

CHILDREN'S SOCIAL CARE SERVICES



Social Work Practice Standards

WHY DO WE NEED PRACTICE STANDARDS?

- All social workers, supervisors and managers have clear guidance on their roles and responsibilities
- Consistent approach to the social work task
- Clear expectations of what is expected of social workers and front line managers and that they can measure themselves against
- Confident professional service that is respected by families and other professionals that can champion the needs of children through their work and challenge others, where necessary to promote the welfare of the child
- A set of standards that quality assurance work can measure against
- Not a reiteration of timescales but something that addresses quality

“To enable social workers to exercise professional judgement ... also ... to improve their expertise”

- quote from Munro

To support the social work standards there are:

- Supervision Standards
- Management Standards
- Performance Framework
- Appraisals
- Children's procedures in addition to Tri-x
- A set of assessment and direct work tools that social workers can use in their work
- Adherence to the professional standards set down by the social work professional body - the Health and Professionals Council

Key Messages from Bromley Children's Social Work Practice Standards:

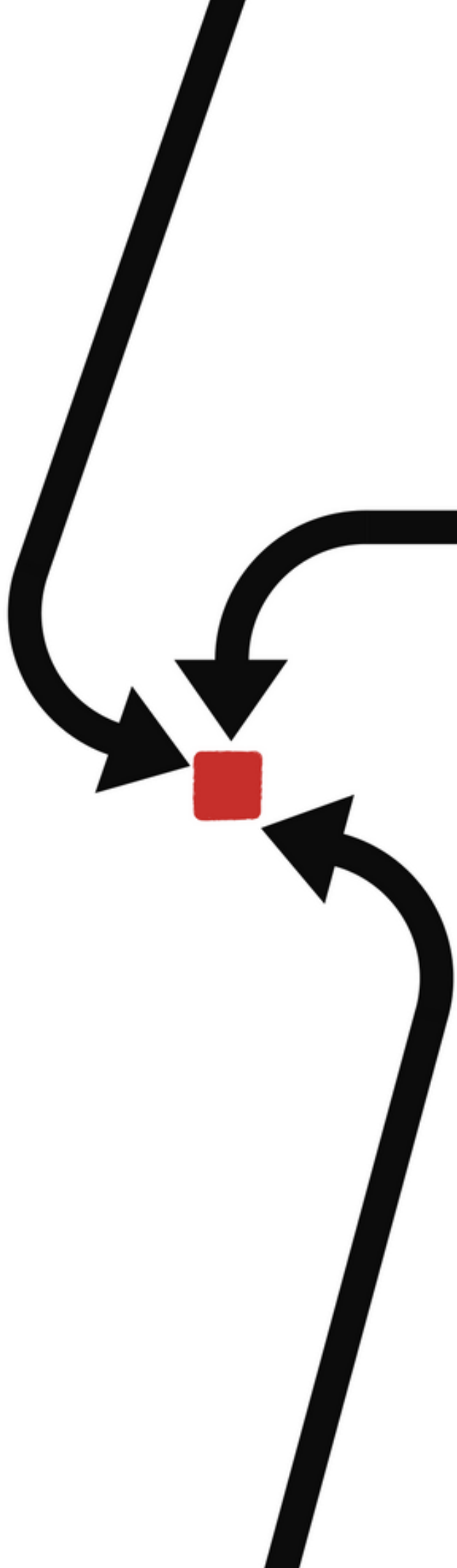
- An ambition to ensure that all children and families in Bromley who access children's services receive the right level of service at the right time.
- High quality social work services that begin from early and responsive intervention at the point of contact.
- The safeguarding and welfare of the child is the focus for all that we do as social workers.
- Families will be treated with respect and honesty and kept informed throughout any social work intervention.
- The strengths of families as well as concerns will be assessed and used to safeguard children.
- The work with children and their families will be based on the achievement of identified improved outcomes that are measurable so that the child sees an improvement in their circumstances and feels safer.

Every social worker should know the answer to:

- How does the child feel?
- What does it feel like living in the family?
- How is our intervention impacting on improving the child's circumstances?
- How do we know this?

For all open cases there must be:

- At the point of allocation the deputy group manager will record on the electronic system the case issues, desired outcomes and tasks to be carried out by the allocated social worker with timescales set out.
- An up to date assessment on each child which is regularly reviewed and has been authorised by the deputy group manager.
- Deputy group managers to identify progress; outcomes, impact achieved and what difference we made.
- A chronology of significant events that includes risk and protective factors and is up to date no longer than within a 6 month period.
- An agreed plan for the intervention with the child and their family is reviewed in supervision and through multi- agency planning meetings (i.e. CIN Meetings; CP Conferences/Core Groups, LAC and Pathway reviews; TAC Meetings).
- A record of supervision (4 weekly) and management oversight i.e. authorisations, managers comments and evidence of audit activity.
- The deputy group manager to complete a supervision summary every six months to ensure a routine analysis of case, risks, progress, and outcomes being achieved.



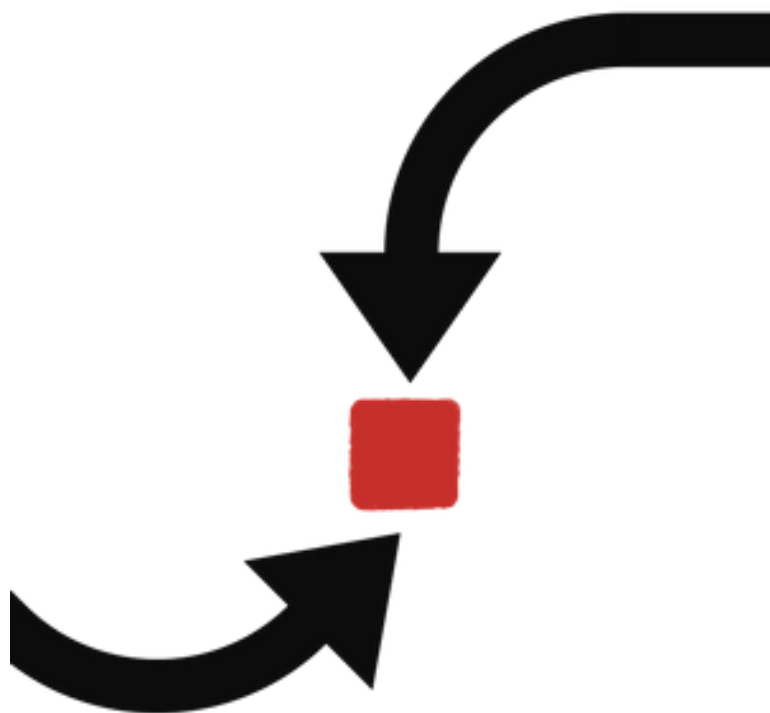
SOCIAL WORK PRACTICE STANDARDS

For all assessments

- The child (depending on age and understanding) and the family know about the assessment and are actively involved in any assessment. Their consent to undertake agency enquiries has been gained unless there is a clear safeguarding issue that makes this inappropriate (this decision will be recorded by the appropriate manager).
- All single assessments are completed in a timely way in line with Bromley's procedures, statutory guidance and as directed by the deputy group manager recorded on the electronic system.
- The child is seen and spoken to alone with their views, wishes and feelings recorded. If the child is not seen the professional reason and rationale, agreement sought and recorded by the team manager on the electronic file.
- All members of the household will be included – i.e. all adults and children living in the home; those that spend significant periods in the home or have child care responsibilities supporting the family.
- Partners, estranged parents – i.e. fathers or mothers not living with their child and extended family – will be identified and their role and involvement in the family understood and included in the assessment in an appropriate way – analysis of this should be clear.
- Due regard will be given to race, ethnicity, gender, disability, religion and communication needs of the family.
- The concerns of other professionals are listened to, clearly recorded and this information is used in the assessment.
- The history of previous involvement is read, understood and used to inform the current thinking and a chronology of significant events completed.
- Assessment tools are used where appropriate, their use is identified in recordings and the resultant analysis is used clearly in the assessment.
- Risk and protective factors are identified, analysed and assessed with rationale for the decisions being made.
- The assessment provides evidence for the findings, all sources of information are identified and there are clear recommendations including for future work or no further action, referral to other agency.
- If the assessment is no further action (NFA) from the statutory children's service consideration to be given to stepping down to the Early Intervention and Family Support Services (EIFS) with a clear plan of work and appropriate CAF/Referral and introductions together with handover professional meeting.
- Letters will be sent to families and professionals to inform them of the outcome of assessments; if the case is to be closed or will be supported by other agencies or, step down who the contact or lead professional will be.
- The assessment has been read by deputy group manager and comments and feedback provided as part of the authorisation process.
- The assessment is shared openly with the child and family and their feedback sought and their views recorded.
- The professional referrer is informed of the outcome of the assessment and, with the consent of the family, information from the assessment should be shared as part of the Step-Down referral to allow for the involvement of Early Intervention and Family Support Service.
- A transfer/closing summary should be placed on the file and will be authorised by the deputy group manager.

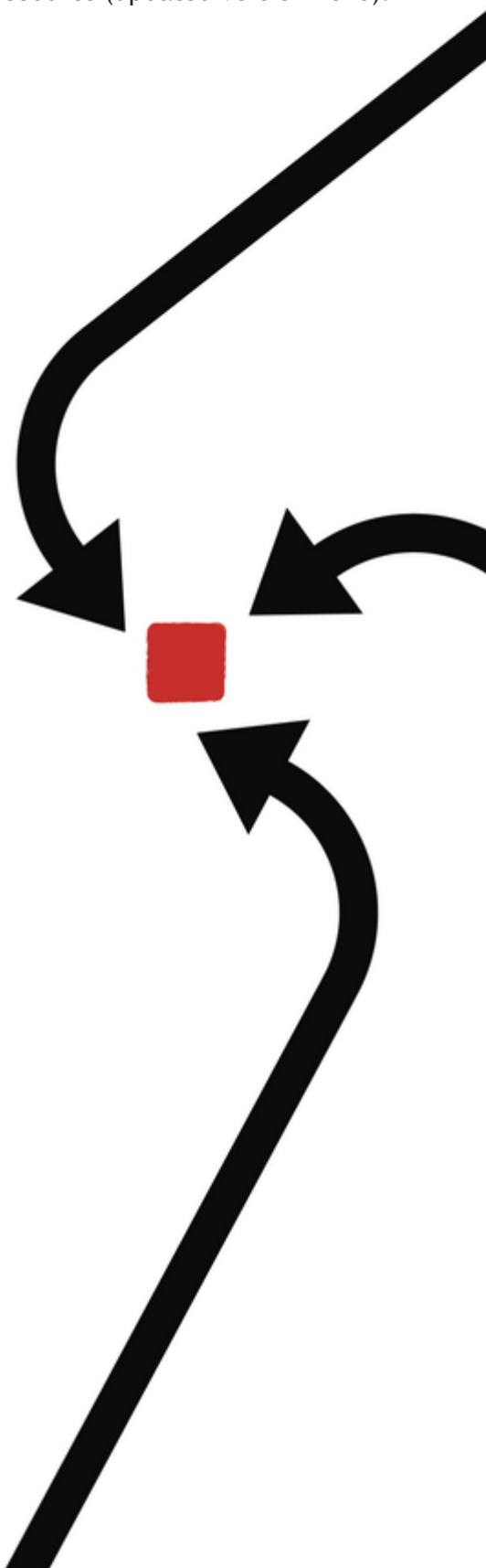
S47 Investigation and Initial Child Protection Conference

- The London Child Protection Procedures are followed and referenced in records and decisions.
- Concerns of significant harm that indicate a S47 investigation is required have been recorded and fully discussed with the deputy group manager and the decision to undertake a S47 agreed and recorded on the electronic system in writing by the deputy group manager.
- A strategy discussion within 24 hours involving all relevant agencies is undertaken, this will be in the form of a meeting - face to face, where ever possible, the plan for the enquiries and decisions recorded and a record sent to all participating professionals. If no face to face meeting is held this needs to be recorded and authorised by the deputy group manager.
- An interim plan will be considered and put in place that includes the plan for the enquiries, arrangements for seeing the child and the requirement for any written agreement with the parent is fully recorded.
- Checks with all relevant agencies have been undertaken and recorded on the S47 checklist and placed in documents on the electronic system.
- The S47 is led by a qualified and experienced social worker.
- A single assessment is the means by which the S47 investigation will be undertaken.
- The child has been seen and spoken to alone and their presentation, views, wishes and feelings recorded. All siblings in the house will be considered as part of the investigation.
- The history has been read, understood and used to inform the current investigation.
- Risks have been identified and analysed using recognised risk assessment tools.
- The strengths of the family have been considered and used to inform any decision.
- The investigation concludes following evidence based assessments and a judgement about the level of the risk of harm and whether it is significant will determine the action required to safeguard the child.
- The outcome has been discussed with the deputy group manager and a management decision is recorded in relation to the next stage – i.e. NFA; Step-Down; CIN; ICPC; LAC; Pre proceedings, issuing proceedings.
- The ICPC is convened within 15 days of the strategy discussion.
- Where the child who is the subject of the ICPC is under the age of five, including unborn, the Bromley Children Project should be invited to the ICPC and the Plan for the family should incorporate relevant activities on offer through the Children and Family Centres.



The social workers report to the ICPC includes:

- Summary of the reason for the referral and information analysed as part of the investigation (referral, assessment).
 - Chronology of significant events including risk and protective factors.
 - Child's current and past developmental needs.
 - Parents capacity to keep child safe from harm and respond to needs.
 - Child's views, wishes and feelings including any other children within the household.
 - Analysis of risk and protective factors, the impact on the child and the understanding of the parents of these factors.
- The report will be shared with the family at least 3 days prior to conference (unless emergency) and their comments recorded.
 - The report will be sent to the child protection chair 5 working days before the conference (unless convened in an emergency) the report must be signed off by a deputy group manager.
 - The parents will be prepared for attending the conference and consideration to be given to whether the child should attend for at least part of the conference. If they are not attending the conference they will be encouraged to contribute in an age appropriate way and their views recorded in the social work report if appropriate providing there are no safeguarding issues that would prevent this.
 - The child protection chair will also seek the child's views independently.
 - The outline child protection plan devised in the Signs of Safety model at the conference will address what needs to change in order to protect the child and the outcomes to be achieved.
 - The child protection chair will set the date of the next conference; the date of the core group together with the membership.
- The child protection chair will be responsible to escalate any non engagement by partners in the child protection process to the Group Manager for Child Protection in the Quality Improvement Service for tracking and monitoring to conclusion in accordance with the escalation policy.
 - Best Practice Guidance for Child Protection Conferences can be found in the London Child Protection Procedures (updated version 2016).



Working with children subject to a child protection plan

- Following the ICPC, the outline child protection plan and the allocated worker are recorded immediately on the electronic system.
- The first core group is held within 10 days of the conference and is used to put detail on the outline CP plan, agree outcomes to be achieved, set realistic targets to monitor progress and ensure that the family and child understand the plan and what it means.
- Visits to a child subject to a CP plan will take place every 2 weeks (10 working days) and the child is seen at each visit on their own as appropriate. This is recorded on the electronic system. Children can and should be seen more frequently if the case demands and there should be unannounced visits in addition.
- If a child is not seen alone the group manager must authorise the reason for this and make an assessment with regard to risk together with action to be taken.
- The child's wishes and feelings are regularly ascertained using direct work tools and their perception about whether things are improving for them recorded.
- Visits are purposeful, focusing on the identified risks; the CP plan recommendations; work with parents is collaborative and not punitive. They should be helped to understand the risks and what they can do to reduce those risks. Parents will be given time to reflect on progress made before core groups and review conference meetings. This is part of an authoritative and structured approach to child protection.
- The role of fathers, estranged parents and any partner living in the home is properly assessed and understood.
- The home conditions are assessed at visits and the kitchen, toilets/bathroom and bedrooms checked especially where neglect is an issue. This is part of the CP plan and there is clarity for both the social worker and family about what constitutes acceptable standards.
- The core group meets regularly 10 days following conference and 6 weekly thereafter.
- The multi-agency plan is reviewed against the targets and outcomes set. The record of each core group is shared with the family and all professionals involved in the plan.
- Reports for review child protection conferences will be prepared at least 5 days before the conference, shared with parents and child and their views on the report recorded.
- The report will be with the child protection chair 3 days before the conference. The social worker will have discussed the proposed recommendations and plan with the young person family/carer 15 days prior to conference.
- The report will outline the original concerns and the progress against the CP plan and concisely update the conference members on the current situation for the child and family.
- Progress of the CP plan is regularly reviewed in supervision and progress recorded; if progress is not being made what is the barrier to this and what is the contingency and timescales.
- Legal Planning will be fully considered when a child becomes subject to a CP plan, if the required changes have not been met by the third conference a legal planning meeting will be considered by the deputy group manager and group manager and the family informed.

Working with Children in Need

- An assessment has been completed and this indicates that a child requires a CIN service to promote their safety and wellbeing.
- A child is no longer subject to a CP plan but requires a CIN plan to continue the work to promote the child's safety and well being and ensure sustainability in the future.
- If a child is de-planned from a child protection conference the chair of the conference will ensure that there is an outline CIN plan and will set the first CIN meeting at 10 days and identify the professionals involved and their roles and responsibilities.
- There will be a clear CIN plan that is focussed on improved outcomes for the child, this plan should be multi agency and be agreed at the CIN meeting which should be held as follows: From CP plan to CIN - 10 days; CIN review meetings will be held every 6 weeks.
- The decisions and minutes from the CIN meeting will be recorded on the electronic system.
- The first CIN meeting will be chaired by a child protection chair and subsequent meetings will be chaired by the deputy group manager.
- The CIN meeting should be held in an environment that ensures that family and the child (dependent on age) can easily attend e.g. family home; school, children and family centre; other.
- Everyone involved in the CIN meeting will receive a copy of the CIN plan within 10 working days.
- All participants to the CIN plan will sign the plan and the plan will be uploaded to the electronic system.
- The plan will include working with the strengths in the family and are measured to enable the family and professionals working with them to show the progress in achieving outcomes - how do we know things are improving?
- The CIN Plan should be reviewed at least every 12 weeks. If satisfactory progress is not being made consideration will be given to escalating the intervention to child protection.
- A child subject to a CIN plan will be seen every 20 working days or as directed by the group manager.
- The progress of the CIN plan should be monitored through supervision which takes place every 4 weeks. A supervision recording of progress and barriers to progress will be placed on the file with the contingencies and recommendations by the team manager.
- When it is agreed that sufficient progress has been made the case will be considered for stepping down to EIFS with the last CIN meeting becoming the first TAC meeting.

Looked After Children

- When a child becomes looked after an up to date assessment of their needs should be in place (Single Assessment or UASC Age Assessment). This assessment will inform the selection of a placement in meeting the child's needs. Placement with siblings will be taken into account when planning a placement. If it is an emergency/unplanned admission the assessment will be completed within 15 working days.
- When a child needs to come into care a placement with family and/or friends will be considered and a Connected Persons assessment completed if appropriate.
- Consideration of a family group conference will be part of the assessment and planning and if this does not take place this must be recorded and agreed by the deputy group manager.
- The child will be visited within 3 working days of coming into care or having a change in placement.
- When a child is placed all the information (including family history and a view on the vulnerability of the child) needed to care for the child will be shared with the foster carer immediately at the point of placement.
- The placement meeting will be held within 5 working days to agree how the placement will meet the child's needs.
- For older children the risk of going missing and child sexual exploitation will be considered and a plan agreed and recorded to reduce the likelihood of this.
- A risk assessment will be completed and authorised by the deputy group manager.
- The child's needs in relation to race, ethnicity, language, communication, disability, gender, sexuality will be taken into account.
- Arrangements for contact with parents and other significant family members will be made at the time of the child coming into our care and regularly reviewed.
- Contact will be in the best interest of the child and supported and supervised as necessary.
- The child will be provided with a coming into care pack, children rights leaflet and contact card as soon as possible but no later than the first visit to the child within 3 days. When a child becomes looked after the business support based within Quality Improvement will be informed immediately for the allocation of a reviewing officer. All other professionals involved with the child will be informed of the child's legal status within 5 working days.
- An initial health assessment will be requested and carried out within 20 working days.
- A PEP meeting will be arranged within the school within 20 days.
- Where a young person is accommodated as a unaccompanied asylum seeking child a PEP meeting will be held within 10 days (as will be deemed an emergency) with the support of the Virtual School Head.
- Following the child attending a school or college a further PEP meeting will be held within 20 days and subsequently reviewed within the statutory guidelines at 6 monthly intervals.
- All LAC will be seen within 3 working days following placement and then monthly thereafter. Visits may need to be more frequent at different points in the child's journey in care and should be based on developing a positive and meaningful relationship with the child.
- The group manager can authorise less frequent visiting to a minimum of not less than 6 weekly. Any change to the visiting patterns will be set out by the deputy group manager in the supervision records with a rationale for increase/decrease in visiting patterns alongside evidence of IRO oversight in agreeing to this decision.

- An up to date care plan will be recorded on the electronic system within 10 days of placement and this will include the child's needs, consider intended outcomes and placement and service provision that is needed to meet the child's needs.
- At the point of the second review (if not in proceedings) the child must have a permanency plan included in their care plan. If a child is subject to care proceedings the permanency meeting must be held immediately following the first review to ensure that the court timetable is met.
- For young people in our care their aspirations for the future including their interest, views on careers and how they want their lives to develop should be included in the care plan from early teens.
- A pathway plan will be started when the young person is 15 years 6 months and will be reviewed by the IRO as part of the statutory review. When a young person begins transitions into the care leaving stages there will be:
 - An up to date pathway plan
 - Key events chronology updated
 - Birth certificate
 - National insurance number (applied for at 15 years old)
 - Passport (if appropriate)
 - Immigration status
 - Liaison with Housing to consider future engagement and housing opportunities
- Depending on the age of the child they will be encouraged to participate in their review and planning for that review. They will be given the opportunity to speak to their IRO on their own. Parents will be encouraged to participate in the review process and their views recorded.
- The social worker and relevant other professionals will provide a written report for the review and this will be with the IRO 5 days before the review. The social worker will ensure that the review and care plan has been discussed with the child, family and/or carer 20 days prior to the review. The IRO will be informed of any changes in the child's circumstances at the time they happen and a new LAC review will be set in accordance with the timescales.
- The IRO will contact the child between reviews to ensure the progress of the plan and to gather the child's views and what is going well for them and if there are any issues for the child to express in line with the IRO role and responsibility.
- Any significant changes to a child's care plan or legal status should not be made without first discussing it at a review. If a placement is at risk of breaking down a Disruption Meeting will be held and chaired by the Team Manager or Group Manager to look at ways of maintaining the placement or seeking an alternative placement that will better meet the needs of the child.

Care Leavers

- A pathway plan will be developed with the young person and will be reviewed by the IRO at the LAC reviews which will continue until they are 18 years old.
- When a young person becomes a relevant child and care leaver the pathway plan will be reviewed every 6 months.
- The pathway plan will address –
 - current education and further education
 - living arrangements in consultation with housing colleagues
 - career pathways
 - apprenticeships
 - legal issues (particularly for Unaccompanied Minors seeking leave to remain)
 - Health Passport
 - Staying put policy
- Visiting will take place every month unless the frequency is changed and authorised by the Team Manager and is meeting the young persons individual needs.
- Social workers will support the Staying Put initiative and all young people who remain in their placement will have this reviewed at their pathway planning meeting together with any financial implications.
- All care leavers will be encouraged to engage with health services and will be supported in accessing any specialist services including mental health, substance misuse, counselling.
- If young people are eligible for adult services a referral will be made to the adults team and joint visiting will be undertaken to ensure a smooth transition between children and adult services.
- All Care Leavers will be given priority places on activities running in the Children and Family Centres that they feel would be of benefit to them.

Role of the Independent Reviewing Officers

- Ensure the child is at the centre of all they do.
- The IRO will ensure that the child's wishes, views and feelings are given full consideration.
- The IRO will be satisfied that each placement is meeting the needs of the child.
- The IRO to ensure that each child knows who their IRO is and how to contact them between reviews and this should be clearly recorded in the record of the review.
- Each review process to have the necessary information available and people attending, to ensure clear, robust and informed judgements are made about the progress of the care plan.
- All care plans and decisions to have a timescale attached that meets the child's needs and a named person to implement them.
- The IRO will challenge where there is drift in care planning and alert using the local authority formal dispute resolution process.
- The IRO should be satisfied that plans for permanency have been identified by the second review.
- The IRO will be satisfied that the local authority is meeting the requirements of the care planning regulations including fulfilling its duty as corporate parent.
- The IRO pro-actively monitors the progress of the care plan and the implementation of the review decisions.
- The IRO will determine whether a review needs to be convened when there is a significant change/event in the child's life.
- The IRO will engage with the child's guardian in line with the Cafcass protocol in order to ensure effective communication about the child's care plan.
- The IRO will provide both positive and constructive feedback to all the stakeholders in order to achieve good outcomes for children.

Early Help Services

- Families being supported through the early intervention and family support service will have a referral completed by the professional referring using the service Referral Form.
- A holistic EIFS Assessment will be completed by the Bromley Children Project Family Support and Parenting Practitioner (FSPP) for all open cases where the family engages with the service.
- At the point when other agencies are required to support the family, the EIFS Assessment will be converted into a CAF with the permission being sought from the family.
- If, after the non-engagement process has been completed, a family decline the support offered, the case will be closed unless step up is warranted.
- The Senior Family Support and Parenting Practitioner team manager (SFSP) will authorise all Early Intervention closure/further actions.
- A co-produced family assessment will be carried out within 28 days of the case being allocated to FSPP, together with analysis of the issues. If this is not appropriate length of time for individual families the SFSP will put a rationale for this in a management decision note on the file.
- The assessment will be shared with the family in draft form and their comments recorded in the assessment. At the same time the family's consent for converting this Assessment into a CAF will be discussed and sought.
- An action plan will be devised for and with the family and professionals and clear goals set for the family to work towards.
- The plan will clearly identify the lead professional if it is not the allocated FSPP.
- Visits to the family will take place no less than 20 working days.
- Where required, TAC meetings will be held and the plan updated and sent out to the family and professionals within 10 working days of the TAC meeting.
- The plan will be reviewed at TAC meeting at least 3 monthly intervals.
- The FSPP will be supervised at 4 weekly intervals in line with the Bromley Children Project supervision policy.
- The Early Intervention and Family Support Service will support families for a period 6 months with a plan to closure being considered from month 5.
- If a case exceeds this period and remains open and not stepping up the SFSP Team Manager will set out the rationale and agree this formally on the file.
- When a case is stepped down to Universal services the CAF team will be notified and the new Lead professional will be identified. A closure TAC will be held and the minutes will reflect the work previously undertaken and the outcomes achieved. In cases where this is no CAF/TAC, a closure form will be completed with the family and shared with the referrer. This will reflect the work previously undertaken and the outcomes achieved.
- The Early Intervention and Family Support Service will evaluate the service and outcome and sustainability of service annually and provide a report to the Director of Children's Social Care Services. This will be shared with the Tackling Troubled Families Governance Board and reported to Members.

Fostering

- Bromley Children's Social Care will only place children in placements that have a good or outstanding Ofsted rating.
- The Fostering Manager reviews all the fostering agencies on a 12 monthly basis.
- Monitoring meetings take place at quarterly intervals and ensure that the agencies who are commissioned fully comply with fostering regulations.
- Bromley foster carers are visited at least once every four weeks and a record of this visit is sent to them within 3 working days.
- All Bromley foster carers will have an up to date annual visit, medical and DBS.
- Bromley carers will be supported with a comprehensive training programme based upon individual development plans which are updated annually as part of the annual review.

Adoption

- All adoption placements and assessments are carried out by suitably qualified social workers and presented to Bromley Council's permanency/adoption Panel which is independently chaired.
- Bromley's Agency Decision Maker (ADM) ratifies the decisions of the panel.
- Adoption planning will clearly identify timescales for achieving permanence and will be reviewed every three months.
- Life story work to be undertaken in a timely and meaningful way to ensure that children who are adopted have a clear sense of who they are and the circumstances that led to their adoption.

Good Practice in Case Recording

- As part of the planning with children and families adequate time to record work with them is allowed for and any event or contact is recorded within 48 hours.
- Records clearly show when a child has been seen, spoken to and their wishes and feelings included.
- Any direct work or assessment tools used are identified and analysed.
- If interpreters, specialist workers or communications tools are needed this is clearly recorded.
- Records tell the story of the child's journey and the purpose and outcome of any contact is clear and analysed.
- Facts and opinions are separated in the recording and any relevant research or tools used identified with appropriate references.
- All records are respectful of the child and their family including education, communication, language, cultural, gender, sexuality, disability and diversity is celebrated.
- If information is provided by other professionals or family/friends the records give the person's name, contact details and their relationship to the child.
- Management oversight is recorded on CareFirst including case discussions, supervision, management decisions and authorisations together with the rationale for the decision made.
- Audits carried out are placed on the file with actions and the head of Service and Team Manager ensure through supervision that any actions are completed and recorded to ensure that the case is of the highest standard.
- S47 agency checklists are completed on the template and placed on the CareFirst system in documents and should this say signed off by Group Manager.
- Updating/addendum assessments at 6 monthly intervals are completed on all cases covering progress, outcomes, impact achieved and what difference we made.
- Supervision summary at 6 monthly intervals with a management analysis of the case and outcomes achieved.
- Evidence in supervision of the CP; CIN; TAC plan being addressed.
- Chronologies updated at 6 monthly intervals
- All children placed out of the borough will have copy of letter to OLA uploaded on the CareFirst system in documents.
- A closing/transfer summary will be completed on all cases and authorised by the manager.

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