

Title/Status-	Practice Standards
New document or revised	Revised
Date legal review	n/a
Date approved SMT	Jan 2024
Responsible Head of Service	Safeguarding and Improvement
Date review due	Jan 2025

## Leicestershire Procedure for Children in Need & Practice Standards

**Applies to - All children**

### Leicestershire County Council Practice Standards – Child in Need Process

The Child in Need Process provides a key framework to support and protect children within their family network. The process depends on key principles: -

- The child is central to the planning process
- A commitment to build family resilience to enable families, where possible to safely parent their children, using Signs of Safety as our Key Methodology
- A commitment to being Trauma Informed in all our communication with families.
- Good quality information sharing between agencies
- Positive participation and shared ownership of the child’s plan
- A commitment to avoid drift and contribute to positive outcomes for the child

**Our approach to Child in Need planning reflects our core values: -**

<b>Aspiration</b>	<b>Being Curious</b>	<b>Collaboration</b>
<b>Our behaviours</b>		
<p style="text-align: center;"><b>LISTENING</b></p> <p>Understand trauma and its effects on children and families we work with as well as on our workforce.</p> <p>Ensuring the voice of the child is understood and taken into account.</p>	<p style="text-align: center;"><b>OUTCOME FOCUSED</b></p> <p>Striving to improve the lives of children and families we work with</p> <p>Signs of Safety supports our approach with children and families</p>	<p style="text-align: center;"><b>BUILDING RELATIONSHIPS</b></p> <p>We are committed to building strong working relationships. We spend time with children and their families, getting to know them, their views, what is important to them and what they think needs to change</p>

**The following practice standards support the application of robust CIN planning, and the quality of our work will be measured in relation to them.**

## Definition of a Child in Need

Children in Need are children who have sufficiently complex needs to require a CHILD IN NEED plan to prevent significant or further harm to their health or development - see Section 17 Children Act 1989, including children with disabilities.

First Response Children's Duty (FRCD) screen all new referrals, giving advice and information, directing them to Preventative and Targeted Early Help, Disabled Children's services, and the assessment teams as appropriate. Qualified social workers in the FRCD assessment teams complete robust and timely children and family assessments which may conclude that a Child in Need plan is the appropriate way to support the family. Where the C&F assessment suggests that a Child in Need plan is needed, FRCD and Family Help management will discuss the needs of the family, and any safeguarding issues. Family Help management will consider the needs and risks, and the skills, qualifications and experience available across the staff group in the locality and will decide the best role to support the family, and whether to allocate a key worker or Social worker.

Key activity in the plan will be delivered by a range of agencies and professions but a Child in Need plan will always have robust social work oversight in line with statutory responsibilities. With the focus being on timely and responsive services, most CIN plans will conform to a 12 – 16-week trajectory. Child in Need plans will often be delivered by **Family Help**, an integrated service consisting of Child in Need social workers, Key Workers, and a range of other staff providing Early Help services including Family Hubs.

A small proportion of Child in Need plans will be delivered by **Family Safeguarding**, namely children on Supervision Orders as they have met the S31 threshold, and for a few months after the ending of Child Protection plan, in order to prevent unnecessary changes of social worker.

The **Disabled Children's Team (DCT)** also provide support to families through Child in Need plans, having access to an appropriate range of specialist resources and budgets. Due to the long-term nature of support needed by disabled children and their families, the trajectories of their CIN plans are appropriately longer than the usual 12 – 16 weeks. Families supported by DCT will have specialist Social Workers progressing their CIN plans.

Child in Need plans may be led by either Social Workers or alternatively qualified Key Workers, with the latter group benefitting from the additional robust and timely oversight provided by a **Senior Social Work Oversight Practitioner (SSWOP)**.

Child in Need Plans will be progressed with vigor, with families receiving both a quick response, and intensive practical hands-on support to address the issues in the plan (Right Service Right Time). Plans will be expected to run for up to 12 or 16 weeks so that sustainable change is achieved, and the plan can then be ended. For many families Child in Need planning will be an effective way to bring about lasting change.

There may be an overlap between Child in Need planning and Child protection processes with crucial attention needed to the severity of harm and also our ability to build a shared understanding of what needs to happen to engage parents in the planning process and achieve change for the child. Where Child in Need plans aren't successful, child protection should be considered so that additional emphasis can be placed on harm reduction for the child(ren). Emergency action should be taken where needed by consulting the Team Manager asap.

## The Child in Need procedures - standards for practice

### Child In Need Progress Plan and Review – within the Mosaic step titled ‘Child and Family Progress Meeting’

#### OVERVIEW

Within Family Help, Child in Need plans will be allocated to Social Workers or Key Workers, with the same expectations of timely, responsive and intensive intervention. As a professional group, Social Workers are statutorily able to undertake child protection activity under the 1989 Children Act, and their focus in Family Help is on ensuring that all safeguarding issues are robustly managed.

The initial Child in Need (CIN) Family Progress meeting provides a key opportunity for agencies and families to share information, understand the assessment and develop and evaluate the plan.

Where the family are being transferred from First Response Children’s Duty (FRCD), Family Help managers will decide whether a social worker or a key worker is to be allocated through discussion with FRCD managers before they make that decision. The integrated Family Help management team includes social work qualified managers so that risk elements are overseen through a Social Work framework from the outset (see also Transfer Policy).

#### Keyworkers

Where a Key Worker is allocated, the initial CIN Family Progress meeting must be chaired by a Family Help **Senior Social Work Oversight Practitioner (SSWOP)/TM/SP**.

The initial plan will be focused on achieving positive outcomes within a 12-to-16-week trajectory of intensive support. Only under exceptional circumstances will plans exceed these durations. Where plans exceed this trajectory, there will be a management oversight addressing this.

During the last 4 weeks of the plan, the SSWOP will join the KW supervision to consider the trajectory of the plan. Plans which have a longer trajectory than 16 weeks will be considered periodically at the weekly Family Help management/performance meetings.

#### Social Workers

Where the initial Child in Need plan is allocated to a social worker, the initial CIN Family Progress meeting will be chaired by the FRCD social worker/SP/TM, with the same expectation of a 12-to-16-week trajectory. Subsequent CIN Family Progress meetings will be chaired by the Family Help social worker. The final CIN Family Progress meeting will be chaired by an SP or TM to confirm closure.

Where there are contextual safeguarding issues, there will be Young Person’s Community Safety Plans available, and these processes will be summarized at a link **here**.

#### All

Subsequent Child in Need Family Progress meetings will keep the plan on track, recognize progress and identify additional resources that are required to meet the plan’s objectives. For this reason, timely planning and good participation in the meeting is crucial to support good quality decision making and avoid drift and delay.

<p>TRANSFER FROM FRCD</p> <p>FRCD managers will email the relevant locality Family Help <b>email</b> address with a summary of the family situation after the 10-day supervision, so that the locality Family Help management team can assess whether the family are appropriate for a Keyworker or Social worker.</p> <p>Email addresses:  <a href="mailto:wigstonfamilyhelp@leics.gov.uk">wigstonfamilyhelp@leics.gov.uk</a>  <a href="mailto:loughboroughfamilyhelp@leics.gov.uk">loughboroughfamilyhelp@leics.gov.uk</a>  <a href="mailto:coalvillefamilyhelp@leics.gov.uk">coalvillefamilyhelp@leics.gov.uk</a>  <a href="mailto:hinckleyfamilyhelp@leics.gov.uk">hinckleyfamilyhelp@leics.gov.uk</a>  <a href="mailto:mailto:meltonharboroughfamilyhelp@leics.gov.uk">mailto:meltonharboroughfamilyhelp@leics.gov.uk</a></p> <p>The Family Help management team will discuss the family with FRCD staff in a timely manner so that an allocation decision can be made in good time, and prior to the CIN meeting needing to be arranged.</p> <p>Where it is agreed that the CIN plan should be allocated to a Family Help Keyworker, the FRCD social worker will make contact with the locality's SSWOP to book a slot in their diary to chair the first CIN meeting.</p> <p>Where it is agreed that the CIN plan will be allocated to a Family Help social worker, the FRCD social worker/SP/TM will chair the first CIN meeting.</p> <p>FRCD will complete the C&amp;F assessment and share it with the family at least 2 days before the first CIN meeting, which should be arranged within 10 days of the assessment being completed.</p>	<p>FRCD Team Managers</p> <p>Family Help Management</p> <p>FRCD social worker/SSWOP</p> <p>FRCD SW/SP/TM</p> <p>FRCD</p>
<p>When arranging the initial Child in Need Family Progress meeting the allocated FRCD Social Worker will invite parents and where age appropriate the child and any other family or friends who have been identified by parents as part of their family network.</p> <p>Where a family have been allocated to a Keyworker, the initial meeting will be chaired by a Senior Social Work Oversight Practitioner (SSWOP).</p> <p>The SSWOP will contact parents/child prior to the meeting to introduce herself and explain her role to ensure the meeting flows well, is timely and the family understand what will happen, as their voice and participation is crucial. We will do our best to remove any barriers for the family and/or child if it is in the child's best interest.</p>	<p>FRCD Social Worker</p> <p>Keyworker</p> <p>SSWOP</p>
<p>The meeting will also include any agencies who work directly with the child or adults currently or can offer services to support the plan, this will always include the child's school or nursery and a relevant health professional dependent on their age.</p>	<p>Social/Key Worker</p>

<p>The initial Child in Need Family Progress meeting should be chaired by a Senior Practitioner/Team manager or SSWOP (if allocated to a Key Worker), subsequent CIN Family Progress meetings will usually be chaired by the allocated Social / Key Worker unless complexity requires additional oversight. The agenda guide for initial child in need Family Progress meeting chaired by a SSWOP can be found in the appendices at the end of this guidance.</p>	<p>Team Manager/Senior Practitioner/SSWOP Allocated Social/Key Worker</p>
<p>The frequency of Child in Need Family Progress meetings will depend on the pace of progress, the scale of change required, the quality of the network support and any services identified to support the family. For many plans this will be 4 weekly.</p> <p>However, the minimum standard for the Child in Need Family Progress meeting to take place is 6 weekly – this mirrors the Core Group Family Progress process in the Child Protection Framework.</p>	<p>Social/Key Worker</p>
<p>If this standard is not met based in specific circumstances a clear rationale must be recorded on the child’s file along with further reflection and analysis in the next case work supervision. This should be a management oversight case note.</p>	<p>Team Manager/Team Leader/SSWOP</p>
<p>Police checks may be considered relevant within the CIN planning process for family members as requested by the social/key worker with consent of the adults and using the agreed procedure with Leicestershire police.</p>	<p>Social/Key Worker/Police</p>
<p>Agencies are expected to attend Child in Need Family Progress meetings and contribute to the Child in Need plan. Where an agency does not participate this should be challenged appropriately and if unresolved lead to escalation to the Agency safeguarding lead.</p>	<p>SW/KW/Team Manager/Leader</p>
<p>The Family GP should always be notified that a Child in Need plan is in place and where necessary invited to share information and participate directly in the Child in Need planning process.</p>	<p>Social/Key Worker/GP</p>
<p>Where specific processes are used to understand risk such as Signs of Safety scaling, individuals will be supported by the Social/Key Worker to understand the process and apply their own knowledge and judgement to inform their scaling.</p>	<p>Social/Key worker/ALL</p>
<p>When formulating the Child in Need plan each agency should accept roles and take responsibility for actions that relate to their professional remit and expertise and contribute to the support of the child. This may include actions directed to support adults who are identified as significant to the child.</p>	<p>All</p>

<p>The record of the Child in Need Family Progress meeting will focus on the progress of the plan and brief notes of the meeting will be shared with attendees including when apologies have been provided.</p> <p>This will include updated versions of the plan if agreed. The practice standard is that they will be sent out within 5 working days of the meeting date.</p>	<p>Social/Key Worker/ SSWOP / Team Manager / Senior Practitioner</p>
<p>In some circumstances another agency may take notes of the Child in Need Family Progress meeting and circulate them to other members of the group within 5 working days.</p>	<p>All</p>
<p><b>The Child in Need Progress Plan – within Mosaic Step</b></p>	
<p><b>The Child in Need Progress Plan captures the key actions, timescales and those responsible with a focus on reducing worries, preventing emerging risk and increasing the safety and wellbeing of the Child. It is a live document owned by all professionals and family and must be central to achieving outcomes in a timely way for the child. Any professional with actions in the plan will be accountable for delivering their actions in line with the timescales agreed and with support from the wider planning process.</b></p>	
<p>All participants attending the Child in Need Family Progress meeting should leave the meeting with a clear understanding of the plan and any role for their agency in the plan and receive a copy of the plan within 5 days of the meeting.</p>	<p>Social/Key Worker /participants</p>
<p>Agencies attending the Child in Need Family Progress meeting with actions in the plan should take their own notes and start actions as agreed in line with the plan as soon as possible.</p>	<p>ALL</p>
<p>The Child in Need plan must be SMART: Specific, Measurable, Achievable, Realistic and Timely. The family and professional network will contribute to the plan and monitor the family's progress. The plan may need to be adapted and changed as it is tested in real family life.</p>	<p>Social/Key Worker /participants</p>
<p>The plan should be clearly set out to avoid jargon and the parent/ carer and young person should have support to ensure they understand the plan as part of the Child in Need process.</p>	<p>Social/Key Worker</p>
<p>The allocated social/key worker will ensure that the child has an appropriate understanding of the Child in Need process and the contents of the plan congruent to their age and development, using 'words and pictures or other direct work tools to achieve this. The Child's version of the plan will be saved on their case file</p>	<p>Social/Key Worker</p>
<p>The plan must include a specific focus on the child's needs – their identity and how they will be involved in the planning process and their views captured as the impact of the plan is evaluated. A Cultural genogram should be completed and uploaded to the file.</p>	<p>Social/key worker</p>
<p>The Child in Need plan should include clarity of expectations about length of involvement – for example that support offered under the Child in Need process should be concluded in a timely way to avoid drift. The usual trajectory will be 12 – 16 weeks.</p>	<p>Social/Key Worker / Team Manager/ Leader/SSWOP</p>

<p>The Child in Need plan must set out clear expectations about the level of visiting including contact by other professionals.</p> <ul style="list-style-type: none"> <li>• <b>All Children in Need must be visited within a minimum of 5 working days from allocation</b></li> <li>• <b>Social/Key Workers will generally visit/contact intensively during the first few weeks of the plan, to establish relationships and provide immediate support for the presenting issues.</b></li> <li>• <b>Visiting within 5 days of allocation, and once every 20 working days at home (Child seen at home with main carers and where possible on their own). Record visits to children in the mosaic step at home. All other visits on case notes home visit drop down.</b></li> <li>• <b>It is anticipated in many CIN plans visiting will be more frequent at the start of the plan to rapidly de-escalate the family’s worries, and then will decrease as the intervention progresses.</b></li> <li>• <b>Initial CIN plans will have a trajectory for progression spanning 12 – 16 weeks and visiting will likely be reduced as progress is made and the family situation de-escalates.</b></li> <li>• <b>All Children in Need must be visited minimum every 20 workingdays and records of visits being completed within 72 hours of the visit. Visits to children will be recorded on the visit STEP whether at home or not. All other visits will be recorded on the case note ‘drop down’ home visits.</b></li> <li>• <b>A child in need visit must include seeing the child in their home environment periodically, and on their own, subject to their age – this will be set out in the plan and be in line with departmental Visiting guidance. Children may be seen alone in other environments as appropriate to their age and understanding, e.g., school.</b></li> <li>• <b>In appropriate circumstances, senior management may agree that CIN visits can occur when the child is seen elsewhere than at home. This will be recorded clearly in a management oversight.</b></li> <li>• Departmental <a href="#">Visiting guidance and template link available here.</a></li> <li>• <b>The CIN plan must state clearly if the CIN visit must include any specific expectation</b></li> </ul> <p>This is a <b>minimum</b> standard and where a Child Protection plan has just ended, or concerns are increasing, visits should be increased to a level that allows oversight of the child’s circumstances to form judgements about their wellbeing.</p>	<p>Social Worker/Team Manager/Leader Keyworker</p> <p>Team/Service manager via ICM meetings</p> <p>Service Manager</p>
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<p><b>In some exceptional circumstances where a service manager has identified specific circumstances which are recorded on the file Child in Need visits may be reduced to 6 weekly</b></p>	<p>Service Manager</p>
<p><b>Child in Need Plan Progress Review – within Mosaic Step</b></p>	
<p>4 - 6 weekly Child in Need Progress meetings provide direction and oversight to progress the Child in Need plan in the same way that the core group is part of the Child Protection process, a formal multi-agency Child in Need review process must be applied to focus on exit planning and ending a child in need plan.</p>	<p>ALL</p>
<p>The Child in Need Progress Review meeting must be a multi-agency meeting involving family and where age appropriate the child to provide oversight to the Child in Need planning process – including both exit and escalation.</p>	<p>ALL</p>
<p>For Social Worker led Plans:</p> <ul style="list-style-type: none"> <li>- When a Child in Need Progress Review meeting is considering the end of the plan, the meeting should be chaired by a Team Manager or Senior Practitioner for CIN plans allocated to social workers, unless it is recorded in supervision that this is not necessary.</li> </ul> <p>For Key Worker led Plans:</p> <ul style="list-style-type: none"> <li>- The SSWOP will chair final Progress Review meetings for CIN plans that are ending.</li> </ul>	<p>Senior Practitioner/TM/SSWOP</p>
<p>Taking the timescales above into account a formal Child in Need Progress Review meeting can be arranged at any time in the planning process particularly at points when exit plans or escalation are being agreed.</p>	<p>SW/TM/SSWOP</p>
<p>A Child in Need Progress Review meeting should be focused on what is being achieved and the following areas considered for discussion:</p> <ul style="list-style-type: none"> <li>• What is working well?</li> <li>• What are the worries?</li> <li>• Complicating factors that may be barriers to the progress of the plan</li> <li>• Evaluation of the Danger Statement and progress in achieving the Safety Goal</li> <li>• Any changes to the family network and impact of the Safety plan</li> <li>• Has the Safety plan been tested – does it need to be changed?</li> <li>• What is the child telling us about the difference that the plan is making for them?</li> <li>• Are timescales being met – is there risk of drift and delay in achieving change?</li> </ul>	<p>Social/Key Worker / Participants / Family</p>





<p>If the CIN plan is being ended and the case is to step across to Targeted Early Help within Family Help, the Family Wellbeing Worker should be invited to the CIN Review meeting so that information is shared and plans for handover are agreed. The decision to plan a step across should be discussed and agreed within Family Help management allocation meetings and there should be a purposeful Targeted Early Help plan.</p>	<p>Social/Key worker/FW worker</p>
<p>At the start and end of the Child in Need process the Child's Chronology must be updated to reflect the impact of the plan. The dates and rationale should be captured for the child in the 3-month update.</p> <p>See <a href="#">3 month update guidance link available here</a>.</p>	<p>Social/Key Worker</p>
<p>The record of the Child in Need review meeting must be circulated to the planning group and uploaded to the child's file within 5 days of the meeting being held. This is recorded within the Progress Plan and Review step in mosaic.</p>	<p>Social/Key worker</p>
<p><b>Collaboration – building strong relationships with families in the Child in Need Process</b></p> <p>Child in Need planning provides opportunities to work with families to prevent escalating risk and work to build strong family-based safety plans. It is essential that the Child in Need process is focused on building strong working relationships based on honest sharing of worries, clear expectations and using family-based strengths to build safety.</p>	<p style="background-color: #c8e6c9;"> </p>
<p>The basis of Child in Need planning is building strong relationships with children, their families and wider networks. To achieve this:</p> <ul style="list-style-type: none"> <li>• All families must clearly understand the reason for the CIN plan – sharing the assessment and having clear danger statements and safety goals developed with the parents will underpin this</li> <li>• The child must understand why they have a CIN plan in a way that reflects their age and understanding – writing 3 monthly updates to the child to capture key decisions and how they have been involved in the planning process will evidence this</li> <li>• Worries and strengths must be discussed openly with parents including opportunities to reflect with them and capturing areas of disagreement.</li> <li>• Parents' views must be listened to and captured on the record including when things go well or when there are worries</li> <li>• Both parents and carers, including fathers who are separated, must be involved in the planning process including being invited to attend meetings and having roles in the plan, if necessary, by having separate meetings where appropriate.</li> <li>• A cultural genogram is crucial to help understand the family network, and this must be part of the assessment process and be uploaded to the file. Trauma within the family must also be understood. Significant events must be explored with the parents to understand them in the context of the wider plan and any responses subject to evaluation in the assessment and planning process</li> </ul>	<p>Social/Key worker</p>

<ul style="list-style-type: none"> <li>A parent's withdrawal of consent or engagement must be responded to by increased effort to engage with them and understand what more could be done to remove barriers</li> </ul>	
Where age appropriate, children and young people must be enabled to have input into the development of the Child in Need plan and have their own child friendly copy of the plan in words and pictures. Children and young people should be supported to attend in a fully informed way where possible.	Social/Key Worker
There should be a safety plan setting out key actions to reduce worries and build safety from within the family network based on the family's views	SW/KW/Family network
The safety plan will be a tangible written plan which is shared with all members of the network and is visible as a working document as part of the wider CIN plan. This may be handwritten in the first instance but should be typed up within 7 days.	SW/KW/Family Network
The safety plan will be key element of the overarching Child in Need plan and embedded within the Progress Plan Step on mosaic. A copy must be shared with all members of the Child in Need planning group.	SW/KW
At any Child in Need Progress or review meeting the safety plan will form a key part of the review process to test how it is working.	SW/KW
The Safety plan should become the foundation for a robust exit plan when all aspects of the Child in Need plan have been achieved and closure including step across to Early Help is being considered.	SW/KW/Team Manager/Leader/SSW OP
Family members involved in the network meeting should also be involved in the Child in Need reviews and share their input.	ALL
<b>Oversight and Quality assurance</b>	
<p><b>Team Manager oversight in line with the department's supervision policy and procedure must be applied to all Child in Need plans. The focus will be to reflect on the progress of the plan, consider impact and identify timely exit planning and where necessary escalation when the plan is not effecting changes for the child.</b></p> <p><b>For Keyworker led CIN plans:</b>  <b>The Team Leader will provide key worker supervision as departmental standards, focusing on the progression of the plan, and whether exit or escalation are appropriate. Senior Social Work Oversight Practitioner (SSWOP) will complete monthly recorded oversight Mosaic steps on all Keyworker held cases. During this process they will check that the CIN standards are met and that all safeguarding risks have been considered and addressed appropriately.</b></p>	
The social/keyworker will apply the standards set out here in the Child in Need Planning process and provide updates to the manager in their supervision meetings on a 4-weekly basis, and no less than two monthly.	Social/Key worker

<p>Where the plan is creating concern and where visits raise worries for the child these concerns will be shared with the team manager/leader in a timely way to provide an agreed response. Key workers should also consult the SSWOP overseeing their family's CIN plan and the SSWOP may complete a Significant Incident Step to show a robust understanding of the worries, an analysis and clear SMART next steps.</p> <p>In discussion with the Team manager and team leader, the significant incident step may also lead to escalation through a strategy meeting or a request for legal advice from CDM.</p>	<p>Social/Key worker/Team manager/Leader/SSWOP</p>
<p>The Senior Social Work Oversight Practitioner (SSWOP) will complete monthly recorded oversight activity on all Keyworker held cases. During this process they will check that the CIN standards are met and that all safeguarding risks have been considered and addressed where necessary. In addition to the case audit through the Mosaic Oversight step, they may also choose to visit the family, join Keyworker supervision, chair a CIN meeting etc. to ensure they have an upto date and rich understanding of the current situation.</p> <p>Senior Social Work Oversight Practitioner (SSWOP) practice guidance is available <a href="#">here</a>.</p> <p>The Team Manager will review the cases overseen by the SSWOP in monthly supervision, focusing on those where there have been significant incidents or other concerns during the past 4 weeks. This will be correlated with the Improvement Cycle data.</p> <p>The Targeted Early Help Service Manager/Team and Partnership Manager (TAPM) will seek reassurance from the team leaders about the adherence to the CIN standards, about cases with increasing levels of risk, and other relevant practice issues. This will be correlated with the Improvement Cycle data.</p>	<p>SSWOP/Team Manager/Team and Partnership Manager</p> <p>Service Managers</p> <p>Service Managers</p>
<p>Where the plan is ineffective or for example where access to the child and engagement is reduced, consideration will be given to the safeguarding threshold and a strategy meeting may be convened.</p>	<p>Social/Key Worker / Team Manager/Leader/SSWOP</p>
<p>For most children the CIN planning process is expected to be a time limited intervention to support children with complex needs and prevent escalation of concerns into Child Protection planning processes. Drift and delay in the planning process must therefore be avoided.</p> <p>The Service Managers, Team Manager and Team and Partnership Manager should review all cases where the plan has been in place for 16 weeks or more, agree and case note a rationale for their continuance or closure. This process will be driven through the monthly ICM meetings.</p>	<p>Team Manager/Leader/TAPM/ Service Managers</p>



<p>standards unless specific circumstances have been identified within the Assessment. Any changes to these CIN standards must be clearly set out in supervision with a rationale – this will include reference to visiting patterns and how the plan is reviewed.</p> <p>Children being supported by the Disabled Children’s Team will have longer CIN plan trajectories as appropriate to their disabilities, and as such whilst service provision will generally follow these standards there will be some differences as appropriate to the long-term support they receive.</p>	
<b>SENIOR SOCIAL WORK OVERSIGHT PRACTITIONER role - SSWOP</b>	
<p>The SSWOP is a new role designed to support the Children in need plans that are allocated to Key Workers in Family Help.</p> <p>The role is non-case holding and is focused on providing robust social work oversight for CIN plans being progressed by alternatively qualified workers.</p> <p>After a social work assessment is completed either by the First Response Service or following an internal referral by a Family Well-being worker, when a CIN plan is recommended the Family Help management team will consider the type of worker best suited to the family.</p> <p>Key workers are very skilled and experienced and have a broad range of skills to engage with families to progress CIN plans rapidly to a positive conclusion.</p> <p>Families are often pleased to have support from a professional other than a social worker as this can reduce the stigma some people feel from having a social worker.</p> <p>The SSWOP will chair the first CIN Progress Meeting, all Progress Reviews, and the final Progress Review meeting for closure.</p> <p>The SSWOP will also complete a monthly oversight step on MOSAIC which will provide quality assurance that these CIN procedures are being followed, and that any risks remain below the threshold for strategy discussion and S47 enquiries.</p> <p>The SSWOP will complete the oversight through case file review, chairing review meetings, joint visits, joint supervision, Mosaic casefile review, etc., to ensure they have a rich understanding of the family situation.</p> <p>The SSWOP is available to the Keyworker and their Team Leader for case discussion should they wish to have a second opinion or discuss a concern about the children’s safety.</p>	<p>TM/SSWOP/SM</p>

The SSWOP will report any concerns to the team manager and will alert the Key Worker and Team Leader. This will be clearly recorded on the file.

During supervision the SSWOP will report on all oversight families, advising on CIN procedure compliance and any safeguarding issues.

The Service Manager will ensure the SSWOP is completing the oversight tasks via the Improvement cycle meetings (SSWOP oversight compliance target = 100%), CIN visits, assessment timescales, etc. This will be reviewed by the HOS in their oversight of ICMs.

The Service Manager will ask the team manager for a report of the SSWOP role during their monthly supervision cycle.

## APPENDICES

### SSWOP Initial CIN meeting Agenda:

#### Child In Need Meeting Agenda

- Introductions and apologies
- Ensure you have all contact details of participants (can put them in the chat)
- Explain role and Family Help Model if it's an initial CIN
- If on Teams, ask all professionals to have cameras on
- Child's Voice – if children not in the meeting, then professional and family to share their voice
- Parents Voice – what would they like to get out of today's meeting/ anything they would like to raise
- Review and Update child in need plan – share the danger statements and safety goals. Agree these if the initial
- Ask if anyone has any updates or anything additional to share.
- Alternatively, you could get updates from everyone and then review plan but think this way round is quicker and keeps focused on the plan.
- SSWOP – whilst discussing plan and progress can map what is working well and worries.
- If considering closure at the next meeting, then say this and ask people to consider their exit strategies to discuss at following meeting. I.e., what is schools contingency if they currently contact social worker/keyworker if the child not in school?
- Book next CIN meeting, ask family whether they would like this in person or teams