|  |
| --- |
| Safeguarding, Quality, Impact & Practice |
| Children’s Services Practice Standards. |
| Control Version [1] |

|  |
| --- |
| Pauline Morris  15.06.2020 |

# Timescales and Standards Document

These timescales and standards are the ***minimum*** expected for good practice. They are designed to ensure that records held place enough focus on the needs of the child and contain supporting evidence.

All workers need to ensure that they are always aware of and comply fully with the requirements of GDPR (see intranet for details).

This document is a checklist of key timescales & standards and is not exhaustive. Reference should also be made to more detailed policies via the online procedures manual Tri-X.

In developing these practice standards there are 7 principles which all Haringey Children’s Services staff should be asking themselves are we meeting when delivering services to children, young people and their families.

* Children or young people are seen alone and spoken to, so they are given an opportunity to share their wishes and feelings and freely tell us what it is like to be a child or young person in their family.
* All children or young people require an assessment of their needs completed so we are able to understand their lived experience and the capacity of parents to fulfil their responsibilities in meeting their needs.
* Social Workers and partner agencies should truly understand what it is like to be a child or young person in this family if we are to provide joined up interventions that will make a difference and sustain improved outcomes.
* All children or young people have a plan that they easily understand what needs to happen, who is involved in delivering their plan, what we are trying to achieve with such a plan and by when.
* All documents, reports, plans are analytical, use plain understood language and are timely, so children or young people and their parents can fully understand the reasons for our involvement and when will it end.
* Every child or young person should expect their allocated worker to be highly skilled, and receive management oversight and reflective supervision so we are able to be professionally accountable for the work we do, it is timely, our interventions and care planning is smart and we are able to support families to sustain the necessary changes.
* The use restorative approaches to resolving issues and improving children or young people lives in their communities.

Are you

speaking to

assessment

|  |  |  |
| --- | --- | --- |
| **General Records** | | |
| **All letters, emails, external reports, Merlin etc.** | 24 hours | * On file within 24 hours |
| **Case recordings**  **Applies to all Children’s Service areas including Early Help.** | 48 hours (2 working days) | * Children’s records are kept up to date, with significant events recorded. * In emergency and significant risk situations, recording is completed on the same day. * All visits should be referred to in case records, but the details of the visit should be completed using the Mosaic visit template. * Assessments, plans, records of visits and of direct work with the child include the child’s voice. |
| **Case Summaries**  **Applies to all Children’s Service areas including Early Help.** | 3 monthly | * Using Mosaic Signs of Safety format * To be clearly identifiable within the Child’s Case Record section under a sub heading 3 Monthly Updated Case Summary. |
| **Chronologies (to cover child’s life span, not just the point of referral onwards)** | First 45 working days  Minimum 3 monthly | * Chronology at the conclusion of any Child and Family assessment. * The Chronology should detail the history of events for the family. **Not just from when we became first involved.** * The chronology is used as an analytical tool to help understand the impact, both immediate and   cumulative, of key events and changes in a child or young person’s developmental progress.   * Chronology should be integrated with any other information on family household members or are relevant adults. * To be kept fully up to date and presented to every CP conference and each panel where decisions are made. |
| Supervision Casework(please refer to supervision policy for more detail and arrangements for 1:1) | | |
| **Social Care Casework (1:1)** | Monthly | * To include all cases. * Casework shows evidence of reflection, impact of intervention and management oversight. It   includes clear case direction from the point of allocation, through to any transfers or closure.   * Any activity or decisions requires actions must also be accompanied by realistic timescales. |
| **Early Help.** | Monthly | * Newly allocated cases should be taken to the first supervision after allocation. * All cases of concern need to be discussed each month. * Casework shows evidence of reflection, impact of intervention and management oversight. It includes clear case direction from the point of allocation, through to any transfer or closure. * Any activity or decisions requiring actions must also be accompanied by realistic timescales. |
| Referrals and Assessments | | |
| **Managers Decision** | 24 hours | * On receiving referral. |
| **Early Help All Well Being Assessments:** | Max 20 working days | * Manager should complete an allocation note, brief summary of issue of concern, clear SMART directions. * Children and Young people are visited and spoken to alone to capture the voice of the child and their views about the referral. * Authorised by Senior Family Support Worker or Team Manager. * All Well Being Assessments must have a plan attached upon completion. * Assessments must include fathers/male partners and any other related or important persons in the child’s life i.e. non-resident male or female partners or Grandparents. * Diversity is clearly considered, with the assessment noting if any specific needs arise from the child   or family’s ethnicity, culture, heritage, age, disability, gender, faith and sexuality.   * The assessment must include a contingency plan should the recommended plan be at risk of failing to achieve the intended outcomes to keep the child safe, in the event of an emergency or where a parent may place the child at risk. * The assessment is clearly informed by assessment of risk, considering protective factors, and a detailed analysis. * All Well Being Assessments should include consideration of Family Network Meetings and show evidence of effective Family finding. |
| **Children’s Statutory Services Child and Family Assessments:** | Max 45 Working days  24/48 hours for sect 47 or Within 10 working days | * Manager should complete an allocation note, brief summary of issue of concern, clear SMART directions. * Children and Young people are visited and spoken to alone to capture the voice of the child and their views about the referral. * Section 47 Investigation dependent on managers decision and consideration of Police involvement. * Assessments must include fathers/male partners and any other related or important persons in the child’s life i.e. non-resident male or female partners or Grandparents. * The Social Worker needs to consider **What is it like to be a child in this family?** |
| **Initial Child and Family Assessment following referral (including Pre-birth assessment)** | By 20 working days into the assessment. | * Up to 45 working days of receipt of referral. The assessment should ask **What is the child lived experience.** * A chronology is started as part of any new assessment. * Assessments must include fathers/male partners and any other related or important persons in the child life. * Diversity is clearly considered, with the assessment noting if any specific needs arise from the child   or family’s ethnicity, culture, heritage, age, disability, gender, faith and sexuality.   * The assessment must include a contingency plan should the recommended plan be at risk of failing to achieve the intended outcomes to keep the child   Safe, in the event of an emergency or where a parent may place the child at risk.   * The assessment is clearly informed by assessment of risk, considering protective factors, and a detailed analysis. * If the referral is complex or has large professional network, a professional meeting should be arranged to capture the views of the professional partners. This will also assist with formulating any SMART plan if required. * A draft assessment is shared with families to ensure details are correct and to capture the views of the family regarded the outcome of the assessment and if necessary, any plan. * A draft copy of the assessment to supervising manager by 40 working days for sign off by 45 working days. * All Children and Family assessment are reviewed by a manager, with detailed overview and analysis before signing off. |
| **Genogram** | All Open Cases | * To shows immediate family but also the wider family network **not just child, mum and dad** |
| **Children in Need (Early Help or CiN)** | | |
| **Team Around Family (TAF’s)** | 15 days after allocation  10 days after completion of Well Being Assessment  Every 6-8 weeks thereafter | * All relevant family members need to be included in the TAF, (including Young People where appropriate). * All professionals currently involved with the family need to attend in person or send a written report. * All TAFS need to be clear on what the outcomes are for the family and the actions need to be reviewed at each meeting and the plan updated accordingly. * TAF’s need to have clear actions for all i.e. professionals and parents |
| **Early Help:**  **Outcome based plans** | Reviewed in line with TAF frequency. 10 days post Well Being Assessment, then every 6-8 weeks thereafter. | * All outcome based plans need SMART: * **Specific** (simple, sensible significant) * **Measurable** (meaningful, motivating) * **Achievable** (agreed, attainable) * **Relevant** (reasonable, realistic, resourced, result based) * **Timely** (time-based, time limited, time cost limited, time sensitive) * All Outcomes base plans need to take place in a timely manner and include the child’s voice and respond and evolve as need changes. |
| **Review of CIN Care Plan.** | 3 months  6 monthly | * 1st review * include an updated assessment and plan if required. * The plan should follow the SMART principles:   **Specific** (simple, sensible significant)  **Measurable** (meaningful, motivating)  **Achievable** (agreed, attainable)  **Relevant** (reasonable, realistic, resourced, result based)   * **Timely** (time-based, time limited, time cost limited, time sensitive) |
| **Early Help Visits:** | 3 weekly | * Visits need to be recorded clearly and succinctly * All visits need to evidence a Family Support Workers “working out” – what they did / why they did it and what the outcome should be * All visits need to evidence clear direct work with the child that reflects their lived experience. * Direct Work will need to be planned and thoughtful using evidenced based direct work tools. |
| **CIN Visits** | Calendar months | * CIN visits to be carried out minimum. * Child and family views should be reflected in the visit record. The visit should ask **What is it like to be a child in this family** |
| **CIN visits – write up and on file** | 5 working days | * Visit record episode with notification in case recording. |
| **CIN transfer to other LAs** | 10 working days prior | * Where a CIN plan is transferring to another LA it should be referred and discussed with CPA to quality assure threshold has not been met for CP case transfer. |
| **Case Transfer** | | |
| **Step up’s to Children’s Social Care** | 24 hours after management agreement | * A child protection concern being activated during the course of the work * A family recently stepped down from Social care where unmet need remains actively acute. * Families who refuse to engage and the child’s developmental needs would be impaired if a Social Worker does not intervene. |
| **Case Transfer Panel (held weekly on Tuesdays)** | 2 days (by Thursday of same week) | * Case transferring between services areas must have work completed and records up to date. * A transfer notification must have been sent to the relative manager requesting transfer. * The incoming manager will ensure they have completed a review of the case file. * The allocated Social worker must have completed a Case transfer summary to include any actions and care planning. * All cases for transfer are discussed at the weekly Case Transfer Panel, which is chaired by the Safeguarding Service Manager. |
| Child Protection | | |
| **S47 Enquiries**  **Written up and on file** | 24 hours  15 working days | * Start within 24 hours * Robust multi agency strategy discussion or meeting to consider and identify * relevant concerns and risks for all children living in the household * family vulnerabilities * Contextual safeguarding risk including adult exploitation. * Children seen (where appropriate being seen alone) within 24 hours of a child protection referral as directed by a manager. We should be asking **What is the child lived experience.** * Section 47 assessment (including pre-birth assessments includes information from other agencies and follows the Signs of Safety model. * The section 47 investigation and assessment must include fathers/male partners as part of any assessment. * Ensure any historical/ background information is included in any section 47 strategy discussion with the Police. This includes any information on adult siblings’ files. * Any immediate safety plan is identified even prior to the completion of any investigation or risk assessment and includes other agencies and family members. * Minimum 15 working days from the strategy discussion to any ICPCC date. |
| **Child Protection Statutory Visits**  (***See CP procedures for more info regarding CP visits***) | 10 working days | * Visits must be announced and unannounced, so we are able to maximise the safety and wellbeing of the child/young person. * Each visit the child and siblings should be seen alone and their wishes and feeling sought. **We should continue to ask What is it like to be a child in this family.** * Elements of the child protection plan should be discussed with the parents and child during the visit and recorded in the visit record * **Where a child was not seen within 10 working days the Social Worker must inform the team manager.** |
| **CP Statutory visits** – Write up and on file | 72 hours | * Write up must be completed in Mosaic |
| **Core Group Meeting** | 10 working days, then every 6 weeks.  On the day  3 working days | * Core Group Meeting from ICPCC * Paper minutes of decisions available to take away from the meeting. * The plan should follow the SMART principles: * **Specific** (simple, sensible significant) * **Measurable** (meaningful, motivating) * **Achievable** (agreed, attainable) * **Relevant** (reasonable, realistic, resourced, result based) * **Timely** (time-based, time limited, time cost limited, time sensitive) * Social Worker to ensure write up of meeting and sent to Core Group members and parents. These are also shared with CPA. * Core Group Members notes from meeting should also go to Child/Young Person where this is appropriate. |
| **Child Protection Conference assessment/ reports** | 48 hours prior to an ICPCC.  5 working days prior to the RCPC  5 working days  35 working days of the assessment process (45 working days).  Day of the conference. | * Social Worker should complete a holistic assessment of child for both ICPC and Review Child Protection Conference to provide up to date baseline of the child and their specific needs, to detail each child’s needs according to their development etc. * CPA should have had a pre-conference meeting with the Social Worker * Any assessment has collated updated information from partner agencies. * An updated Chronology should be provided to the conference. * The updated assessment must include a contingency plan should the recommended plan be at risk of failing to achieve the intended outcomes to keep the child   Safe, in the event of an emergency or where a parent may at a future date place the child at risk.   * Any assessment/ conference report should have been shared with the parent prior to the conference. * CPA to meet with the parents prior to the conference. If available to meet with any Young person attending. * CPA create an overarching plan at conference, SW and Core Group are tasked to develop this further, to chart its progress against each objective at each meeting and factor this in so that when they bring the case back to conference, they are able to evidence progress at each stage, or not as the case may be * Within conferences the Signs and Safety Model must evidence: * Danger Statement * Summary of the concerns and * what is it like to be a child in this family? * Parental views (including service user feedback form outcome) * Agencies Scales of risk * Identified agencies and their roles and responsibilities for the plan * The CPA during any conference must ensure the parents and professionals know, * First Core Group date * Role of each agency * Date of the next conference date |
| **Child Protection Plan** | 24 hours  24 hours  5 working days | * Decisions and Plan. * Mosaic Child Protection badge added * Write up of minutes on file |
| **Child Protection Plan Review** | 3 months  6 months | * 1st CP Conference review * Further Review conferences. CPA’s can bring cases back sooner for review where circumstances merit it. |
| **Child Protection Core Group** | 10 working days.  6 weeks  2 monthly min | * Initial Core Group following ICPCC * Following Initial Core Group meeting * Following first review child Protection conference review meeting * Core Group are tasked to develop this further, to chart its progress against each objective at each meeting and factor this in so that when they bring the case back to conference, * Young people view, wishes and feeling as part of their contribution to their plan must be evidenced at each Core Group. |
| **Parental Consent/start of LAC** | 24 hours | * To be recorded on a template specified and agreed by LB Haringey Children’s services and uploaded to the child’s file within 24 hours. |
| Looked After Children | | |
| **LAC Visits**  **Written up and on file** | 7 calendar days for the first 4 week.  6 weekly  3 monthly  5 working days | * 1st LAC visit following initial placement. * In 1st year of placement or until placement is confirmed as a permanent placement. * Thereafter once a placement is confirmed as a permanent placement. * The LAC visiting episode must be used for all statutory (6 weekly and 3 monthly) visits. * Any additional visits can be recorded using case notes. |
| **Visits - Care leavers 18+**  **Written up and on file** | 2 monthly  5 working days | * Visiting frequency minimum. * Episode to be written up and on file. |
| **Visits - Regulation 24**  **Written up and on file** | Weekly | * Until the first LAC review. * Minimum LAC standards above then apply. |
| **P W P visits** |  | Prior to placement |
| **Child and Family Assessment updates.** | 1st review within 20 days of child becoming looked after, 2nd review within 3 months and then 6 monthly? | Update Child and family assessment to be completed for LAC reviews (instead of LAC report).  * A chronology must be updated as part of any updated assessment. * Diversity is clearly considered, with the assessment noting if any specific needs arise from the child * or family’s ethnicity, culture, heritage, age, disability, gender, faith and sexuality. * The recommended LAC plan should follow the SMART principles: * **Specific** (simple, sensible significant) * **Measurable** (meaningful, motivating) * **Achievable** (agreed, attainable) * **Relevant** (reasonable, realistic, resourced, result based) * **Timely** (time-based, time limited, time cost limited, time sensitive) |
| **Section 20 cases & Legal Gateway Meeting** | Next available panel | All sec 20 cases must be presented to the Legal Gateway meeting **except where the young person is 16/17yrs old**.  * all cases were legal advice has been obtained to determine the threshold for PLO should come to the Legal Gateway meeting * A genogram should also be provided to shows wider family **not just child, mum and dad** * An up to date chronology should be submitted with any referral to both the legal Gateway meeting and/or Resource Panel. A genogram should also be provided which shows wider family not just child, mum and dad. * If legal advice is required prior to the Legal Gateway meeting this should not delay referral to the Legal Gateway Meeting |
| **Resource Panel** | First available panel | * All 16/17 yr. old get presented with a detailed referral and update chronology on any new referral to the Resource Panel. |
| **Minutes of Legal Gateway meetings or Resource Panel** | Within 72 hrs | * Written up and on file |
| **PEP**  **New / updated at the start of a new school** | Before LAC or min 10 working days.  20 working days  20 working days/Annual | * The PEP should be initiated as part of the Care Plan before the child becomes Looked After and be available for the first LAC review meeting. Relevant agencies associated with the child /young person are consulted with. * A new or updated PEP should be in place of the child joining a new school. Subsequent PEP’s should correspond with the Looked After Review cycle. * Children without a school place should still have an up-to-date PEP. It should address the child's immediate educational needs and the longer-term planning. |
| **First/Health Assessments have been completed** | Within 20 days  6 monthly  Annual | • All new LAC   * for under 5’s * for over 5’s |
| **Write up of completed PEP and Health Plan and on file** | 5 working days | * Copies to relevant agencies associated with the child /young person are consulted with. |
| **LAC care plan**  **Written up and on file** | Prior to placement  10 working days | * 1st LAC care plan prior to placement where possible. (To be updated after each LAC review) * Minimum 10 working days of placement. |
| LAC Review  Midway Review | 1st review within 20 days of child becoming looked after, 2nd review within 3 months and then 6 monthly?  6 monthly  Midway between reviews | * 1st review minimum 20 working days of child becoming LAC. * Updated holistic assessment of each child is needed. Second LAC Review to factor in permanency planning. * IRO must keep in touch with CYP? * Personal Advisor’s keep in touch with young adults in care. * IRO and Social Worker to ensure they have met with the child/young person to ensure the following are covered: * they understand the reason for being LAC. * They have some personal possessions from home. * Information on advocacy and independent person * They have received CIC information pack. * contact arrangement with parents, siblings, friends and any relevant person * timescale of placement with carer * an awareness of the complaint’s procedures * IRO to use escalation processes through Service Manager to challenge any systems or barriers. * 2nd review minimum after 1st review supported by an update assessment * From the second review onwards, midway between the last and the next review |
| Life Story Work |  | * Promoting life story work including the child and family’s racial identity and culture using materials, photo and family related information |
| **Placement Agreement** | 72 hours  On the day of planned placement takes place | * Unplanned placement if unplanned. * If placement was planned move. |
| **Care Leavers Pathway Planning**  **Keeping in Touch**  **Review** | 8 weeks  2 months  12 weeks  6 monthly | * All eligible, relevant & former relevant young people should have a pathway plan. This replaces part two of the care plan and is completed in two sections. * Young people aged 18-25 should be seen at least every by their personal advisor. In addition to keeping in touch by phone, text or email based on the Young Person preference. * A Frequency and type of contact agreed with the Young person and set out in their Pathway Plan   + **Part 1**(needs assessment) completed prior to transfer to LCT or case allocation in the LCT   + **Part 2**(the plan) to be completed within 16th birthday or at the first LAC review since 16th birthday. * Review of part 1 and 2 of the pathway plan should take place and/or after every LAC review. |
| Fostering and Adoption | | |
| **Prospective Adopters & foster carers report** | 6 months max  Time scale?  Time scale? | * This is a 2-stage process which is adopter lead – Report minimum. * SW’s need to produce later life letter. * SW to present to matching panel, |
| **Foster carer reviews**  **1st review**  **Annual Review** | Yearly 9 months  3 yearly | Annual reviews for all carers.1st annual review to ensure panel within 1st year of approval.The following reviews are taken to panel:Newly approved carer first review  * Allegations against carer * Standard of care |
| **Supervising Social Worker Visits.** | 3 weekly  6 weekly | * visits for short term carers. * visits for long term carers |
| Connected Person/Kinship Placements | | |
| **Completion of Permanence Assessments** | 3 months | * In accordance to expected professional requirements. |
| **Emergency Placements and Planning of a Connected Persons** | Last 16 weeks with additional approval for | * Close relative or family friend is available the local authority should place the child with them within Regulation 24 arrangement. * A home visit must also be conducted by the child’s social worker in order for the arrangements to be assessed. * The child’s wishes and feelings also need to be obtained as do those of the child’s parents. * Temporary approval is done on the basis that such placements are made in exceptional circumstances and designed to cover emergency situations only. * Close relative or friends who are connected persons (are not approved foster carer) must sign a written agreement as part of the viability assessment. * The child/young person cannot be placed until a viability assessment has been completed and signed by the ----. |
| **Connected Person/Kinship Assessments** | Before 16 weeks | * Full assessment is completed, this will be presented to the panel by the child’s social worker and the assessing supervising social worker jointly. |
| **Connected Persons/Kinship placements visiting frequency**  **Prior to approval**  **Following approval**  **Where approved as long-term foster carers** | Monthly up to 16 weeks.  Monthly  6 weekly  3 monthly | (by kinship team shared with area team) where carers are temporarily approved – up to the first LAC review  Until the carers are approved as kinship carers.  Once approved minimum.  Where carers are approved as long-term foster carers minimum |