CHAPTER 11
MULTI-DISCIPLINARY CASE CONFERENCE
ON CHILD ABUSE

11.1 Within 10 working days after receipt of referral, the Multi-disciplinary Case Conference (MDCC) on child abuse has to be conducted. The MDCC provides a forum for professionals to share their professional knowledge, information and concern, and most importantly, to formulate a welfare plan for the child suspected to have been abused and his/her family.

11.2 A “Guide to Participants of Multi-disciplinary Case Conference on Child Abuse” is provided in Annex I to Chapter 11 to facilitate the professionals in taking part in the MDCC. As the Chairperson of the MDCC plays a vital role in leading the discussion and achieving the objective of protecting the best interest of the child in the forum, a “Reference Kit for Chairperson of Multi-disciplinary Case Conference on Child Abuse” is provided in Annex II to Chapter 11 to supplement the Guide and serve as reference for the Chairperson in steering the MDCC effectively. Some frequently asked questions about MDCC are also listed at Annex III to Chapter 11 for reference.
Annex I to Chapter 11

GUIDE TO PARTICIPANTS OF
MULTI-DISCIPLINARY CASE CONFERENCE ON CHILD ABUSE

A. Objectives of Multi-disciplinary Case Conference (MDCC)

(1) The MDCC is a forum by which professionals having a major role in the handling and investigation of a suspected child abuse case can share their professional knowledge, information and concern on the child health, development, functioning and his/her parents’/carers’ ability to ensure safety of the child.

(2) The focus of the MDCC is on protection and welfare of the child and not prosecution of the abuser. Family perspective should be adopted in reviewing safety of all the children and other members (e.g. parents) in the household even if concerns are only being expressed about one child. Unless action under the Protection of Children and Juveniles Ordinance, Cap 213, is involved, participants should be bound by the collective decision of the MDCC.

(3) The MDCC analyzes risks and recommends actions to be taken in relation to the welfare planning of the child and his/her family, respecting the statutory obligations of individual members for the case. The MDCC should consider the following:

(a) the nature of the incident;
(b) the level and nature of risk to the child and, if any, other children of the family;
(c) risk of recurrence of the incident;
(d) welfare planning to protect the child upon multi-disciplinary collaboration, including post abuse therapeutic counselling service at pre-trial stage;
(e) parent(s)’/guardian(s)’ attitude on the welfare plan of the child; and
(f) where necessary, the welfare need of other family members related to the protection and well-being of the child victim.

B. Personal Data (Privacy) Ordinance, Cap 486

(1) Information given in a MDCC is confidential and should not be used for purposes other than that of child protection, nor should it be disclosed to any other agency or individual without the permission of the contributor.
The Personal Data (Privacy) Ordinance (PD(P)O), Cap 486 provides exemption under Data Protection Principle 3, the use limitation principle, in respect of sharing of information at the MDCC under Part VIII of the Ordinance.

According to the PD(P)O, a person with parental responsibility may make request to access to the personal data of a minor (i.e. a person below 18 years old). However, personal data collected from the minor (or from other parties concerning the minor) on a confidential basis may be withheld from the parents’ request. It is important that the social worker has to ascertain and discuss the wish of a minor at the stage of collecting the personal data from the minor as to whether he/she will agree to provide the data to his/her parent(s) if they make the request. The reply should be recorded in the file to facilitate a decision if an access request from his/her parent is received. In the context of a MDCC, the personal data of the minor should be treated in the same manner.

C. Responsibility to convene MDCC

1. The officer-in-charge / supervisor / co-ordinator of the concerned units providing casework service (including medical social services units of Social Welfare Department and Hospital Authority) will assume the chairmanship and the related responsibilities.

2. The Chairperson should be experienced in family service or paediatric service and have good knowledge on child protection and family work.

3. If two or more service units share the case, the unit that has the main responsibility for the family should chair the MDCC or arrange a Chairperson as appropriate. The unit to take up the chairmanship may or may not be the one that first discovered the child abuse incident. In case of uncertainties or difficulties, the units should discuss among themselves to decide who to chair the MDCC.

4. The Chairperson should not directly handle the child abuse case.

D. Timing

1. The MDCC should be held at the earliest available date. It should take place within 10 working days after receipt of referral by the investigating social welfare unit. Moreover, the investigating social worker should explain to all invited participants why a case conference must be held within 10 working days and indicate the date and event from which this is to be counted.

2. The MDCC may be postponed when:

(a) the child’s critical medical condition precludes necessary
investigation;

(b) essential clinical findings / diagnosis is not yet concluded; or

(c) the necessary investigation is not yet adequately completed due to complication of the case (e.g. the parents refuse to co-operate or cannot be located).

Under such circumstances, parties concerned should be informed of the deferment of the MDCC.

E. Membership of MDCC

(1) The Chairperson, in consultation with the investigating social worker, should decide on the membership of the conference.

(2) Those professionals who have direct knowledge on the child and his/her family and have a major role in the handling and investigation of the suspected child abuse case, as well as those not involved in the investigation but will give particular information or advice on the case for determining whether abuse has occurred and formulation of welfare plan should be invited as members of the MDCC.

(3) The Police may request members attending the MDCC who are potential witnesses Note to be interviewed, with a statement taken or to provide documentary evidence, e.g. medical chits / reports, chemist certificates, etc., prior to the MDCC so as to avoid the possible contamination of evidence during discussion at the MDCC.

F. Tasks to be performed by MDCC

The major functions and tasks to be performed by the MDCC are:

(1) to examine the cause for concern, analyze information available, and decide from the child welfare point of view whether this is a child abuse case, or the child is at risk of being abused, and the nature of abuse by making reference to the definition of child abuse as listed in Chapter 2;

(2) to share, if available, the result of joint investigation and the decision of immediate case assessment, in relation to the protection and welfare of the child, if Child Protection Special Investigation Team (CPSIT) is formed;

(3) to assess the level of risk and whether the name of the child and the siblings should be placed into the Child Protection Registry and the category of registration;

(4) to make recommendation for the welfare planning of the child;

Note Generally speaking, potential witnesses are those persons who possess relevant information on the abuse incident and may be required to give evidence in the subsequent court proceedings, if any.
(5) to assess the degree of risk and make recommendation for the welfare planning of other children in the family, if any;

(6) to consider the situation of the whole family and re-classify or re-define the case (if necessary) but not just focusing on the presenting problem;

(7) to agree upon an inter-agency plan to protect the child;

(8) to identify the key social worker and the roles of other helping professionals in the follow up welfare plan for the child;

(9) to decide how the child and parents will be informed of the outcome and decisions of the conference, if they are not present in the MDCC;

(10) to consider the need, if any, for statutory action to protect the child or to ensure the child’s welfare;

(11) to consider the need for subsequent MDCCs with reference to:

(a) the need for further information;
(b) the need to review any follow up action; and
(c) any important decision of the MDCC that cannot be implemented because of circumstantial changes and which may jeopardize the well-being of the child.

(12) to consider the need and timing to issue progress report to related parties involved in the follow up of the case. (See also paragraph O(3) below)

G. Roles and Responsibilities of the Chairperson

(1) Personal Data (Privacy) Ordinance, (PD(P)O), Cap 486

The Chairperson of the MDCC should remind participants of the conference the confidentiality of the proceeding and clarify with them their wish on the control and prohibition of data in accordance with the PD(P)O (see also paragraph B above and Annex IIA to Chapter 11). The notes of the MDCC will also contain a reminder to this effect.

(2) Necessary Arrangements

(a) Before the MDCC, the Chairperson, with assistance of the investigating social worker, should work out the following:

(i) date and venue of the MDCC;

(ii) membership of the MDCC and invitation (see paragraph E above) including assessment of the suitability for family participation (see paragraph H below);
(iii) distribution of available written reports in a confidential manner preferably prior to the MDCC;

(iv) attendance of the parent(s) / guardian(s) of the child at the appropriate session and lining up of pre-conference preparation (see paragraph L below) for the family and professionals where appropriate; and

(v) minutes / notes taking during the MDCC.

(b) During the MDCC, the Chairperson has to ensure that the focus and objective of the MDCC are for the welfare and protection of the child, and not to determine whether the acts of the alleged perpetrator have constituted criminal acts. The Chairperson also has to ensure that the objectives of the MDCC have been achieved and contributions are relevant and concise. Lengthy and unnecessary elaboration of the social investigation or medical consultation should be avoided.

(c) The Chairperson should alert members who are potential witnesses the danger of contamination of evidence, e.g. by revealing details given in their police statements, during the MDCC. Similarly discussion among potential witnesses on the details of the abusive acts should be avoided until the conclusion of subsequent court proceedings, if any.

(d) In formulating the welfare plan of the child, the following should be considered to ensure the child’s safety (see also “Guide to Risk Assessment” in Chapter 2):

(i) the level and nature of all risk factors;

(ii) the views of the child in relation to the protection and welfare plan;

(iii) the degree of co-operation from the family and parental attitude in implementing the welfare plan;

(iv) the degree of support and supervision required for implementing the welfare plan; and

(v) availability of service required to implement the welfare plan.

(e) During the MDCC, the Chairperson has to lead members to analyze all the facts and opinions and come to a decision regarding the welfare plan of the child through consensus.

(f) Any decisions made in the MDCC should have consensus among
members as far as possible.

H. **Family Participation in MDCC**

(1) Family participation in the whole MDCC should as far as practicable be promoted and be adopted as a standing practice for those cases in which the parents are not the abusers.

(2) Family participation aims to enhance parents’ understanding of the issues of concern, tap their contribution to the formulation of the welfare plan, and enlist their involvement in the implementation of the welfare plan. It is also an empowering process. However, members of the MDCC have to find effective measures to protect the child and take into full account the wish of the child when formulating the welfare plan. The welfare and rights of the child should always be the paramount concern of the MDCC.

(3) Parent(s) and/or the child to be invited to participate in the MDCC is/are not member(s). The Chairperson has to ensure pre-conference preparation for the parent(s) and/or the child with reference to paragraph L below.

(4) Subject to the consent of the parent(s) and members of the MDCC, significant family members and relatives who have sound knowledge of the child and would be contributive to the welfare plan can also be invited as appropriate.

(5) Parents and/or the child can be invited to attend:

(a) the whole MDCC, or  
(b) at the time of formulating welfare plan, or  
(c) at the time when initial recommendation on the welfare plan is made.

(6) Upon careful consideration and on balancing different views from all members, parents who are the suspected abusers can be invited to participate in the MDCC, especially on the part of formulating welfare plan.

(7) In case the parent(s) is/are suspected abusers and the child being the victim has been taken away from their custody due to the suspected child abuse incident, careful consideration should be taken as to whether it would be appropriate to invite the child to attend the same session with his/her parent(s) (see also paragraph I below). The suspected abuser should not be given any opportunity, during the MDCC, to influence, interfere with and/or exert pressure on the child directly or indirectly such that the child might change or withdraw his/her previous version of the events.

(8) In case the parent(s) who attend(s) the MDCC is/are suspected abusers,
members should be cautious not to ask them questions such as whether they are related to and/or responsible for the abuse of the child, or make such accusations against them. The Chairperson should remind all members of the MDCC that any admission of guilt made during the MDCC by the suspected abuser(s) may be adduced as evidence in subsequent criminal trial and all others present at the MDCC may become prosecution witnesses should there be any charges laid against the suspected abuser(s).

I. Arrangement for Family Participation in MDCC

(1) The decision of inviting parents to participate in the MDCC should be made by the Chairperson in consultation with the investigating social worker and all members of the MDCC.

(2) All members of the MDCC should be informed beforehand of the parents’ and/or child’s participation.

(3) Any members who feel that the participation of parents and/or the child will not be appropriate for a particular part or the whole session of the MDCC can discuss the matter with the Chairperson before the MDCC or suggest to the Chairperson to arrange the parents and/or child to withdraw from the MDCC and wait at a comfortable sitting area, preferably with privacy, for a while.

(4) The Chairperson can also exercise professional judgment to invite the family to withdraw from the MDCC temporarily if there is a need for the professionals to discuss among themselves on a particular issue. The Chairperson has to explain to the family the reasons clearly for this arrangement and brief them the outcome of the discussion afterwards.

(5) If the parent(s), being the suspected abuser(s), and the child have been asked to withdraw from the MDCC and wait somewhere for a while, special arrangement should be made to make sure that the suspected abuser(s) would not be given any opportunity to influence, interfere with and/or exert pressure on the child directly or indirectly such that the child might change or withdraw his/her previous version of the events.

(6) In case the parents are unable or considered not suitable to participate in the MDCC, their views should be made known to the investigating social worker or other members of the MDCC who should undertake to ensure that the MDCC is aware of the parents’ views. The investigating social worker should also inform the parents that they can give their views to the case conference in writing if they are unable to attend.

Child Participation in MDCC
(7) In some cases, the child can be invited to attend part of or the whole MDCC to contribute in the formulation and implementation of the welfare plan. The decision to involve child victim in the MDCC should take into consideration the child’s age, level of understanding, maturity and emotional state. The Chairperson has to ensure that the child would benefit from attending the MDCC.

(8) The investigating social worker who is more familiar with the child should brief and prepare the child in person prior to the MDCC.

(9) If the child is to attend the MDCC, the Chairperson has to plan the MDCC very carefully and assess if the child can attend the same session with the parent (see also (5) and (7) of paragraph H and (5) of paragraph I above).

(10) In case the child is unable to attend the MDCC or is not invited, the child should be told that a meeting is being held and the child’s views and wishes will be conveyed to the MDCC by the investigating social worker or other members of the MDCC. The investigating social worker should also inform the child that he/she can give his/her views to the case conference in writing if he/she is unable to attend. The Chairperson should appoint a member to convey the decision and recommendation of the MDCC to the child after the MDCC as soon as possible.

J. Roles of Parents in MDCC

(1) The roles of parents in the MDCC are to supplement background information of the family, participate and contribute in the discussion on formulation of the welfare plan and its implementation.

(2) The Chairperson should facilitate exchange and discussion between the parents and other members as appropriate.

K. Roles and Responsibilities of Members of MDCC

(1) All members should give priority to attend the MDCC and contribute from their professional point of view to safeguard the welfare of the child victims during the MDCC. The investigating social worker should also inform all those being invited that they can give their views to the case conference in writing if they are unable to attend.

(2) In case of enquiry about the conference proceeding, members should seek clarification from the Chairperson.

(3) Members should attend the whole MDCC to share their findings of the incident / allegation, contribute their professional knowledge,
experience and represent their Department / agency’s views. Individual members may share, preferably prior to the MDCC, useful published reports and articles (e.g. medical reports and researches) relevant to the case to facilitate mutual understanding on the case nature and facilitate formulation of welfare plan.

(4) Each member should prepare a written report / notes on the child for reference of the MDCC as far as possible. The report can be brief, with relevant information on the child and family such as the child’s risk, protection and welfare plan. For the investigating social worker, the report must be in written form.

(5) Members should share openly their professional views; make decisions on whether the case is a child abuse case and its case nature. As the Police may be involved in the criminal investigation of the case, the police officer attending the MDCC would remain neutral during the discussion on case nature in order to avoid being accused of showing prejudice in the criminal investigation. The Police, however, will inform the MDCC the progress, but not the details of the investigation, i.e. the case is still being investigated, legal advice is being sought, no charge has been laid or a charge has been laid against the suspected child abuser(s).

(6) Members who follow up the case should assist in carrying out the decisions made in the MDCC. They should inform the key worker if the actions as decided in the MDCC cannot be implemented. The key social worker has to ensure that the post-conference management and multi-disciplinary collaboration in intervention are in place (see paragraphs M, N and O below).

(7) Members should report to the key social worker any changes in the circumstances and independent action taken concerning the child and his/her family.

(8) Members should attend subsequent case conference if they are involved in the follow up of the case.

L. Pre-conference Preparation

For the family

(1) If family member(s) is/are invited to participate in the MDCC whether in full or in part, the Chairperson or his/her delegate should hold a pre-conference briefing with the family members concerned to reiterate the following issues:

(a) purpose, focus and ambit of the MDCC;
(b) proceeding of the MDCC, issues to be discussed;
(c) participants of the MDCC and their respective roles; and
(d) how they can contribute in the MDCC and their rights.

(2) The pre-conference briefing between the Chairperson and the family, if required, should preferably be held in the form of a meeting and the discussion at the pre-conference briefing should be noted in the case record.

For the professionals

(3) The Chairperson, in consultation with the investigating social worker, or any members can initiate pre-conference meeting on a need basis to sort out any incongruent findings, clarify the progress of criminal investigation from the Police, i.e. the case is still being investigated, legal advice is being sought, no charge has been laid or charge has been laid against the suspected child abuser(s), and any other points that may require further investigation, thrash out issues relating to the personal details of the suspected abuser and anything that should not be discussed during the MDCC.

(4) Given the time constraint to conduct the MDCC (i.e. within 10 working days), the Chairperson would consult concerned members about the appropriate timing to conduct the pre-conference meeting.

(5) As the pre-conference meeting and the MDCC serve different purposes, the Chairperson should ensure that the discussion in the pre-conference meeting will not pre-empt and distort the decision to be made in the MDCC by all members.

M. Post-conference Management

(1) Debriefing for parents and the child who have participated in the MDCC should be provided so as to address their possible emotions after the MDCC and, clarify any areas they may raise on the MDCC.

(2) Debriefing after the MDCC also enables the family to recapitulate their roles and contribution in the entire process of child protection.

(3) The Chairperson and the key social worker (see paragraph N below) should decide among themselves who and when to conduct debriefing, preferably within 10 days after the MDCC.

N. Roles and Responsibility of “Key Social Worker”

The MDCC should appoint a key social worker to follow up the case. The responsibilities of the key social worker are:

(1) to implement the decisions of the MDCC. If action under the Protection of Children and Juveniles Ordinance, Cap 213, is required, the case will be taken over by the Social Welfare Department;
(2) to line up multi-disciplinary collaboration in implementing the welfare plan concerning the child and his/her family and ensure that actions taken by the responsible parties are in line with the decisions of the MDCC;

(3) to inform members as soon as possible consideration of reconvening the MDCC if the decision of the MDCC cannot be implemented by the key social worker or other responsible parties; and

(4) to ensure that if a change of the key social worker is agreed upon in the MDCC, all relevant information and documents are to be transferred to the incoming key social worker. If the case cannot be transferred out to the incoming key social worker within one month after the MDCC, communication between the outgoing key social worker and the incoming key social worker is required.

O. Multi-disciplinary Collaboration in Post-conference Stage

Case review

(1) If there is new information coming up or any follow up action is required to be reviewed, the key social worker, in consultation with all members of the MDCC, will decide whether to convene a review conference. Membership of the review conference should be confined to those professionals who have direct involvement in the case.

(2) Other than the review conference, the key social worker and professionals involved to follow up the case should maintain regular contacts with one another to ensure implementation of the welfare plan.

Progress report

(3) Subject to the agreement in the MDCC, the key social worker will inform members of the MDCC in writing the progress on the implementation of the welfare plan in an agreed period of time, say 6 months after the MDCC, or a period to be decided by the MDCC. The progress report should be concise and precise, capturing only the most recent and essential development of the case.

P. Minutes of MDCC

(1) The minutes of the MDCC should include the following:

(a) the persons invited with attendance or absence;
(b) the family members invited, and if not, the reasons;
(c) points discussed;
(d) decisions made;
(e) reasons for such decisions; and
(f) dissenting views.

(2) Where application for Care or Protection Order or other statutory power is required, the Magistrate or District Court Judge should be informed of the decisions and recommendations of the MDCC through the Social Welfare Officer’s Report to the court.

(3) The draft minutes of the MDCC will be sent to members for confirmation preferably within two weeks after the MDCC.

(4) Members of the MDCC should read and check the draft minutes to ensure if their views are correctly and appropriately documented. Requests for amendments, if any, should be made to the Chairperson preferably within one week after receiving the draft minutes of the MDCC.

(5) The Chairman should issue the confirmed minutes to all members and, on a need-to-know basis, to other professionals who would follow up the case no later than one month after the MDCC.

(6) The investigating social worker should send a letter to the parent(s), whether they have attended the MDCC or not, stating the decisions of the MDCC, highlighting the welfare plan for the child, and restating that the decision of the MDCC has no binding effect on the decision of the Police whether to institute criminal proceedings against the abuser(s) or not.
Reference Kit for
Chairperson of Multi-disciplinary Case Conference on Child Abuse

I. INTRODUCTION

This Reference Kit (Kit) is provided for social workers who may chair the Multi-Disciplinary Case Conference (MDCC) on Child Abuse. It is intended to supplement the “Guide to Participants of Multi-Disciplinary Case Conference on Child Abuse” (Guide) by sharing information on the basic principles for conducting meetings, highlighting significant issues that need to be considered in chairing the MDCC, elaborating some of the points stipulated in the Guide and providing examples to illustrate various situations.

2. It should be noted that the Kit should be read together with the Guide. Besides, in handling special situations where the Guide and the Kit are not applicable, the Chairperson should make appropriate arrangements based on professional judgment, bearing in mind that the welfare of the child should be the paramount concern.

II. BASIC PRINCIPLES

An Effective Meeting

3. The essential elements of an effective MDCC are similar to those contributing to the effectiveness of a meeting of other nature. Generally speaking, a meeting is considered effective when it achieves its objectives within minimal time. An effective meeting should be:

(a) purposeful;
(b) well-structured;
(c) open;
(d) efficient; and
(e) with focus on key issues to facilitate decision-making.

Common Problems of a Meeting

4. The following common problems would render a meeting ineffective:

(a) poor preparation;
(b) drifting off the subject;
(c) lack of listening;
(d) lack of participation;
(e) verbosity / side-tracking; and
(f) unnecessary length.
A Competent Chairperson

5. To ensure the effectiveness of a meeting, a competent Chairperson should:
   (a) be very clear about the objectives of the meeting and the desired outcome;
   (b) know the different roles and concerns of the participants;
   (c) examine the agenda with reference to the significant issues that need to be covered and the composition of the participants;
   (d) make sure that participants are well-prepared for the meeting;
   (e) facilitate communication among participants;
   (f) make sure that the atmosphere is open and positive;
   (g) clarify viewpoints and avoid subjective judgment;
   (h) accommodate the varying needs and sentiments of the participants;
   (i) stay neutral;
   (j) keep the discussion in control and focused;
   (k) guide the meeting towards the desired outcomes;
   (l) regularly summarize what has been achieved and agreed; and
   (m) avoid jumping to conclusions.

Checklist of Steps

6. Below is a checklist of steps for planning and conducting effective meetings.

   Before the Meeting

   (a) Plan the meeting carefully: who, what, when, where, why, how many?
   (b) Prepare and send out an agenda in advance.
   (c) Come early and set up the meeting room.

   At the Beginning of the Meeting

   (d) Start on time.
   (e) Get participants to introduce themselves.
   (f) Explain the objectives of the meeting.
(g) Give the participants the opportunity to raise their views/questions, if any, on the agenda.
(h) Review action items from the previous meeting, if any.
(i) Set clear time limits.

During the Meeting

(j) Follow the agenda for discussion.
(k) Ask questions if in doubt.
(l) Listen patiently.
(m) Clarify issues and identify underlying interests.
(n) Develop multiple options.

At the End of the Meeting

(o) Identify additional data needed for making decisions.
(p) Summarize agreements.
(q) Establish action items: who? what? when?
(r) Set the date and place of the next meeting and develop a preliminary agenda, if necessary.
(s) Close the meeting crisply and positively.

After the Meeting

(t) The Chairperson is responsible for following up and monitoring action items. In case the Chairperson and the key social worker are not working in the same unit, supervisor of the key social worker should play the role to follow up and monitor action items as agreed.

III. PREPARATION FOR THE MDCC

Essential Information the Chairperson should Know

7. The Chairperson should acquaint himself/herself with the following guidelines and ordinances and make reference to the relevant chapters and appendices, wherever necessary:

(a) Procedures for Handling Child Abuse Cases
(b) Guide to Participants of the MDCC
(c) Protection of Children and Juveniles Ordinance, Cap 213
(d) Personal Data (Privacy) Ordinance, Cap 486

8. The Chairperson should also get familiar with services for children so as to facilitate discussion in the MDCC.

9. The Chairperson should fully understand the Social Enquiry Report prepared by the investigating social worker and any relevant reports prepared by other professionals.
10. The Chairperson should take note of any new case development not covered in the written reports / notes prepared by the members prior to the MDCC.

**Should MDCC be required for this case**

11. MDCC is required when there is suspected child abuse incident(s) with investigation conducted by social worker and other professionals. As a general practice, MDCC should be conducted as far as possible unless under **exceptional situations** such as:

   (a) the intended welfare plan is straight-forward and agreed among concerned parties; and

   (b) less than three parties are involved in the investigation of the case, e.g. child sexual abuse cases involving only Child Protection Special Investigation Team (CPSIT).

12. The decision for **not** conducting a MDCC should be **agreed by all parties involved** including the possible key social worker to follow up the case. A brief or telephone conference may be considered as an alternative if appropriate.

**Who to Conduct MDCC**

13. As stipulated in (1)-(4) of paragraph C in the “**Guide to Participants of MDCC**”, the chairperson of a MDCC should:

   (a) be the officer-in-charge / supervisor / co-ordinator of unit providing casework service conducting the social enquiry;

   (b) be experienced in family or paediatric service;

   (c) have good knowledge on child protection and family work; and

   (d) not directly handle the child abuse case.

14. If necessary, Family and Child Protective Services Units (FCPSUs) of SWD will provide support and assistance to the Chairperson who is not experienced in conducting MDCC. For cases handled by units without a social worker as the supervisor, e.g. school social work unit of special school in which the principal is the supervisor, social workers of FCPSUs may assume the role of Chairperson in the MDCCs.

15. For cases shared by more than one units providing casework service, the concerned units should discuss among themselves on the chairmanship. Usually the responsible officer-in-charge / supervisor / co-ordinator of the unit which knows the family and the child(ren) more and better will take up the chairperson role.

**When to Conduct MDCC**
16. The MDCC should be held at the earliest available date. It should take place within 10 working days after receipt of referral by the investigation social welfare unit. Moreover, the investigating social worker should explain to all invited participants why a case conference must be held within 10 working days and indicate the date and event from which this is to be counted. The MDCC may be postponed when:

(a) the child’s critical medical condition precludes necessary investigation;

(b) essential clinical findings / diagnosis is not yet concluded; or

(c) the necessary investigation is not yet adequately completed due to complication of the case (e.g. the parents refuse to co-operate or cannot be located).

17. If the MDCC cannot be held within 10 working days, the Chairperson should inform parties concerned of the deferment and effort should still be made to ensure that the MDCC will be conducted in time. The Chairperson should also explain the reason(s) in the “Introduction” of the MDCC and the reason(s) should be recorded in the minutes.

Membership

18. In deciding the membership, the Chairperson should include the professionals who have direct knowledge on the child and his/her family and have a major role in the handling and investigation of the suspected child abuse case, as well as those not involved in the investigation but will give particular information or advice on the case for determining whether abuse has occurred and formulation of welfare plan to be discussed in the MDCC. In addition to the social worker responsible for the investigation of the suspected child abuse case, members of MDCC may include, as appropriate:

(a) police officer;

(b) school personnel e.g. teacher, counsellor, school social worker, principal, etc.;

(c) medical personnel e.g. doctors, nurses, etc.;

(d) medical social worker;

(e) clinical psychologist; and

(f) social worker who may follow up the case, if different from the investigating social worker.

19. To facilitate discussion and ensure the best welfare plan is formulated, only relevant personnel should be involved in the meeting. However, at times it is suggested that members may attend the MDCC with their supervisors, or their
colleagues may like to sit in the MDCC for learning purpose. In the latter case, the consent of all other members of the MDCC, the parent(s) and the child(ren) (where appropriate) should be obtained prior to the meeting.

20. Although it is a good practice to explain to the parent(s) and the child(ren) (where appropriate) about the membership of the MDCC, the views of the parent(s) / child(ren) should have no bearing regarding the decision of the membership which should be made by the Chairperson in consultation with the investigating social worker and based on professional judgment.

21. No parties should be excluded from the MDCC because of parent(s)’ or child(ren)’s objection. If the parent(s) / child(ren) object to the participation of a particular member, the Chairperson should find out the reasons for such an objection and explain to them the role of the member. Any misunderstanding between the parent(s) / child(ren) and the particular member should best be dealt with prior to the MDCC.

22. The Chairperson should be alert of the issue of conflict of interest in cases where the suspected abusers are staff of an institution such as school and residential care facilities for children. The suspected abusers in these cases should not attend the MDCC, but other staff of the institution may attend provided they are involved in the handling of the case, or can provide relevant information on the child / family / incident to facilitate discussion at the MDCC.

23. Though participation in the MDCC is voluntary, the Chairperson should encourage all relevant professionals to attend the MDCC. Those being invited should also be informed that they can give their views to the case conference in writing if they are unable to attend. If for any reason a member being invited could not be available, he/she should be requested to prepare a written report / notes on the child(ren) for reference of the MDCC as far as possible.

Family and Child Participation

24. Parent(s), family members, relatives and/or child(ren) attending the MDCC are not members of the MDCC. Their roles are to supplement background information and contribute in the formulation of welfare plan. Hence, they will not be provided with reports and minutes of the MDCC. They may make a data access request for a copy of their own personal data as contained in the reports and/or minutes of the MDCC according to Section 18(1) of the Personal Data (Privacy) Ordinance (PD(P)O), Cap 486.

25. The decision of inviting parent(s) to participate in the MDCC should be made by the Chairperson in consultation with the investigating social worker and all members of the MDCC. If necessary, a pre-conference meeting can be held among members to decide on family participation. If family participation in the whole MDCC is deemed not suitable, the parent(s) concerned should be so informed before the MDCC.

26. The participation of the parent(s) who are suspected abusers is not the
standing practice of MDCC. However, subject to the views of the members, they (e.g. those who are co-operative in the investigation process and show motivation to accept the professionals’ intervention) may be invited to attend the whole or part of the MDCC if their participation is considered beneficial to the welfare of the child(ren) after careful assessment.

27. The parent(s) and/or child(ren) should be informed that they can give their views to the case conference in writing if they are unable to attend.

**Logistics and Venue Arrangement**

28. The Chairperson should confirm with the investigating social worker the logistic arrangement of the MDCC including:

   (a) membership list;

   (b) agenda;

   (c) issue of invitation letter with agenda and feedback form on family participation (a sample is at Annex IIB to Chapter 11 for reference);

   (d) distribution of available written reports to all members preferably prior to the MDCC and as far as possible, in a confidential manner (details of the abuse incident should not be mentioned in the report);

   (e) minutes taking;

   (f) arrangement of pre-conference briefing to the child(ren) and family members if they are to be invited to attend the MDCC; and

   (g) the need to conduct pre-conference meeting with the professionals.

29. If the suspected abused child is hospitalized, the MDCC should preferably be held in the hospital and medical social worker’s assistance can be solicited in arranging the venue.

30. If family members have to wait for their turn to attend the MDCC or be requested to withdraw from part of the MDCC pending the discussion among members, the Chairperson has to arrange a comfortable place with chairs, preferably with privacy, for the family. If the parent(s) who is/are the suspected abuser(s) and the child(ren) are invited to attend the MDCC, separate waiting areas for the parent(s) and the child(ren) will be required to prevent the parent(s) from influencing, interfering with and/or exerting pressure on the child(ren) directly or indirectly such that the child(ren) may change / withdraw his/her previous version of the events.

**Pre-conference Briefing for Family Members**

31. The Chairperson or his/her delegate should conduct the pre-conference
briefing for the family prior to the MDCC. For the purposes and contents of the pre-conference briefing, reference should be made to paragraph L in the “Guide to Participants of MDCC” (Annex II to Chapter 11).

32. The pre-conference briefing should preferably be held in the form of a meeting. If for any reason the pre-conference briefing cannot be held, the Chairperson or his/her delegate should brief the family members over phone clearly and with adequate details.

33. Minute-taking is not required as pre-conference briefing is not a formal meeting. Nevertheless, the discussion at pre-conference briefing should be noted in the case record.

Pre-conference Meeting for Professionals

34. The Chairperson, in consultation with the investigating social worker or any members, may initiate a pre-conference meeting on a need basis. Reference could be made to paragraph L in the “Guide to Participants of MDCC” for the functions of the pre-conference meeting.

35. Pre-conference meeting among members is not a must and, if so required, it can be done in a simple form (e.g. brief discussion immediately before the MDCC).

36. In general, minute-taking in such informal pre-conference is not required, but, if deemed necessary, discussions should be recorded in the form of minutes for future reference and record purpose.

IV. DURING THE MDCC

To Start the MDCC

37. The Chairperson should arrive at the venue earlier to ensure that appropriate seating and other logistic arrangements have been made. To start the MDCC, the Chairperson should:

(a) welcome members and introduce himself/herself;
(b) explain the objectives of the MDCC;
(c) confirm the name(s) of the child(ren);
(d) re-confirm the membership;
(e) invite members to introduce themselves;
(f) inform members of absentee and reasons behind, if any;
(g) stress the importance of confidentiality and explain concerns relating to the PD(P)O (see paragraph 38 below);

(h) explain briefly how the meeting will run, i.e. the agenda items and any special issues relating to the case that members should be aware of;

(i) explain the arrangement of family participation in the MDCC (e.g. who attends, reason for family participation, etc.);

(j) remind members of the need to share information on a need-to-know basis, including the use of relevant reports for court proceedings or follow up services;

(k) remind members who are potential witnesses the danger of contamination of evidence (see (2)(c) of paragraph G in the “Guide to Participants of MDCC” for details);

(l) explain that the Police would remain neutral during the discussion on the nature of the case in order to avoid being accused of showing prejudice in the criminal investigation (see (5) of paragraph K in the “Guide to Participants of MDCC” for details);

(m) emphasize that the decision of the MDCC on the case nature has no binding effect on the prosecution of the abuser; and

(n) seek members’ consent if tape recording is necessary to facilitate minute-taking (any recording tape should be destroyed once minute-taking is completed).

**Concerns Relating to Confidentiality and Personal Data (Privacy) Ordinance**

38. The Chairperson should state the “Introductory Remarks in Relation to Personal Data (Privacy) Ordinance, Cap 486” at the Annex IIA to Chapter 11 and invite members to confirm whether they wish to retain control of the use of the data provided by them during the MDCC. Members should also be reminded of the importance of confidentiality and that the information given in the MDCC should not be disclosed to other agencies without the permission of the contributor in any context other than that of child protection.

**Family Participation**

39. The Chairperson may make reference to the following **DOs** and **DON’Ts** if the parent(s) and/or the child(ren) are present in the MDCC:

**DOs**

(a) Attend to the parent(s)’/child(ren)’s reaction to members’ views.
Facilitate exchange and discussion between parent(s) and members as appropriate.

Ensure that the parent(s) / child(ren) understands members’ views.

Enlist the parent’(s) / child(ren)’s co-operation in implementing the welfare plan agreed by members.

**DON’Ts**

(a) Use jargons and technical terms.

(b) Give lecture to parents or conduct therapy in the MDCC.

(c) Ask questions relating to the admission of guilt by the parent(s) who is/are suspected abusers.

**Sharing of Reports and Findings**

40. To facilitate discussion and ensure the best welfare plan is formulated, it would be advisable for members to highlight the key points already mentioned in their written reports which have been distributed prior to the meeting instead of presenting the whole report in the MDCC.

41. Detailed description of the abusive acts which may cause contamination of evidence and divert the focus of the MDCC should be avoided. In case of doubt on whether certain information about the abusive act should be disclosed, the advice of the Police can be sought prior to the MDCC.

42. Clarification should be made in case of inconsistency in the information provided by different members.

**Discussion on Case Nature**

43. The decision on whether the case is a child abuse case helps facilitate the formulation of appropriate welfare plan for the child(ren). The decision of the MDCC has no binding effect on the prosecution of the abuser.

44. For cases to be registered in the Child Protection Registry (CPR), reference should be made to the “Case Nature” of the CPR Data Input Form regarding the category of case nature.

45. Members are expected to make decision on the case nature in the MDCC. However, if they find it difficult to make decision, they should not be compelled to do so.

46. The participants of the MDCC should review and consider the situation of the whole family and classify or re-define the case (if necessary) but not just focusing on the presenting problem.
Risk Assessment

47. In conducting risk assessment, the likelihood of recurrence of maltreatment, neglect, physical or sexual abuse, and not just the severity of the child(ren)’s injuries should be taken into consideration.


49. The considerations made in the risk assessment should form the foundation of the welfare plan for the child victim.

Formulation of Welfare Plan

50. The welfare plan should address all the risk factors that the child(ren) would be facing for the protection of the child(ren). It should also be targeted for the healthy physical, social, and psychological development of the child(ren).

51. The welfare needs of the child(ren)’s family members including the parents and siblings should also be attended to where necessary.

52. As the co-operation of the parents (or the significant family members) and the child(ren) is very important to the implementation of welfare plan, their views should be considered and addressed carefully on the basis that the child(ren)’s safety and well-being should be the paramount concern.

53. Multi-disciplinary collaboration in the implementation of the welfare plan should be fostered.

Conflict Resolution and Decision-making

54. As the nature of the case (i.e. whether the case is considered a child abuse case) and the welfare plan for the child are very delicate issues, related decisions should be made by consensus in the MDCC as far as possible rather than by simple voting. If there are divergent views, the Chairperson should guide the discussion from the perspective of child protection.

55. The Chairperson has to handle the disagreement among members with an open mind. The use of the following skills may help members reach consensus:

(a) highlighting common concerns;
(b) clarifying the conflict and disagreement;
(c) positive reframing of disagreement and conflict;
(d) adopting objective criteria;
(e) refocusing the discussion on the best interest of the child(ren); and
(f) exploring additional information that will facilitate decision-making.

56. If a consensus cannot be reached after using the suggested skills, the Chairperson may consider concluding the discussion following the views of majority and record divergent views in the minutes.
Appointment of Key Social Worker

57. The Chairperson should confirm the appointment of key social worker or unit to follow up the case upon members’ agreement on the nature of the case and the welfare plan for the child. FCPSU of SWD will take up the case when members at the MDCC agree that it is a child abuse case / a case with high risk of child abuse. Otherwise, the case will be referred to other welfare service unit / agency for follow up when the case is not classified as child abuse but is still in need of welfare service. Case transfer, if required, should be carefully planned, taking into consideration the emotional reaction of the child(ren) and family members involved.

Need for Progress Report

58. The Chairperson should lead the MDCC to discuss the need for progress report (e.g. to review the feasibility / suitability of the agreed welfare plan for cases in which the parent(s) does not / do not agree to the plan).

Need for Review Conference

59. The Chairperson should seek the views of members on the need to convene review conference if there is new information coming up (e.g. family members’ change in attitude towards restoring the child(ren) home) or any follow-up action (e.g. the welfare plan has yet to be confirmed pending the exploration of suitable residential placement for the child(ren)) is required to be reviewed. In case the Chairperson and the key social worker are not working in the same unit, supervisor of the key social worker should play the role to monitor action items as agreed and assess the need for convening review conference.

To End the MDCC

60. The Chairperson should summarize the decisions of the MDCC in the following areas:

(a) whether the case is established as a child abuse or at-risk case;
(b) welfare plan for the child(ren) and if necessary, for family members;
(c) key social worker responsible for following up the case;
(d) respective roles of members in implementing the welfare plan; and
(e) date of review conference, if necessary.

Transfer of Information

61. The investigating social worker should complete immediate welfare services as agreed in MDCC, e.g. waitlisting of residential care services before transferring the case to the follow-up unit. To facilitate smooth case transfer, the investigating social worker should prepare relevant documents including case summary, confirmed minutes of the MDCC, register of CPR if required and inform the child and his/her family about the case transfer to the follow up unit. The incoming social worker should also take active steps to facilitate the case transfer.
V. POST CONFERENCE MANAGEMENT

De-briefing for Family

62. If the key social worker responsible for following up the case is not the investigating social worker, the Chairperson and the investigating social worker should arrange debriefing for the parents and the child who have participated in the MDCC and prepare them adequately for the transfer of the case. Discussion during debriefing should be noted in the case record.

63. In case the parent(s) is/are not satisfied with the decision made by the MDCC, he/she/they can lodge any complaint to the Chairperson who has to explain to the parent(s) the reasons for the decision. Nevertheless, the welfare plan should still be carried out as far as practicable even when the parent(s) has/have lodged a complaint against the welfare plan. If there is new information provided by the parent(s), upon consultation with all members, a review conference may be considered.

64. If the complaint is against a particular member of the MDCC, the complaint should be channeled to the respective organisation of that member for handling.

Minutes of MDCC and Notification Letter to Family

65. The Chairperson should clear the minutes of the MDCC prepared by the investigating social worker and issue to members for amendments preferably within two weeks after the MDCC. A sample format of the minutes of the MDCC is at Annex IIC to Chapter 11 for reference. The confirmed minutes should also be sent to members no later than one month after the MDCC.

66. Parent(s) and the child(ren) having attended the MDCC will not be provided with minutes of the MDCC as they are not members.

67. Regardless whether the parent(s) has/have attended the MDCC, a notification letter to the parent(s) stating the decisions of the MDCC, highlighting the welfare plan for the child and restating that the decision of the MDCC has no binding effect on the decision of the Police whether to institute criminal proceedings against the abuser(s) or not, may be issued by the Chairperson. A sample of the notification letter is at Annex IID to Chapter 11 for reference. The letter may need to be translated into the appropriate language to facilitate communication with the service user.

VI. LEGAL CONCERNS

Prosecution and Protection
68. Child abuse may be a criminal offence. Prosecution of the abuser is part of child protection work although it may not be initiated for every child abuse case. However, the definition of child abuse as set out in Chapter 2 has neither legal effect nor legal implications. It only provides operational guidelines in dealing with child abuse cases. Besides, the focus of the discussion at the MDCC should be on the welfare of the child(ren). Therefore the decision of the MDCC regarding the nature of the case has no binding effect on prosecution of the abuser(s) while members may give views on the implications of prosecution on the welfare of the child(ren).

69. The Chairperson should take note of the measures as stipulated in paragraphs E(3), G(2)(c), H(7)&(8), I(5) and K(5) in the “Guide to Participants of MDCC”, to avoid contamination of evidence during discussion at the MDCC.

Role of Police

70. The police officer in charge of the investigation of the suspected child abuse case should attend the whole MDCC as member to inform the MDCC the progress, but not the details of the investigation of the incident(s), i.e. the case is still being investigated, legal advice is being sought, no charge has been laid or a charge has been laid against the suspected child abuser(s) and contribute his/her professional knowledge as far as possible.

71. The police officer attending the MDCC should remain neutral during the discussion on the nature of the case in order to avoid being accused of showing prejudice in the criminal investigation (see (5) of paragraph K in the “Guide to Participants of MDCC” for details).

72. The police officer may also advise members on the progress of criminal investigation and to provide relevant information on the abusive incident(s) which is deemed essential for the formulation of a suitable welfare plan for the child(ren) concerned.
References:


Annex IIA to Chapter 11

Introductory Remarks in Relation to
Personal Data (Privacy) Ordinance, Cap 486
by the Chairperson of Multi-disciplinary Case Conference (MDCC)

English Version:

“In accordance with Section 18(1) of the Personal Data (Privacy) Ordinance, Cap 486, the parents may make a data access request for a copy of their own and/or the child’s personal data as contained in the reports and/or minutes of the MDCC. Please clarify whether you wish the information to be provided by you during this MDCC to be kept confidential in which case you would be regarded as the data user in relation to such information even though the information is held in our record. This is because Section 2 of the Personal Data (Privacy) Ordinance provides that a person who does not hold the data but control use of the data may nevertheless be regarded as a data user. Under Section 20(3)(d) of the Ordinance, a data user who is the data holder is permitted to refuse a data access request made by the data subject where any other data user controls the use of the data in such a way as to prohibit the non-controlling data user from complying, either in whole or part, with such request. If the data access is refused by us under this provision, the Ordinance requires us to inform the requestor of the name and address of the data user retaining control of the use of the data. Unless any of the exemptions provided in Part VIII of the Ordinance is applicable, the data user who retains control of the use of data is obliged to comply with the request”.

中文本：

根據《個人資料(私隱)條例》(以下簡稱《條例》)第18(1)條，家長可提出查閱資料要求，取得一份會議報告及／或記錄所載有關其本人及／或子女的個人資料複本。請各位表明是否希望把各位在會議中所提供的資料保密。如當作保密資料處理，則即使這些資料是由我們的記錄備存，各位仍會被視為這些資料的資料使用者。《條例》第2條訂明，任何並無持有資料但控制資料的使用的人士，均會被視為資料使用者。根據《條例》第20(3)(d)條，如有另一資料使用者控制該等資料的使用，而控制的方式禁止非控制該等資料的資料使用者依從（完全依從或部分依從）查閱資料要求，則該持有資料的資料使用者可拒絕依從資料當事人的查閱資料要求。《條例》訂明，如我們根據這項條文拒絕查閱資料要求，我們須告知提出要求者控制資料使用的資料使用者的姓名（或名稱）及地址。除非可援引《條例》第VIII部所訂的豁免，否則，控制資料使用的資料使用者必須依從查閱資料要求。
(Sample Invitation Letter for MDCC)

Our Ref :
Address :
Tel. No. :
Fax No. :
E-mail :

Dear Sir / Madam,

Multi-disciplinary Case Conference on Suspected Child Abuse Case

Name  :
Sex / Age :

You are cordially invited to attend a case conference on a suspected child abuse case concerning the above-named child with detailed as follows:

Date  :
Time  :
Venue :


To facilitate fruitful and productive sharing on the case nature and the welfare plan of the child(ren) and his/her family, would all members please prepare written report on the child(ren) for the reference of the case conference as far as possible.

Attached please find the Agenda of the Conference and the Feedback Form for Family Participation. Please fill in the form and return to me by fax on or before ____________. If you have any views on the membership or agenda, please feel free to contact me or the investigating social worker, (name) ____________ at (tel. no.) ____________.

I look forward to seeing you in the conference.

Yours faithfully,

(                                        )

*Delete as appropriate

Encl.
Distribution *(The list of members should be worked out on case-by-case basis. The membership list below is for reference only.)*

Dr xxx, Senior Medical Officer / xxxxxx Hospital (Your Ref: )
Miss xxx, Nursing Officer / xxxxxx Hospital (Your Ref: )
Mr xxx, Medical Social Worker / xxxxxx Hospital (Your Ref: )
Mr xxx, Senior Inspector / xxxxx Police Station (Your Ref: )
Miss xxx, teacher / xxxxx Primary School (Your Ref: )
Ms xxx, Social Work Officer / Family and Child Protective Services Unit (xx)
(SAMPLE)

Conference on Suspected Child Abuse Case

Name : 
Sex / Age : 
Date : 
Time : 
Venue : 

AGENDA

I. Introduction

II. Information sharing

1. Report by investigating social worker
2. Report by medical officer
3. Report by medical social worker
4. Report by nursing officer
5. Report by police officer
6. Report by school teacher

(Order of sharing to be arranged on a case-by-case basis)

III. Discussion

1. The case nature
2. The welfare plan for the child and the family

IV. Any other business

(e.g. arrangement of case transfer, need for review conference, progress report, debriefing to family, etc.)
Dear Sir / Madam,

Name of child : 
Sex / Age : 
Date of Conference :

I propose to invite _____________________ (suspected abuser*) who is (relationship) of the victim

☐ to attend the whole case conference.
☐ to attend the second part of the case conference at the time of welfare plan formulation.
☐ to be present at the time when initial recommendation on welfare plan is made.

Please give your opinion regarding the above arrangement by filling and returning the reply slip below to me by fax at your earliest convenience.

(                                     )

---

**Reply Slip**

(Fax No.: __________)

To : 
From : 
Date :

Name of Child : 
Date of Conference :

☐ I agree to the proposed arrangement of family participation in the case conference.
☐ I do not agree / have reservation* to the proposed arrangement because

☐ I propose the following alternative arrangement (with reasons):

---

Signature : ____________________
Name : ____________________
Post : ____________________
Tel. No. : ____________________

* Delete as appropriate
Minutes of Multi-disciplinary Case Conference on Suspected Child Abuse Case

Re : Name of child : xx
Sex / Age : xx

Date :
Time :
Venue :

Present :
Absent with apology :

1. Introduction

2. Sharing of information
   2.1 Report from Investigating Social Worker
   2.2 Report from Medical Officer
   2.3 Report from Medical Social Worker
   2.4 Report from Ward Nurse
   2.5 Report from Police
   2.6 Report from Class Teacher and Student Guidance Teacher
   (Order of sharing to be arranged on case-by-case basis)

3. Discussion
   3.1 Nature of the case
(The participants of MDCC should review and consider the whole situation and re-classify or re-define the case (if necessary) but not just focusing on the suspected child abuse incident.)

- risk
- violence within the family
- strength within the family
- support outside the family

3.2 Welfare Plan for the Family
- Monitoring, progress report, review meeting

4. Any Other Business
(參考樣本)
多專業個案會議後的致家長信

XXX 先生／女士，

懷疑虐待兒童多專業個案會議

兒童姓名：
性別／年齡：

多謝你／你們於____________(日期)參與有關上述兒童的個案會議。

(如家長未有出席會議：一個由____________(與會機構)組成的多專業個案會議已於____________(日期)召開,以商討上述兒童的福利事宜。)

各與會人士在當日的會議中對上述兒童的狀況均表示十分關注；而有關事件亦已在會議中被界定為_________________________個案。個案會議亦決定該名兒童的福利計劃如下：

___________________________________________________
___________________________________________________

__________先生／姑娘將會由____________(日期)開始跟進本個案,並會與你商討落實多專業個案會議為該名兒童制定的福利計劃。__________先生／姑娘的聯絡電話及地址為______________________。

本人希望你／你們能夠與有關人士共同努力,確保上述兒童能得到最適當的照顧。

請留意，個案會議的決定,不會對警方在有關案件的調查及決定會否刑事起訴有關的違法人士方面，具有任何約束力。

如你有任何疑問,請與我聯絡,電話__________。

(                                                                )
姓名

註：信件內容可因應個別個案作出修訂
Frequently Asked Questions about Multi-disciplinary Case Conference (MDCC) on Child Abuse

1. What factors should be taken into consideration when determining whether a case is a child abuse or not in MDCC?

In determining whether a case should be defined as a child abuse case, the responsible professionals should make assessment based on individual case merits and taking into consideration various factors (e.g. the child’s age, the act, the consequences of the act on the child, etc.) instead of just focusing on the frequency and nature of incident that has occurred.

2. Can the MDCC make decision by voting rather than by consensus as stated in (2)(e) of paragraph G in the Guide to Participants of MDCC?

By consensus each member is given the opportunity to express and exchange his/her views with others. This is the basis of multi-disciplinary cooperation. This is particularly important as child abuse and the welfare plan for the victims are very delicate issues that should not be dealt with simply by voting.

3. Can the parent(s) appeal against the decision made by the MDCC?

The parent(s) can lodge any complaint to the Chairperson who has to explain to the parent(s) the reasons for the decision. If there is new information that has not been fully addressed in the first MDCC, the Chairperson, upon consultation with all members, can consider holding a second MDCC.

If the complaint is against a particular member of the MDCC, the complaint should be channeled to the respective agency of that member for handling.

4. Can the alleged perpetrator attend the MDCC?

The focus of the MDCC is on protection and welfare of the child but not prosecution of the abuser. The welfare and rights of the child should always be the paramount concern. In case the parent(s) is/are suspected abuser(s), careful consideration and balancing of different views from all members should be rendered to determine whether to invite the parent(s) to attend the MDCC. The parent(s) who is/are suspected abuser(s) can attend the MDCC if it is assessed by the Chairperson and all members, including the Police, to be suitable.

5. Can the alleged perpetrator send his/her legal representative to attend the MDCC?

As the focus of MDCC is not on prosecution of the abuser and it is a forum by which professionals having a major role in the handling and investigation of a suspected child abuse case to share their information and concern on the child,
there is no ground for the alleged abuser to send his/her legal representative to attend the MDCC.

6. **Can the parent(s) or the child victim(s) ask their friends or relatives to accompany them during the MDCC?**

Subject to the consent of members of the MDCC, significant family members and relatives who have sound knowledge of the child victim(s) and would be contributive to the welfare planning of the child victim(s) can also be invited to attend the MDCC.

7. **Can the parent(s) or the child victim(s) attend the MDCC if they have special communication needs?**

Measures should be taken to facilitate effective communication for parent(s) or child victim(s) who participate in MDCC. If the parent(s) or child victim(s) have special communication needs, accredited interpreters, sign language interpreters or others with special communication skills should be made available to facilitate family participation in MDCC. Updated list of accredited interpreters can be obtained from the Senior Court Interpreter of the High Court. Family members, relatives or friends of the service users should not be regarded as formal interpreters during MDCCs.

8. **Does class teacher need to attend MDCC?**

The class teacher may be included in MDCC as he/she possesses relevant knowledge regarding the child and his/her family. Such information provides good reference materials for the MDCC in working out a welfare plan to the best interest of the child. However, if the class teacher cannot attend the MDCC, a suitable representative, who has sufficient understanding of the case, can report on the child’s family situation, school performance, conduct and emotional condition in school.

9. **Can the case been transferred to the follow-up unit before confirmation of minutues?**

In principle, the investigating social worker should prepare relevant documents including case summary and confirmed minutes of the MDCC before transferring the case to the follow-up unit. If there is a dispute on confirmation of the minutes, the Chairperson / the supervisor of the investigating social worker should help to settle the dispute and issue the confirmed minutes as soon as possible.