

Case Recording Standards for Havering Children's Services

May 2022



Foreword

Back in March 2019, as we implemented a new electronic case recording system, we also wrote our first case recording principles. The hope was to get our recording right, not just from a system perspective but more importantly, to think about the quality and timeliness of recording on children's files and why these are such an important part of our practice.



We have come a long way since then and the Covid-19 pandemic meant that we had to adapt the way we work with families but face-to-face has returned and remains our model of practice. Recording processes should be a collaborative endeavor right from the start – something that is done *with* children and families, not simply 'about' them. A child's record should focus on the strengths as well as the difficulties within their family; something that the young people we consulted when developing this document told us was of great importance to them. We expect our workers to practice reflexively and be aware how their own lived experiences, social GRACES, prejudices or assumptions may be impacting on their recordings. And of course, in the same way that our practice is purposeful, planned and focused, our recording must be as well.

Our most recent visit from Ofsted confirmed what we already knew; that we are making good progress. Our assessments are timely and focused on risk and need; our plans are detailed, with clear goals. What we cannot yet evidence though is a consistent standard in our recording, including clear management oversight. That is why, as part of refreshing this document to incorporate all teams including the Integrated Adolescent Safeguarding Support Service, we are no longer referring to it as principles. We have made a commitment to our children and young people and we need to deliver against that commitment. These must now become our *standards*.

We are hopeful that through our robust quality assurance framework and with high quality supervision, we will achieve and maintain a recording standard that meets our own high expectations and the hopes of our children, young people and their families. Only by meeting these standards can we be sure that when the day comes where they wish to access their file, our children will find a high quality, clear and accurate record of what happened in their family, and why.

Robert South, Director of Children's Services

Our Way of Working



'Your Life, Your Record'

It is our commitment to you that we will:

- 1. Listen to you and your family and make sure your voice and views are included in your written records**



- 2. Understand your individual needs and make sure these are properly recorded and considered when decisions are being made**

- 3. Make sure that your record clearly shows why we are working with you and your family, what the plan is for you and how we will work with you to achieve this**



- 4. Only write in your record what we need to, so that it is clear how and why decisions were made, what has changed and what your views on the decision are.**



- 5. Make sure that your records are up to date and accurate by quickly writing up important events and discussions (such as when we visit you)**



Our commitment explained

Our commitment is to the children, young people and families of Havering and we hope that all workers will have this at the forefront of their minds when recording in a child or young person's files, whether it's a simple case note, any report or detailed life story work.

So what do these standards mean for those working with children, young people and their families? It means considering our 'PPF' model of practice in *all* of our recording, so that just like our face-to-face practice, our recording is always:

Purposeful - With a clear purpose as to why we are recording, what we are recording and how it will help things move forward

Planned - So that all recordings are carefully considered, in agreed formats and completed to agreed timescales

Focused - Recordings should be focused on what *needs* to be recorded so that we do not record unrelated information or too much unnecessary detail - and equally we do not omit important and salient information.

The next few pages set out in more detail exactly what is meant by each of the five standards in our commitment.

Standard 1: We will listen to you and your family and make sure your voice and views are included in your written records

Children, young people and their families should know that they are *part* of the recording process, not just the subject of it. The professional requirement to keep records must be explained at the start of the professional relationship / allocation of the case, including what information is collected, how it is used, who it might be shared with and how long it will be kept for.

The child / young person should be continuously encouraged to provide their own views, wishes and feelings. Workers should ensure that the child/ young person's voice and views are not only captured, through the use of the tool Mind of My Own (MOMO), but understood and recorded in a way that is child-focused and uses appropriate plain language, always remembering that the child/ young person may wish to view their file in the future. For the same reason, the use of technical or professional terms, acronyms and abbreviations should be kept to a minimum and explained.

There will of course be occasions when it is not possible to act upon a child/ young person's wishes but these must still be captured in their record and the reasons for the decision being made needs to be clearly explained to the child/ young person.

These standards apply equally to recordings written directly in the system (e.g. records of visits) or in attached or scanned documents. Where the child / young person has written their own views, or when tools such as MOMO have been used, steps are to be taken to ensure that copies are attached to the child/ young person's record in an appropriate place and clearly titled, so that they can easily be located and viewed. Where possible, the child/ young person should be able to keep the original version of any written materials they have provided for their own records.

Children and young people must also have access to any support they need in order to contribute and share their views, such as an advocate, an interpreter or access to MOMO which can be used in a child/ young persons own language. Where a child/ young person's views change over time, their record will be updated to reflect this, particularly where there has also been a significant change of circumstances and / or there is a change of the plan for the child/ young person. This applies from the point of referral through to case closure.

Standard 2: We will try to understand your individual needs and make sure these are properly recorded and considered when decisions are being made

An important part of working systemically is to think about how social difference and power organise and influence (overtly or otherwise) our work with children/ young people and their families. Consider the impact on you and the child/ young person /family of the Social GRRRAACCCEESSS (Gender, Gender identity, Geography, Race, Religion, Age, Ability, Appearance, Class, Culture, Caste, Education, Ethnicity, Economics, Spirituality, Sexuality, Sexual Orientation) when making all decisions for a child/ young person and their family. Ensure that this thinking, and how it contributed to decision-making, is clearly evident within your case recording. As workers we need to further consider how our own personal lived experiences and social GRRRAACCCEESSS might be influencing our recording and challenge our prejudices and assumptions as part of the recording process.

This also means ensuring that basic demographic data and personal relationships are recorded accurately (including spellings of names etc.) and kept up to date. Key documents that capture the child/ young person's needs, such as any Education, Health and Care Plan, Health Assessment or Personal Education Plan, should be properly recorded and maintained.

Always be child/ young person specific when writing consolidated assessments, plans or reports and take care in respect of siblings' information becoming available on each other's case summaries. Be sure to record information about each child/ young person in the family, and respect that they are individuals with particular needs, which may be different to the needs of their siblings and parents. Consider the implications of what has happened to each child/ young person and what this means for them, ensuring that each child/ young person's lived experience is properly captured within their records to inform any decisions being made.

Standard 3: We will record clearly why we are working with you and your family, what the plan is for you and how we will work with you to achieve this

Good recording demonstrates the purpose of the interventions taking place: the purpose of each step taken, the decisions made and the resulting action (remember: Purposeful, Planned and Focussed). Case recording becomes the major source of evidence for investigations and enquiries, so remember; a child's record is your tool to help answer the basic questions:

- What is this child/ young person's story (both their history and their current life)?
- Why is the local authority involved with this child/ young person?
- What is the local authority doing to help?
- What difference is it making?
- What are the child/ young person's hopes and aspirations?
- Who is making the decisions and what is the rationale?

It is important that all relevant and significant information is included and to clearly differentiate

between fact and opinion. Records should always state the purpose of the contact with the child/ young person and must indicate whether the child was seen alone, what views were expressed by the child/ young person and how the child/ young person's voice was fully considered in implementing the plan.

It can be easy to fall into the mistake of linking quantity with quality but the best assessments and plans are always 'SMART'. This means being:

Specific; identifying the reasons for involvement and the concerns for the individual child/ young person.

Measurable; how or when will we know the circumstances for the child/ young person have changed?

Achievable; Focus on areas of strengths (including both the short and longer term changes needed in order to build on these), while also addressing the risks that have been identified and how these will be reduced.

Realistic; are the areas of work / intervention achievable?

Timely; our work with families is assessment-led, therefore we must identify what needs to change, plan for and review the changes, in a timely way.

Standard 4: We will only write in your record what we need to, so that it is clear how and why decisions were made and what has changed

To better understand the child/ young person's journey and story, records must be concise and provide an overview of the contact with the child/ young person and their family. Descriptions of events, conversations and behaviour are important but rather than being detailed accounts these should be a summary, followed by the worker's professional analysis: What has happened and what is this telling you about the child/ young person and family? Such analysis must be reflective and clearly distinguish facts from opinions. Actions should be informed by this professional analysis, which is shared/agreed with the family to ensure buy-in.

Decisions will [rightly] be informed by a variety of sources and good practice shows that you should not cut and paste emails, e.g. from other professionals, without entering some information about why it is relevant. Emails between colleagues and partner agencies are not to contain any personal information, or information that is not relevant to the child/ young person's case. Records must also distinguish between first-hand information and information obtained from third parties.

Records of decision-making are to clearly highlight both the reasons for and the outcome of the decision. This should include an assessment of need and risk and why other options were considered but rejected. Decisions and recommendations should be evidence-based and clear, in order to determine the provision of the most appropriate services for vulnerable children and young people. Structure your recording and use headings if this is helpful. This will also ensure that other professionals involved with the family can get a clear picture of what is happening and why. Should a case need to be transferred to another practitioner; this will help to ensure that a seamless service can be provided.

Management oversight must be clearly labeled as such and state clearly what the decisions are, with clearly defined timescales.

Again, always remember that the child / young person may read their record at some time in the future, so make sure all records are honest, balanced and respectful, in order to give confidence that decisions were taken appropriately. Children/ young people may have an opinion on the way that your conversations with them are summarised and this must be taken into consideration. This might mean, for example, showing the child/ young person what you have written, or reading it back to them to check that they are satisfied and that language is agreed upon.

Standard 5: We will make sure that your records are up to date and accurate by writing up important events and discussions quickly

As far as possible, information is to be recorded in present time and not recorded later - as that rarely happens, resulting in gaps in information for the child/ young person. Decisions should be recorded in the child/ young person's file at the time they are made and managers should use supervision to ensure that the case record is being maintained.

All professional meetings must be properly recorded. Minutes should be shared with all those involved within agreed timescales and a copy attached to the child or young person's record (attachments must also be clearly titled so that they can easily be located within documents). Comments and disputes between, or regarding, other professionals must not appear in a child/ young person's caserecord. Where disputes arise, these are to be raised with your line manager or using the dispute resolution process.

Chronologies are to be constructed around the child/ young person's significant life events such as birthdays, success at school or achievements, moves, changes in schools etc. Dates and details of allocated worker involvement are important markers but *for the child/* young person, these will be secondary to what else was happening in their life at that time. Should the child/ young person view their record in later life, the link between significant events and our involvement with their family should be clear.

Genograms/family trees/relationship maps should be dated to indicate as to what point in time they were completed and who contributed to its content as well as what the purpose was of completing it (e.g. as part of assessment to identify patterns in relationship such as domestic abuse, or to identify family strengths and support systems).

All staff are accountable for their own recording and adhering to the timescales set out within service procedures. These timescales should be reiterated within training and all managers should review compliance with these as part of on-going supervision and quality assurance activity. Given the vulnerability of the children, young person and families we work with, recording cannot be considered accurate if it is not also completed in a timely fashion.

Having up to date information is not only important for decision making on individual cases but also in relation to strategic decision making, understanding local need, and the planning of services to meet that need. We are required, statutorily, to report a great deal of information to central government and this is used to make comparisons between local authorities and inform decisions around funding.

It also allows us to evaluate the effectiveness of our services and understand what is working and where there may be problems to resolve.

Roles and Responsibilities

Staff at all levels in the Council will recognise that contributing to good data quality is everyone’s responsibility and a part of all our roles. The table below provides a summary of the data quality expectations on us all, from the services that support us through to frontline practitioners, senior managers and elected members.

| Role | Responsibilities |
|--|--|
| Senior Leaders and Corporate Parents | <p>Senior leaders, such as the Director of Children’s Services (DCS) and Assistant Director for Children’s Social Care rely upon accurate performance data and management information to aid decision-making. They will therefore act as ambassadors for high quality and timely recording, driving a culture of continuous improvement in this area.</p> <p>The DCS has ultimate responsibility for statutory reporting to central government and the provision of data to bodies such as the Association of Directors of Children’s Services (ADCS) and London Councils. Such data supports discussions with others in the sector and with central government, including in relation to funding.</p> <p>The corporate parenting role of the local authority means that everyone from the Chief Executive and members to front line staff are concerned about looked after children and care leavers as if they were their own. Among the 7 principles that local authorities must have regard to when exercising their corporate parenting functions are:</p> <ul style="list-style-type: none"> • To encourage children and young people to express their views, wishes and feelings; and • To take into account the views, wishes and feelings of children and young people. <p>Corporate parents have a responsibility to ensure that case recording takes place in line with these principles.</p> |
| Principal Social Worker | <p>The Principal Social Worker (PSW) plays a key role in developing and monitoring the competency of social work staff. With strategic responsibility for learning and development, quality assurance and the independent reviewing function, the PSW has uniquely independent oversight of the quality of practice, of which case recording is a fundamental part.</p> |
| Service Managers inc. heads of Service, group Managers and Team managers | <p>Service Managers have a responsibility to assure the quality of services provided within their respective areas through routine monitoring, which includes case file auditing and the review of performance data and management information. The overall responsibility for ensuring records are maintained appropriately rests with line managers (although responsibility may be delegated to other staff as appropriate). As such, supervision of staff should include regular review of the quality, timeliness and accuracy of recording and where standards are not being met, this should be managed through the agreed processes.</p> <p>Managers have defined responsibilities within individual procedures and processes in the case management system, which contribute to continuous improvements in</p> |

| Role | Responsibilities |
|---|--|
| | <p>recording quality. Managers should decline to sign something off if it is not of the standard required.</p> <p>Within the quality assurance framework, everyone from team manager level upwards must undertake monthly case file audits. Group managers are responsible for ensuring that actions identified from audits are implemented. Managers are also responsible for ensuring that any learning from complaints is addressed, including where this relates to the quality or timeliness of recording.</p> |
| <p>Children and Young Person's Workers</p> | <p>Children and Young Person's Workers includes social workers, family practitioners, pathway coordinators, family therapists, YJS workers, etc. Practitioners in all parts of the service are responsible for the day-to-day maintenance of accurate, up to date, and relevant case recordings for all children and young people on their caseloads. This should be undertaken in line with the standards in this document and with relevant departmental guidance and procedures.</p> <p>As well as maintaining an up to date assessment, plan and reviews for all cases, practitioners should ensure that all demographic information held on the child/ young person is accurate, as well as personal and professional relationships, contact details, etc.</p> <p>Reports should be up to date, of a high quality and submitted according to agreed timescales.</p> |
| <p>Independent Reviewing Officers (IRO)</p> | <p>IROs oversee children and young people's plans and act on their behalf to challenge the Local Authority on their legal responsibility towards the child/ young person. They ensure that the views of children and young people are heard and acted upon and that children and young people are able to participate in meetings.</p> <p>IROs will raise concerns with the Team Managers where they identify case drift or issues with practice, which includes the quality of case recording or reports provided to meetings. Where an IRO enters into a dispute with a responsible officer, the informal dispute resolution process will be followed to resolve this issue and where necessary the Dispute Resolution Procedure will be instigated.</p> |
| <p>Business Support Team</p> | <p>Business Support Officers (BSOs) and Assistants (BSAs) provide administrative, organisational and strategic support throughout all of the teams. This includes responsibilities for recording both within and outside of the electronic case management and financial systems. Business Support may also have quality assurance responsibilities, such as completing spot checks to ensure that key information within children's records is not only present but accurate.</p> |
| <p>Performance Team</p> | <p>The Children's Performance Team provides performance data and management information to support service planning and delivery. This includes monitoring levels of activity and demand upon the service (including demographics of service users); indicators associated with the timeliness of services; and outcomes for children, young people and families. The team undertakes analysis to identify trends and themes and to benchmark performance against other local authorities.</p> |

| Role | Responsibilities |
|----------------------------|---|
| | <p>They are also responsible for the collation and submission of statutory reporting to central government and work with services and the Systems Team to ensure that the Council remains able to meet its statutory obligations in this respect.</p> |
| Systems Team | <p>The Systems Team is responsible for organising and delivering training on the electronic case management systems and for on-going maintenance and improvements to systems and processes, as required. Ensuring data quality is a key objective of both training and systems development.</p> <p>Trainers will identify areas where data is missing or incorrectly entered on systems and initiate data clean ups in conjunction with the Performance Team. The Performance and System teams are not responsible for ‘cleaning’ data up - it is the responsibility as owners of a record to ensure that it is up to date and accurate – but will play an active role in highlighting issues so that action can be taken by the service.</p> |
| Children’s Placements Team | <p>The children’s placements team sit in the Joint Commissioning Unit and are responsible for the commissioning of external placements: residential, independent fostering agencies and semi-independent provision.</p> <p>The team is also responsible for the commissioning of Short Breaks (SEND), welfare checks and contact visits, therapies and home to school transport.</p> <p>The team is responsible for engaging with providers and for ensuring that contract and individual placements agreement are in pace in respect of each child or young person.</p> <p>The team will circulate movement notifications and will lead on negotiations with provider to either extend, terminate or alter the terms of a placement.</p> |

Recording Timescales – Children’s Social Care

All recording must be finalised within **3 working days** of the event, unless a specific endorsed procedure includes a different timescale (please see examples below). Where a process requires management authorisation, adequate time should be allowed for this to take place. All safeguarding issues must be recorded and reported immediately.

| Process or event | Liquid Logic process / activity | Timescale for completion |
|---|---|--|
| Contact or referral | Contact / referral episode | Within 24 hours of receipt |
| Child and Family Assessment | Single Assessment | Within 45 working days of referral date |
| CIN Meeting | Child In Need Plan | 5 days before scheduled meeting |
| Chronology | Chronology Form | To be up-to-date upon transfer to ISS. Updated at least quarterly and after any significant event. |
| | Case summary | 12 weekly updates |
| Initial Strategy Discussion / Meeting | Strategy Discussion/Meeting | Within 24 hours of meeting |
| Review Strategy Meeting | Review Strategy | Within 24 hours of meeting |
| Initial Child Protection Conference | Initial CP Conference Social Work Report | To Chair and family 24 hours before meeting |
| | CPC Report - Decisions & Recommendations | Within 48 hours of meeting |
| | CP Conference Record | Within 15 working days of meeting |
| | Core Group Meeting Minutes | Within 5 working days of the core group meeting |
| CP Review Conference | CP Review Social Workers Report | 5 working days before meeting to Chair and family |
| | Review CPC Report – Decisions and Recommendations | Within 24 hours of meeting |
| | CP Conference Record | Within 15 working days of the meeting |
| LAC Plan | Child Looked After/Young Person's Care Plan | Within 10 working days of becoming Looked After |
| Placement Planning Meeting (to include Delegated Authority) | Child / Young Person's Placement Plan | Within 5 working days of meeting |
| | Initial Health Assessment | BAAF form to be completed within 5 working days of child becoming looked after (allowing 15 working days for Health to undertake the IHA). Once undertaken, IHA to be uploaded within 72 hours of receipt. |

| Process or event | Liquid Logic process / activity | Timescale for completion |
|--|---|--|
| LAC Health Assessment | Review Health Assessment | RHAs take place annually for LAC aged 5+ and 6 monthly for under 5s. Paperwork to be sent to Health 12 weeks before RHA is due and once undertaken, uploaded within 72 hours of receipt. |
| | Refusals | Where young people refuse a health assessment this should be discussed with them again every 3 months and the outcome of the discussion recorded within 5 working days. |
| Personal Education Plan (PEP) | PEP | To be completed within 10 working days of becoming looked after and PEP meeting to take place within 20 working days. |
| | PEP review | To be completed termly |
| LAC Review Meeting | Child / Young Person's Care Plan | Within 5 working days of meeting |
| | Child in Care Review | Social work Review Report to be shared with the child and IRO 1 day before an initial child in care review and 5 days before a review. |
| | CYP LAC Review Record of Meeting | Decision/recommendations to be completed within 5 working days and full record of the meeting to be completed within 15 working days |
| Pathway Plan | My Pathway Plan | To be in place by age 15 years and 9 months Reviewed and updated every 6 months |
| Care leavers needs assessment | Care leavers needs assessment | To be completed within 35 working days of the young person turning 18 |
| Visits (CIN / CP / LAC / Care leaver / foster carer) | Record of Visits | Within 72 hours of visit |
| Case notes (general) | Case notes | Within 72 hours |
| Supervision | Forms - Supervision | Within 72 hours of supervision |
| | Forms – Group Supervision | Within 5 working days of supervision |
| Management Decisions | Case notes - Managers Decisions | Within 24 hours of decision |
| Return home interview (missing children) | Return home interview | To be offered within 72 hours of child returning and recorded within 72 hours of interview taking place |
| Legal Planning | Record of Meeting to include actions agreed | Within 3 working days of LPM being convened |

| Process or event | Liquid Logic process / activity | Timescale for completion |
|---|--|---|
| Pre-Proceedings | Pre-proceedings Letter | Copy of signed Pre-Proceedings letter to be uploaded within 1 working day of the letter being sent to parents and carers |
| | Record of Pre-Proceedings Meeting | Within 3 working days of the meeting being held |
| Care Proceedings | Letter of Intent to issue Proceedings | Signed Letter of intent to issue to be uploaded on file within 1 working day of the letter being sent out to parents/carers |
| | Social Work Evidence - Statement and Care Plan | Within 2 weeks of the decision to issue |
| | Court Orders | To be placed on system within 2 working days of receipt |
| | Expert Assessments | To be placed on system within 3 working days of receipt |
| Private Fostering | Notification | To be recorded within 24 hours |
| | Assessment | To be completed within 35 working days of notification |
| | Visits | Initial visit within one week of the placement, or the date when notification was received if later, and to be recorded within 72 hours. Visits to then be made every six weeks in the first year and at least 3 monthly in subsequent years. |
| Adoption | Later life letter | The expectation is that the letter will be given to the child at an appropriate time after the Adoption Order is made - usually within 10 working days of the adoption ceremony |
| | Life story book | To be handed to the adoptive parents, together with Later Life Letters, within 10 working days of the adoption ceremony |
| Alerts and escalations (to be fully concluded within 20 working days) | Informal / stage 1 | To be resolved within 10 working days |
| | Stage 2 | To be resolved within 13 working days |
| | Stage 3 | To be resolved within 16 working days |
| Case Closure | In Assessment, following decision to close | 3 working days |

| Process or event | Liquid Logic process / activity | Timescale for completion |
|------------------|---|--------------------------|
| | In Intervention & Support Service (ISS) | 3 working days |

Recording Timescales – Early Help

Unless otherwise stated, all recording must be finalised within **3 working days**.

| Process or event | Liquid Logic process / activity | Timescale for completion |
|---------------------------------|--|--|
| Case allocation | Initial case direction (case note) to be created by manager | Within 24 hours of allocation |
| | Initial contact with family by family Practitioner | Within 24 hours of allocation |
| | Initial contact with key professionals by family Practitioner | Within 24 hours of allocation |
| Case recording on EHM (LL) | Case notes to be added to LL | Within 72 hours |
| Case recording for safeguarding | Case recording for safeguarding to be added to EHM (LL) on the same working day to ensure EDT are sighted if needed. | Same working day |
| Initial home visit | Early Help visit | Within 5 working days (1 week) of allocation |
| Case supervision | Case Supervision to be held and recorded on EHM (LL) | Every 4-6 weeks. Supervision case notes to be updated on the system within 5 working days. |
| Early Help Assessment | Early Help Assessment complete by Family Practitioner and signed off by manager | By 20 th day after allocation |
| Plan | Draft plan to be completed by Family Practitioner and signed off by manager | By 20 th day after allocation |

| Process or event | Liquid Logic process / activity | Timescale for completion |
|---|--|---|
| Team Around the Family (TAF) and confirmed plan | Initial TAF meeting to be held and TAF plan agreed | Initial TAF by 6 weeks of allocation for families having an EHA For step down families within 2 weeks of allocation |
| Team Around the Family (TAF) reviews | TAF review meetings held and plan reviewed | To be held every 4 weeks. Case note to be added on day of review and plan to be updated and authorised within 72 working hours |
| Case closure | Closing summary | Within 3 working days once closure is agreed. |
| Return home interview (missing children) | Return home interview | To be offered within 72 hours of child returning and recorded within 72 hours of interview taking place. Case recording for safeguarding to be added to EHM (LL) on the same working day to ensure EDT are sighted if needed. |

Recording Timescales – Youth Justice Service

Unless otherwise stated, all case note recording must be finalised within **1 working day**

| Process or event | Child View / Liquid Logic process / activity | Timescale for completion |
|---|---|---|
| Case allocation TUESDAYS following:- Barking Youth Court - Friday Community Resolution (OOC)- Friday Barking Youth Court- Monday | Pre-Sentencing Report (PSR) (AssetPlus assessment) OOC light touch assessment Referral Order Report | Within 15 working days |
| First contact | Initial Home visit/Induction (Tuesdays) | Within 1 week |
| Systemic Case consultation | Case discussion /Chronology | Within 15 days (For PSR/RO/OOC reports) and recorded within 3 working days |

| Process or event | Child View / Liquid Logic process / activity | Timescale for completion |
|--|--|--|
| Referral Order Panel | Panel Meeting | Within 20 working days, decisions recorded within 24hrs, reviews every 3 months |
| Stepdown from CSC (TSW) | Teen Star Assessment (LL) | Within 15 working days |
| Risk Management Panel (RMP) | Multi Agency Meeting | Within 6 weeks of a Young person leaving custody/In discussion with management on increase of risk factors |
| Case Notes | Recording conversations/contacts with YP/ Family/Carer/Worker | Recorded within 24hrs |
| Case Notes (general) | Emails, general updates etc. | Recorded within 72hrs |
| Case Supervision | Supervision | Every 4 weeks and recorded within 24hrs |
| | In-depth Case reflection | Every 6-8 weeks recorded within 24hrs |
| Management Decision | Case note - Management decision | Recorded within 24hrs |
| CAMHS and SaLT screening | Case note Child View | Within 14 working days |
| Victim Contact | Once victim details provided (141 form from police) | Contact within 48hrs of a positive 141 form |
| Transfer to NPS (national Probation service) | Transfer meeting | No later than when the young person reaches 17 years and 6 months |
| Youth Cautions | Youth Cautions | Arranged with YOS Police Officer within 10working days of decision. |

Recording Timescales – Targeted Youth Support

Unless otherwise stated, all recording must be finalised within **2 working days**.

| Process or event | Liquid Logic process / activity | Timescale for completion |
|--|--|---|
| Referral and Case allocation | Initial case direction (case note) created and introductory email sent to professionals advising on outcome of referral by IASS duty manager | Within 48 hours of allocation |
| | Case history checked and initial case direction readied for IASS case Allocation meeting every Wednesday by IASS duty manager | By 5 pm every Tuesday, unless urgent referral response required and agreed with HoS and decision made outside the weekly meeting |
| | Cases sent to allocated practitioner by line manager | Within 24 hours of allocation decision |
| | Allocated practitioner makes initial contact with CYP/family and agrees initial meeting | Within 48 hours of allocation |
| Initial meeting | Initial TYS meeting | Within one working week of allocation and recorded within 48 hours, along with case note of initial discussion (post visit) between TYS Practitioner and their line manager |
| Early Help Assessment (TYS) initiated with the young person/family. | Early Help Assessment (TYS) | By 10 th day after allocation and recorded within 48 hours |
| Outcome Star Assessment authorised and case note added for young person and any siblings worked with | Outcome Star Assessment | By 20 th day after allocation. |
| TYS Plan agreed with young person/family and signed off by line manager | TYS Plan | By 20 th day after allocation |
| TYS Plan reviewed and updated | TYS Plan | Every 4 weeks. Case note to be added on day of review and plan to be updated and authorised within 48 hours |

| Process or event | Liquid Logic process / activity | Timescale for completion |
|------------------------|--|---|
| Case closure | Closing summary | Within 5 working days of agreement with line manager (evidenced with case note) |
| | Closing summary, plan closure and ending of involvements | Line manager to approve closing summary, copy to siblings, end involvements, end EH case status (and add a closed status) and close plan, then close on the Outcome Star site after checking all documents are saved. |
| Group work sessions | Group work | Groups to be set up on EHM and attendance, content and any concerns recorded post each session (with clear escalation of high-concerns) within 48 hours |
| Personal supervision | | To be held every 6 weeks and emailed to Family Practitioner within 48 hours |
| Return Home Interviews | Return Home Interviews | All missing referrals acknowledged within 48 hours and first attempt to complete RHI within 72 hours of referral allocation. |

Recording Timescales – Children Placements Team

Unless otherwise stated, all recording must be finalised within **2 working days**.

| Process or event | Liquid Logic process / activity | Timescale for completion |
|------------------|--|--|
| Placements | Placement searches recorded as a case note on LCS. Evidence of all work carried out as part of a placement search to be recorded. Planned placement move/search to be supported by a placement plan, and evidence provided where a placement stability meeting has been held in cases where the move is not in accordance with the care plan or of a safeguarding matter. AD approval is in place for search to commence. Retrospective placement plan required in all cases of emergency placement. AD approval in place as required. | Within 24 hours of search and search response |
| | | Open searches to be reviewed every 2 weeks with social care lead, planned placement searches to be closed. Refreshed after 8 weeks. Withdrawals to be closed within 24 hours |

| Process or event | Liquid Logic process / activity | Timescale for completion |
|-------------------|---|---|
| | | Ensure placement plan is received within 24 hours, so that IPA can be issued within 24 hours of placement being commenced and notification can be circulated. |
| | Placement Offers - letter confirming acceptance of the proposed offer, and approval (including breakdown of costs) to be completed for each case and filed in LSC documents. | Within 24 hours of offer and acceptance of placement |
| | Notifications -- Commencements/Terminations – confirm placement commencement in accordance with proposal offer letter. Notice/termination given to provider as instructed by social care and in accordance with contracted notice period/duration of placement. | Notification of commencement/termination/move circulated within 24 hours. |
| | Making placement - When placing children at a distance - send a notification and consult with the Borough BEFORE placing the c/YP. Information to be shared with AD/Senior Manager as required for approval to place. In emergency (same day or weekend by EDT) carry out the consultation and share information with AD/Managers as appropriate. Evidence to be recorded as case note on LCS. | Within 24 hours of offer being accepted by social working and prior to AD sign off. |
| Contracts & IPA's | Copies of fully completed issued IPA to be uploaded as a case note. IPAs to include breakdown of costs and any partner contributions. | Emergency placements consultations to be carried out within 5 days. Within 4 days of placement commencing |