

**Protecting Children from Maltreatment —
Procedural Guide for Multi-disciplinary Co-operation
(Revised 2026)**

Revised Content

1. Core Procedures

Chapter	Revised Content
Foreword	Add the reasons for revising Protecting Children from Maltreatment — Procedural Guide for Multi-disciplinary Co-operation (the Procedural Guide)
Glossary	<ul style="list-style-type: none"> ● Add “Mandatory Reporting” ● Change the original term “Reporting” to “Normal Reporting” so as to distinguish it from mandatory reporting ● Add the term “Assessing Worker”, referring to social worker who is responsible for “Social Assessment for Child Protection”. These two terms have replaced the previous “Investigating Social Worker” and “Child Protection Investigation”. The purpose of changing the terms is to more clearly distinguish the social assessment work conducted by social workers from the criminal investigation conducted by the Police, and especially to prevent children and their families from confusing the work of the two disciplines. Corresponding revisions have been made to relevant chapters and letter templates in the Guide
1	<ul style="list-style-type: none"> ● Add the requirements of mandatory reporting of child abuse (paragraph 1.2) and add mandatory reporting in relevant paragraphs ● Point out that when families face difficulties in disciplining and/or caring for children or seek assistance from professionals, a multi-disciplinary collaborative support approach, rather than an investigative one can effectively assist the family while avoiding excessive intervention and distress to the family (paragraph 1.8) ● Regarding various stages of case handling, change the original stage “investigation” to “investigations and assessments related to child protection” to more clearly illustrate the assessment work of social workers and other professionals at this stage (paragraph 1.10 and other relevant descriptions in the Procedural Guide)
2	<ul style="list-style-type: none"> ● Briefly describe the definition of child maltreatment covered in the Procedural Guide and the scope of application of serious

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	<p>harm/child abuse as specified in the Mandatory Reporting of Child Abuse Ordinance (paragraph 2.6) with a diagram as illustration</p> <ul style="list-style-type: none"> ● Replace wordings like “define” and “decide” whether an incident is child maltreatment with “regard”, “consider” and “categorise” to show more clearly that this is the result of discussion and assessment from the perspective of protecting the safety of children ● Enhance the illustration in certain frequently asked questions in Appendix 1 <ul style="list-style-type: none"> ■ whether corporal punishment can be adopted for child discipline (Question 1) ■ whether it constitutes neglect or psychological harm/abuse if parent(s) cannot fulfill a child’s basic/psychological needs due to mental/emotional/intellectual problems or chronic illness, or reject the required training of a child due to inability in accepting the child’s special needs (Question 6) ■ under what circumstances conducting a social assessment for child protection and convening a multi-disciplinary case conference on protection of child with suspected maltreatment (MDCC) may be appropriate even if the newborn’s urine test is negative (Question 7)
3	Add mandatory reporting to the procedures for case handling and relevant flowcharts as well as refine the descriptions of certain procedures (paragraphs 3.1 and 3.2), and add a diagram as illustration
4	<ul style="list-style-type: none"> ● Add the content regarding making mandatory reporting to the Authority in accordance with requirements and specified way (paragraphs 4.1, 4.5 and 4.16(7)) ● Update the diagram regarding case identification to paragraph 4.2 ● Under the indicators of psychological harm/abuse, add “Falsification of illness in the child making the child believe he/she is ill and become anxious” (paragraph 4.4(5)(b)(ii)) ● Update the role of school social workers providing services in pre-primary institutions (paragraph 4.10) ● Emphasise that for suspected sexual abuse cases between family members or involving multiple child victims, no matter it is a “known case” of a casework unit, <u>the case should be reported to FCPSU before contact is made with the child’s family members</u> (paragraph 4.11)

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	<ul style="list-style-type: none"> ● Revise the form for reporting suspected child maltreatment case to social service unit (Appendix 2), the content of which is the same as the form for reporting case to the Police in Appendix 4 to Chapter 10, to facilitate personnel to report the case to the Police with the same form. It should also be noted that if the social service unit receiving the report deems it necessary to forward the form to the Police, it may consider invoking section 58 of the Personal Data (Privacy) Ordinance (paragraph 4.13)
5	<ul style="list-style-type: none"> ● Illustrate more clearly the key concerns during the initial assessment stage (paragraphs 5.1 and 5.2), and add a diagram to paragraph 5.2 for illustration ● Provide a more detailed description of the scope and results of the initial assessment (paragraphs 5.10 to 5.12), and add the following example where immediate action is required to protect the safety of the child concerned/other children: there are circumstances indicating where the carer/family member has a concrete plan to seriously harm the child or is unable to manage his/her own emotion and will cause serious harm to the child (paragraph 5.10)
6	<ul style="list-style-type: none"> ● Outline more clearly the considerations for taking action(s) to protect children under various situations, including invoking the provisions of the Protection of Children and Juveniles Ordinance (paragraph 6.1). ● Describe separately the requirements for immediate police intervention to protect children from criminal investigation, and emphasis that under no circumstances will the child being harmed/maltreated be obliged to report the case in person at a police station (paragraph 6.4) ● Point out if it is suspected that the incident involves intra-familial sexual abuse or more than one child having been sexually abused, personnel should contact Family and Child Protective Services Unit (FCPSU) before contacting the child's family, such that FCPSU may contact the Police to discuss handling strategies as needed (paragraph 6.4(4))
7	<ul style="list-style-type: none"> ● Describe more clearly some of the guiding principles of risk assessment (paragraph 7.5), including (4) if the person suspected of harming the child is only temporarily separated from the child, it should not be considered that the risk has been eliminated; (7) when considering whether to remove the child from his/her family and make alternative care arrangements, the yardstick is whether the parent(s)/carer has/have failed to meet the most basic

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	requirements for ensuring the child’s safety; and (8) an example of protective factor
8	<ul style="list-style-type: none"> ● Change the name of “Child Protection Investigation” conducted by social workers to “Social Assessment for Child Protection” to more clearly distinguish it from the criminal investigation conducted by the Police ● Add a diagram to illustrate the purpose of the social assessment for child protection (paragraph 8.1) ● Update the role of school social workers providing services in pre-primary institutions at this stage (paragraph 8.4) ● Update and re-organise the scope and items of data to be collected when conducting the Social Assessment for Child Protection (paragraph 8.5) ● Further explain the points-to-note when conducting social assessment for child protection, including the following: <ul style="list-style-type: none"> ■ the information about the incident where the alleged perpetrator is not a family member/relative of the child is usually collected by police officers (paragraph 8.6(5)) ■ considerations for risk assessment (paragraph 8.10) ■ the involvement of child and their family members as much as possible in risk assessment (paragraph 8.16) ■ how to initially formulate a child protection/follow-up plan (paragraph 8.20), obtaining views from parent(s) detained for child maltreatment regarding future child care arrangement (paragraph 8.21); and ■ assisting the alleged perpetrator (paragraph 8.30) ● Explain in more detailed the points-to-note for preparing a Report on Social Assessment for Child Protection including how to select relevant information (paragraphs 8.24 and 8.25). ● Re-organise the content and key points of the sample for reference of Report on Social Assessment for Child Protection in Appendix 2
9	<ul style="list-style-type: none"> ● Update the List of Designated Paediatric Department within the Hospital Authority Hospitals in Appendix 1
10	<ul style="list-style-type: none"> ● Add content regarding mandatory reporting (paragraphs 10.1 and 10.2)

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	<ul style="list-style-type: none"> ● Add content regarding police's assistance should be sought as soon as possible if the situation is urgent and police's immediate intervention is urgently needed to protect the child (paragraph 10.5) ● Combine the original Appendix 4, Report Form for Reporting Suspected Child Abuse Cases to Police, and Appendix 5, Written Dated Notes, and remove the original Appendix 5
11	<ul style="list-style-type: none"> ● Illustrate more clearly the objectives of and things to consider in MDCC (paragraphs 11.2 and 11.3) supplemented by a diagram ● Under circumstances warranting convening MDCC, add “unless the possibility of child maltreatment has been ruled out by related professionals during the investigation/assessment (for example, the child's physical injury was purely accidental and did not involve neglect on the part of the carer) and the risk of harm to the child in future is considered low” (paragraph 11.5) ● For discussion in other means rather than in a meeting, add “and the follow-up plan is relatively straightforward” (paragraph 11.6(1)(b)) ● Regarding the timing of convening MDCC, add “other related professionals should also complete relevant investigations/assessments as soon as possible so that they can provide the necessary information and participate in the discussion at the meeting” (paragraph 11.10) and “it is not advisable to hold a meeting without sufficient information to discuss important issues, especially on how to protect the safety of children in future. Before a formal MDCC can be held, related professionals can discuss the matters that need to be addressed in other ways” (paragraph 11.11) ● Regarding membership of MDCC, when the alleged perpetrator is a staff member of an organisation, further illustrate the arrangement for the representative of the organisation to attend certain part(s) of MDCC and whether he/she can participate in the discussion of certain items (paragraph 11.25) ● Illustrate more clearly the meaning of category (c) of child protection case (paragraph 11.27(3)(c)) ● Replace wordings like “define” and “decide” after discussion in MDCC with “consider”, “suggest” and “conclude” to show more clearly that this is the result of discussion and assessment from the perspective of protecting the safety of children ● State that if the alleged perpetrator is a staff member or volunteer of an organisation, the MDCC will not discuss whether the

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	<p>organisation/staff has committed any professional or management malpractice (paragraph 11.28)</p> <ul style="list-style-type: none"> ● State that the notes of MDCC do not need to record the discussion process in detail (paragraph 11.75) ● Illustrate further the handling of parents' expressed dissatisfaction over various aspects related to MDCC (paragraphs 11.88 to 11.91) ● Enhance the illustration in frequently asked questions in Appendix 6 (Questions 1 and 2)
12	<ul style="list-style-type: none"> ● Add "If the family's circumstances change and new problems/risks arise making the child have to stay in the residential child care service continuously, the professionals following up the case should jointly discuss and make the decision" (paragraph 12.28) ● Add the consideration to make mandatory reporting when there is recurrence of suspected child maltreatment incident (paragraph 12.32)
13	<ul style="list-style-type: none"> ● Add content regarding mandatory reporting under handling of child maltreatment allegations against staff, carers and volunteers of organisations ● Re-organise the sequence of the paragraphs and enhance the content regarding criminal investigation, including when and how to report to Police, and other points-to-note (paragraphs 13.6, 13.7 and 13.12)

2. Annexes

No.	Revised Content
2	Regarding information sharing and confidentiality, add content related to section 12 of the Mandatory Reporting of Child Abuse Ordinance, a specified professional does not incur any civil or criminal liability only by making a report, and must not be held to have breached any code of professional conduct or ethics (paragraph 1)
3	Add a few sexual offences under Crimes Ordinance, Cap. 200 including sections 118G、118H、118J、118K and 153P

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4	<ul style="list-style-type: none"> ● Add general points-to-note related to mandatory reporting under the roles of various social service units ● Under the categories of reports received by FCPSU, add “child maltreatment allegations against staff of organisation, carers and volunteers monitored by organisations” and add “if there is child maltreatment allegation against staff, and carers and volunteers monitored by organisations, please refer to Chapter 13 of this Guide” under other social services units ● Under Casework Units Operated by SWD and Subvented NGOs and Medical Social Services Units under the Hospital Authority, add that “if the mandatory reporting case received by the Authority is a known case of SWD or subvented NGOs, or the medical social services units under HA, the Authority will notify the unit to be responsible for the following handling procedures” (paragraph (III)(2)(a))
6	Add general points-to-note related to mandatory reporting under the roles of clinics/units under Department of Health
7	Add general points-to-note related to mandatory reporting under roles of hospitals/out-patient clinics of the Hospital Authority
8	<ul style="list-style-type: none"> ● Add general points-to-note related to mandatory reporting under roles of child psychiatry service of the Hospital Authority ● Update the List of Child and Adolescent Psychiatry Teams in Appendix 1
9	Add general points-to-note related to mandatory reporting under roles of clinical psychological service
10	Add general points-to-note related to mandatory reporting under roles of educational services
11	Add an example of asking a child “Why... ..” (paragraph (1)(c)(vi))
13	Add general points-to-note related to mandatory reporting regarding reporting suspected sexual abuse incidents and refine the description of certain case scenarios
14	Update content according to the latest revised data input forms and way of case registration
15	<ul style="list-style-type: none"> ● Add Mandatory Reporting of Child Abuse Ordinance (Cap. 650) under ordinances related to child protection work

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	<ul style="list-style-type: none"> ● Re-organise the frequently asked questions related to Protection of Children and Juveniles Ordinance in Appendix 2
19	<p>In the Reference Kit for Chairperson of MDCC, add the following information:</p> <ul style="list-style-type: none"> ● Points-to note when MDCC is conducted via video means (paragraph 6(e)) ● Arrangements and considerations for the participation of an organisation's representative in MDCC if the alleged perpetrator is an employee, or carer or volunteer under the monitoring of an organisation (paragraph 9(h)) ● Further explanation and case scenarios of the categories of child protection cases (paragraphs 24 and 25) ● Supplementary explanation on how to handle situations where certain follow-up actions cannot be completed as planned before case transfer (paragraph 36) ● Update the handling of dissatisfaction or complaints from parent(s) (paragraph 52) ● Point out that notes of MDCC should be concise, focusing on recording decisions or recommendations regarding how to protect children rather than the discussion process (paragraph 54) ● Added special arrangements for certain MDCC participants to the Checklist for Chairperson of MDCC in Appendix 1 ● Revised some wording and descriptions in the sample notes of MDCC in Appendix 2
21	<p>Supplement that if a child reveals further incident(s) or information about the maltreatment, personnel should consider the need to make a mandatory report/normal report based on the information obtained (paragraph 8)</p>