10A	Missing children	The missing children factor should be recorded where a child up to the age of 18 has gone missing from their school, home or care placement, has been forced to leave, or whose whereabouts is unknown. Code (10A) should be used where there are concerns that services may be required, or the child may be at risk of harm due to going/being missing. Further information about Missing Children is available from the Statutory guidance on children who run away or go missing from home or care.
11A	Child sexual exploitation	The child sexual exploitation (CSE) factor should be recorded where a child or young person under 18 is at risk of, is being, or has been, sexually exploited. 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 to be consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology. A child may also be at risk of child sexual exploitation (even if they have not yet experienced this directly) if

Code	Code descriptor	Additional Information
		they live with an adult who is accessing child images of a sexual nature online. Code (11A) should be used where there are concerns that services may be required, or the child may be at risk of harm due to child sexual exploitation (even if they have not been sexually exploited). Further guidance on child sexual exploitation, including: potential indicators of CSE; overlaps with other types of harm and; information on children whose experiences, characteristics and/or vulnerabilities may make them more at risk of exploitation, is available from the Department for Education.
12A	Trafficking	The trafficking factor should be recorded where a child is moved for reasons of exploitation. This is considered to be trafficking, whether or not the child has been forced or deceived. Trafficking is defined 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.” Code (12A) should be used where there are concerns that services may be required, or the child may be at risk of harm due to trafficking. Further information about child trafficking is available from the United Nations Office on Drugs and Crime.
13A	Gangs	The gangs factor should be recorded along with the child criminal exploitation factor where a child is part of a street or organised crime gang for whom crime and violence are a core part of their identity. Code (13A) should be used where there are 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	The socially unacceptable behaviour factor should be recorded where the child’s behaviour impacts detrimentally on the community. This includes children who require services because they offend, are

Code	Code descriptor	Additional Information
		considered to be at risk of offending, are behaving in such a way that they cause alarm or disturb the peace or are 'pushing at the boundaries' of community acceptance. This factor can also be used for children who create concern within the community because they put themselves at unacceptable risk, and children and young people being served by staff in a Youth Offending Team (YOT). This factor may also be used for children who are receiving services as part of the Youth Crime Prevention Programme. Code (14A) should be used where there are concerns that services may be required, or the child may be at risk due to their socially unacceptable behaviour.
15A	Self-harm	The self-harm factor should be recorded where a child has attempted or carried out harm against themselves. Self-harm is defined as self-poisoning or self-injury, irrespective of the apparent purpose of the act. Code (15A) should be used where there are concerns that services may be required, or the child may be at risk due to suspected/actual self-harming.
16A	Neglect	The neglect factor should be recorded where there is a persistent failure to meet a child's basic physical and/or psychological needs which may result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Neglect may involve a parent or carer: • not providing adequate food, clothing and shelter (including exclusion from home or abandonment) • not protecting a child from physical and emotional harm or danger • not providing adequate supervision (including the use of inadequate caregivers) • not providing access to appropriate medical care or treatment being unresponsive to a child's basic emotional needs. Code (16A) should be used where there are concerns that services may be required, or the child may be suffering or likely to suffer significant harm due to abuse or neglect.

Code	Code descriptor	Additional Information
17A	Emotional abuse	The emotional abuse factor should be recorded where there is persistent ill-treatment of a child that causes severe and continual adverse effects on the child's emotional development. Some level of emotional abuse is implied in all types of ill-treatment of a child, although it may occur on its own. Emotional Abuse may involve a parent or carer: • conveying to the child that they are inadequate, worthless or unloved or valued only as far as they meet the needs of another person • imposing inappropriate age or development related expectations on the child • overprotecting or limiting exploration and learning or preventing the child from participating in normal social interactions • allowing the child to see or hear the ill-treatment of others • bullying • causing the child to frequently feel frightened or in danger • exploiting and/or corrupting the child. Code (17A) should be used where there are concerns that services may be required, or the child may be suffering or likely to suffer significant harm due to abuse or neglect.
18B and 18C	Physical abuse	The physical abuse factor should be recorded where there is abuse or serious violence that may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, stabbing, beating up or otherwise causing serious injury /physical harm to a child. Physical abuse may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. Code (18B) should be used where there are 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 - child (age under 18) to child (age under 18) physical abuse. Note: record this factor for all children referred and assessed as being in need of services. This includes children who have carried out physical abuse or serious violence, as well as child victims. Code (18C) should be used where there are 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.

Code	Code descriptor	Additional Information
19B and 19C	Sexual abuse	The sexual abuse factor should be recorded where there are concerns that a child or young person is at risk of, is being, or has been subject to sexual harassment, sexual violence or sexual abuse and may have been forced or enticed to take part in sexual activities, including online, whether or not the child is aware of what is happening. Sexual abuse 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. Code (19B) should be used where there are 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. Sexual abuse can occur between two children of any age and sex. It can also occur through a group of children sexually assaulting or sexually harassing a single child or group of children with or without their consent. Child to child (peer on peer) 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. Note: record this factor for all children referred and assessed as being in need of services. This includes both victims of CSA, and children who have carried out sexual abuse or are displaying harmful sexual behaviour, as children who harm will also be in need of support. Code (19C) should be used where there are 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	Code (20) Other
21	No factors identified	Code (21) - only use this code if there is no evidence of any of the other factors and no further action is being taken.
22A	Female Genital Mutilation	The Female Genital Mutilation (FGM) factor should be recorded where a child or young person is at risk of, is being, or has been subjected to a procedure involving partial or total removal of the external female genitalia

Code	Code descriptor	Additional Information
		or other injury to the female genital organs for non-medical reasons (FGM). With regard to 'at risk', this factor 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. Further information on Female Genital Mutilation is available from the World Health Organization. Code (22A) 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	The abuse linked to faith or belief factor should be recorded where a child has is at risk of, has been or is being abused 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 abuse concerned may be of any form but can include physical (including excessive physical discipline), sexual, emotional, neglect (including the denial of necessary medical treatment), domestic slavery, sexual exploitation. Code 23A should be used where there are concerns that services may be required, or the child may be at risk due to abuse linked to faith or belief. The following should not be recorded as this factor: · cultural practices that are 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
24A	Child criminal exploitation	The child criminal exploitation factor should be recorded where a child is at risk of, is being or has been criminally exploited. Child criminal exploitation is common in 'county lines' and occurs where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18. The victim may have been criminally exploited even if the activity appears consensual. Child criminal exploitation does not always involve physical contact; it can also occur through the use of technology. It is important to note that the experience of girls who are criminally exploited

Code	Code descriptor	Additional Information
		can be very different to that of boys. The signs of involvement may not be the same, and professionals should be alert to this. Child criminal exploitation may be present in cases where there are some of the following concerns: • Children who appear with unexplained gifts or new possessions; children who go missing for periods of time from home or school or who come home late or are missing and are subsequently found in areas away from their home. • Children who have been the victim or perpetrator of serious violence (for example, knife crime). • Children who are involved in receiving requests for drugs via a phone line (for example, county lines), moving drugs, handing over and collecting money for drugs. • Children who are exposed to techniques such as 'plugging', where drugs are concealed internally to avoid detection • Children found in a 'trap house/ house invasion' where there is drug activity. • Children who owe a 'debt bond' to their exploiters. • Children who have their bank accounts used to facilitate drug dealing Code (24A) should be used where there are concerns that services may be required, or the child may be at risk of harm due to child criminal exploitation. Further information on County Lines is available from the Home Office.



Department
for Education

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