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**PSW Brief – July 2020 – Children in Need**

**Child in Need**

Who is a Child in Need?

*He/she is unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health and development without the provision for him/her of services by the Local Authority.*

*His/her health or development is likely to be significantly impaired, or further impaired without the provision for him/her of such services.*

*He/she is disabled*

Section 17, Children Act 1989.

Consent

Child in need is a consent based service, children and families will be asked to provide consent to an assessment and to work with a child in need plan. If consent is not provided, consideration must be given to the potential risks to the child if the plan is not implemented and escalation to section 47 procedures should be initiated if the child is deemed to be at risk of significant harm. The decision about next steps must be made by a manager and clearly evidenced on the child’s records.

What does a good Child In Need Plan include?

The child in need plan needs to be **SMART**, **S**pecific to the child’s individual needs, **M**easurable so that it shows the impact of the actions/support of each agency, **A**ttainable, identified support/services will be available and accessible to the family, **R**elevant – the services/support identified will address the risks/support needs identified in the assessment and **T**ime bound to ensure that the support/services are provided in the timescales that are required by the child and there is no unnecessary drift and delay in achieving the identified outcomes.

To achieve this -

The plan will be based on the analysis made in the preceding Child and Family assessment or earlier plan if stepping down from child protection.

The plan will give due consideration to both risks and protective factors and show evidence of appropriate assessment of risks with the aim to safeguard and promote the child’s welfare.

The plan will clearly state what the overall outcomes are and will outline the range of services to be provided and what their purpose is. The outcomes need to be aligned to the needs identified in the assessment.

The plan will assign responsibilities for each aspect of the plan. Children in need are the responsibility of all agencies involved in that child’s care plan. All agencies should work together to share information, knowledge, skills, resources and responsibility.

The plan will set clear timescales for each action and specify the frequency of visits to the child by the social worker and any other agencies involved.

The plan will include a contingency plan should the agreed actions not achieve the desired outcomes for the child.

The plan will be shared with the child and family and their views sought and recorded on the plan.

Child in Need Reviews

A child in need meeting should be convened within 5 days of the completion of the assessment for family’s and professionals to agree the package of services required to meet the child’s needs as identified within the assessment.

Child in Need Reviews should take place every **8 weeks** as a minimum thereafter.

The social worker is responsible for organising and chairing Child in Need meetings and ensuring that the minutes are circulated to all parties within 20 working days.

During the review the social worker and partner agencies need to –

* Review each outcome, action and timeframe to ensure the plan is progressing. If it is identified that the support/service is not having the desired outcome consideration should be given to a different service/provision being implemented.
* If there is drift and delay consideration needs to be given if this delay impacts on the level of risks and a threshold discussion will need to take place in the meeting and with your manager when the meeting has concluded.
* If actions are agreed as completed with the desired outcome met they need to be removed from the plan.
* If new risks/support needs are identified during the review outcomes, actions and timescales should be discussed and agreed.
* Following the review the social worker is expected to update the plan, remove all completed actions and add any changes required and to circulate to all parties.

The child or young person should always be encouraged to attend the meeting, subject to their age and understanding. If they do not wish to attend their wishes and feelings must always be sought and be presented to the meeting.

Consideration should be given to the date, time and venue for the meeting in order to enable the child and family to attend. If the child or parent has a disability the venue must be fully accessible.

If English is not the first language, arrangements should be made for an interpreter. Particular consideration should also be given where meetings fall around the time of religious festivals and observances which are undertaken by the family.

Parents/cares are entitled to be accompanied by an advocate or supporter if they wish.

Following a review the plan needs to be updated to reflect any progress/changes and the updated plan needs to be shared with all parties.

Step Up/ Step Down and Case Closure

A case can be stepped up or escalated to child protection procedures at any time during the child in need process where it is believed that the child may be at risk of significant harm.

Following an Initial Child Protection Conference (ICPC) or Review Child Protection Conference (RCPC), a decision may be made to ‘step down’ or de-escalate into the child in need process. In such circumstances the ICPC or RCPC should formulate an outline child in need plan to address the identified issues and set a date in which a planning meeting is convened to progress this plan.

A child in need plan should only be closed when there is no clear role identified for a social worker and following a child in need review meeting to ensure that all agencies are consulted prior to the closure by Children’s Social Care.

Consideration should be given to the case being ‘stepped down’ into Early Help Services with some services continuing to be provided by a single agencies or a range of Early Help services.

Sandra Carnall

Principal Social Worker

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