Herefordshire

Child in Need Practice Guidance

July 2020

**This guidance should be read in conjunction with** [**Herefordshire Safeguarding Children**](https://herefordshiresafeguardingboards.org.uk/herefordshire-safeguarding-children-board/for-professionals/key-child-protection-documents/)[**Board Levels of Need Threshold Guidance**](https://herefordshiresafeguardingboards.org.uk/herefordshire-safeguarding-children-board/for-professionals/key-child-protection-documents/)

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1. Child in Need – Purpose and Principles

* 1. Section 17 of the Children Act 1989 places a general duty on the Local Authority to safeguard and promote the welfare of children who are assessed by Children’s Social Care to be ‘in need’.

Section 17 defines a child in need as a child;

* + - Who is unlikely to achieve or maintain or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision for him or her of services;
    - Or a child whose health or development is likely to be significantly impaired or further impaired, without the provision of services;
    - Or who is disabled (See 10 below)
  1. To determine if a child is ‘in need’ a social worker is required to undertake an assessment, giving due regard to the child’s wishes and feelings. The social worker will work collaboratively with parents including wherever possible any absent parent, extended family and any professionals involved with family. The assessment will pay regard to relevant previous history including history sourced from the family themselves.
  2. A child in need plan will be necessary when an assessment has determined that the child is ‘in need’ as described in section 1 above and is not (and does not need to be) or is no longer, subject to a child protection plan, a Care Plan (for children in care) or a Pathway Plan (for children leaving care).
  3. Other agencies have a duty to cooperate with Social Care in carrying out the duty to assess the needs of children and to provide services as necessary.
  4. The principles that underpin these procedures are;
     + *That with the right help and support the majority of children are better served by remaining with their family of origin*
     + *The provision of services must be based on a high quality assessment of the child’s and family’s needs, the child’s needs must always be seen in the context if their family, ethnicity, culture and community.*
     + *We will work openly with children and families to bring about change in solution focused ways which builds on their strengths and involves them in identifying needs and formulating support plans*
     + *The focus of our work and that of our partners will be to do all we can to reduce any escalating risk of harm or impairment of health or development*

1. Consent
   1. We should endeavour to undertake an assessment and offer support with the consent of parents. Young people of an age and understanding, particularly if aged 16 or over should also be asked for their consent.
   2. Social workers should ensure that parents and young people have full information about the benefit of an assessment and support. Rejecting an offer of support is not in itself justification for escalation and should be accepted and recorded unless it is believed the child will suffer significant harm without social work intervention. In these circumstances an assessment should be carried out under s47 of the Children Act 1989, consent is not then required but parents should be informed of the decision and the reasons why.
2. Applying the Child in Need Procedure following a Child and Family Assessment

3.1 Where an assessment identifies that a child is ‘in need’ and those needs can be met through short term provision of support or services by Children’s Social Care these services should be provided at the earliest opportunity as part of the Child and Family Assessment.

3.2 If the needs being identified during the assessment indicate that they cannot be addressed within the maximum 45 day assessment timescale then this is indicative of the need for a Child in Need Plan. The assessment includes clear recommendations regarding the need for a Child in Need Plan, analysing this option against all available options and with reference to Levels of Need threshold guidance. The social worker’s recommendations includes what support and services should be put in place, or continue, in order to develop a Child in Need Plan.

3.3 Supervision of the case is the responsibility of the Team Manager and must include the Social Worker and Family Support Worker (where allocated) prior to the first Child in Need meeting and subsequent review meetings.

* 1. The factors in a case which should influence the analysis and the decision as to whether a Child in Need Plan is required are:
* *Age and vulnerability of the child*
* *The degree of injury, emotional impact or neglect*
* *The reason for the concern (the incident/or acts of omission or commission)*
* *Past history and context*
* *Whether the concern has resulted from an isolated incident or continuing or enduring concern*
* *The culpability of the parents*
* *The carers ability or/and willingness to recognise the need for and to effect and sustain changes in their behaviour*
* *Contributory factors to harm such as substance misuse or parental mental ill health, Domestic Violence and the parents engagement with the relevant support services*
* *Identified protective factors including family and friends network and uptake of early help support*
* *The child is at risk of entry into care.*

3.5 The responsibility for formulating and delivering the Child in Need Plan will rest with the Assessment and Child in Need Service. The duration of Child in Need Plans should be determined by the child’s needs and should not extend beyond **12 weeks** except in **exceptional** circumstances. The decision to extend a Child in Need Plan beyond 12 weeks is made by the Team Manager and recorded as Case Supervision.

3.6 As well as threats to children within their family, children and in particular teenagers, may be vulnerable to abuse or exploitation outside their families. These may include exploitation by criminal gangs and organised crime groups, trafficking, online abuse, sexual exploitation and the influences of extremism leading to radicalisation. In these circumstances interventions may be required from a wider range of partner agencies as the wider external factors are likely to be a threat to a number of children. In the vast majority of cases a Child in Need Plan is more likely than a Child Protection Plan to be effective in helping parents and carers understand risks and support them to keep their child safe. Child in Need arrangements also extend to young people who are the alleged perpetrators. In these instances every attempt should be made to convening one meeting to consider all the child’s needs, combining the Child in Need meeting and the Risk Management Meeting. Both the Child in Need Plan and the Safety (risk management) Plan must be completed.

1. Formulating the Child in Need Plan
   1. Following an assessment, the first Child in Need meeting is chaired by the Team Manager and convened **no later than 10 working days** after the completion of the assessment. The family and all relevant professionals are invited to attend. Review Child in Need meetings are chaired by a Senior Practitioner. The Family Support Worker should be involved plans of intervention and this needs to be agreed at the earliest opportunity and at the latest, before the first Child in Need meeting.
   2. In circumstances where relevant partners are unable to attend they should be asked to provide a brief report setting out what they are worried about, what they think is working well and what contribution they can make to support the family. All information will be shared with the family. The meeting should be as informal as possible and the venue agreed with the family.
   3. The purpose of the initial Child in Need planning meeting is to formulate a plan with clear measurable outcomes and actions for professionals, parents and where appropriate the child. The plan will set out what we are worried about, what is working well and what needs to happen to alleviate the concerns. The plan will detail:
      * What support will be offered and by whom
      * What individual family members agree to do
      * What the child agrees to do
      * Safety planning
      * The timeframe for the various elements of the plan and when it will be reviewed
      * The frequency of social work visits\*
   4. The purpose of the plan is to work directly with the family as a means of helping them make the necessary changes to meet the developmental needs of their child. To this end social work visits are an integral part of the support plan and **visits should take place at maximum intervals of six weeks**.
   5. Business Support coordinates the meeting on behalf of the social worker and takes a note of attendees, anyone invited and not attending and a brief summary of key points, recording all information in the relevant Step: Child in Need – Develop/Update Child/YP Plan in Mosaic. Following the meeting the social worker will then be responsible for writing the agreed initial plan in jargon free language. It is the responsibility of the chair to make sure the parents and child if in attendance, feel that the plan is helpful and supportive. The completed record of the meeting and agreed plan is sent to the team manager for ratification and then distributed to those invited to contribute to the plan. A single line entry in case notes should reflect that the meeting has taken place.
2. Reviewing the Child in Need Plan
   1. The effectiveness of the intervention should be subject to regular communication between the parties involved and the social work visits should be used as an opportunity to explore with the family which elements of the plan are working and which are not.
   2. Review meetings are held at **6 weeks** and **12 weeks**, the purpose of which are to discuss if the help being given is leading to significant positive change at an appropriate pace for the child, and to agree what additional actions need to happen. The review meeting should be chaired by the Senior Practitioner unless there has been no progress or there are contentious issues to discuss, in which case chairing may revert back to the Team Manager. The review meeting will determine if the plan is still helpful and make any amendments as required, it will consider step down to targeted or universal services and if appropriate which agency will lead this, or if necessary an escalation to a more intensive form of social care intervention. If the child remains on a plan a further review date will be agreed.
3. Applying the Child in Need Procedure following a Child Protection Plan or Care Plan
   1. Where a child has been subject to a child protection plan, **unless the circumstances are exceptional**, a child in need plan should be put in place, for **at least 12 weeks**, to continue to support the family to ensure progress is sustained. Exceptions to the requirement for a Child in Need plan can only be agreed by the case responsible Head of Service.
   2. The Child in Need Plan is formulated and distributed by the Conference Chair **within 5 days from the child protection conference** and the plan is delivered by the current allocated team.
   3. Children may also have a Child in Need Plan following a period of time in the care of the local authority under s20. The likely duration of the plan is identified at the child’s final Looked After Review. This meeting formulates the Child in Need Plan, based upon the social worker’s recommendations, and the plan is distributed by the Independent Reviewing Officer **within 5 days from the Looked After Review**. The current allocated team delivers the plan.
   4. For children subject to a Supervision Order, the Child in Need Plan lasts for the duration of the Order.
   5. Given that the core group is well established at this point, the ongoing needs of the family should be well understood and a multi-agency plan has been formulated at the final child protection conference, the responsibility for chairing Child in Need review meetings is delegated to the child’s social worker. If the Child in Need plan is not evidencing progress, review meetings may be chaired by a Senior Practitioner or Team Manager.
   6. All Child in Need Plans are reviewed at **6 weeks** following the last child protection conference / looked after review, and then a further review after 6 weeks. Thereafter the frequency of any further reviews are determined by the multi-agency group delivering the plan, the maximum interval for review being **12 weekly**.
4. Decision to End a Child in Need Plan and Case Closure
   1. **Decisions to end a Child in Need Plan and the involvement of a social worker can only be made at a multi-agency Child in Need meeting**. This includes recommendations to end a Child in Need plan due to non-engagement. Decisions are made with reference to the progress made against the child’s plan, and the Levels of Need threshold guidance. Decisions are clearly recorded in the record of the meeting, including the views of parents and all agencies contributing to the plan. Ultimately the decision whether to end social worker involvement rests with children’s social care. Any dissenting views should be recorded and partner agencies should apply the Resolution of Professional Disagreements policy where they have concerns that the decision does not adequately safeguard the child.
   2. When a child in need case is closed the work that has been done and the outcome should be recorded in the form of a closure summary. This should include the views of the child, the parents and the professionals involved, including details of any ongoing support in place from targeted or universal services, and what the family, their support network and professionals supporting them will do if concerns increase. All of the above information is confirmed in writing to the family and those professionals with ongoing active involvement, at the point of case closure, and uploaded to the child’s records.
   3. Where there is a decision to end social care involvement the child and family may still benefit from help and support. In such cases any support must be agreed with the family and the social worker should make the necessary referrals.
5. Management Oversight

Children in need require the same level of investment as any other child open to social care. Team Managers have a responsibility to reflect on the progress of the plan with the social worker and family support worker, through case supervision and ongoing management oversight. As a minimum these activities should take place prior to statutory meetings where plans are developed and reviewed.

1. Re-referrals

All children re-referred to MASH where a decision is made that the circumstances meet the social care threshold for assessment will be held in the Assessment and Child in Need Service, irrespective of the length of time since the case was last closed.

1. Children with Disabilities
   1. A child with a disability is a child in need if:

* The child has a substantial, long lasting, permanent physical and/or learning disability or a life limiting, life threatening condition, which has been diagnosed by a doctor or consultant;
* As a result of their disability, the child requires support that is substantially greater than would normally be expected for his/her chronological age;

and, the needs that result from such a disability therefore fulfil the other criteria defined under s.17 of the 1989 Act, namely, they are a child:-

* Who is unlikely to achieve or maintain or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision for him or her of services;
* Or whose health or development is likely to be significantly impaired or further impaired, without the provision of services;

It should be noted that the criteria are not intended to include the full range of children identified by the definition of disability within the Equality Act (2010). The reason for this is that not all children defined by this Equality Act have needs that would require the provision of a service from a social care team.

* 1. Children with a Disability fall into two groups

1. Cases that are CIN because their level of medical need/severity of their disability and/or their requirement for overnight short breaks requires SW involvement but that have not safeguarding risks beyond those directly attributable to the impact of the child’s disability. These are long-term stable cases and have visiting and reviewing intervals that are proportionate to their need. Full details are available through the Children with Disabilities Team procedures.
2. Cases that have risks that meet the threshold for L4 on the Levels of Need document (often as a result of risk of family breakdown or neglect) where the child also happens to have a disability (and where the disability might add to the risk factors that we are concerned about). For these children, the standard CIN procedures outlined in this guidance need to be followed. Cases managed in this way would cover the full range of disabilities defined by the Equality Act and might be held in a number of different social care teams.
3. Children in Need Moving Across Local Authority Boundaries

In circumstances where a child is assessed as in need of social care services and moves to or from another local authority it is a requirement to inform the receiving local authority that the child has received services as a child in need. The receiving local authority is required to consider whether support services are still required and discuss with the child and family what might be needed.