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| **Children’s Social Care Services Operational and Financial** **Scheme of Delegation**  |
|  |
| **DATE:**  |  |  October 2019 |
| **EFFECTIVE DATE:** |  |  October 2019 |
| **ISSUED BY:** |  | Nancy Meehan |
| **CONTACT:** |  | Nick Hollins |
|  |  |  |  |  |
| **SIGNED:** |  | Nancy Meehan |
|  |  |  |  |  |
| **DESIGNATION:** |  | Deputy Director Children’s Social Care |
|  |
|  **YOU SHOULD ENSURE THAT:-*** **this procedure will be entered onto TRI-X**
 |

**Version control v1 300619**

 **V2 050719**

 **V3 180719**

 **V4 220719**

 **V5 230719**

 **V6 11/10/19**

**Document issued to Staff on:** 14th October 2019

1. **PURPOSE**
2. The purpose of the Scheme of Delegation is to agree the **level** at which decisions can be taken. Clearly states when certain decisions cannot be taken **below** this level, and this is the level at which decisions of this kind will be taken. It does not imply however, that decisions are taken in isolation and without consultation. Staff at all levels are expected to adhere to this Scheme of Delegation, unless there is an exceptional reason why not. Deviation should only be agreed by the Deputy Director Children’s Social Care.
	1. The monitoring of decision making to ensure standards are met remains the responsibility of the line managers. The document does not replace Torbay Council’s **Financial Scheme of Delegation** which is the document that you must refer to for detailed advice nor does the document replace our **Tri-x or HR procedures**, both are available on the intranet and must be referred to for detailed guidance.
3. **POLICY**
	1. The Scheme of Delegation has been drafted to comply with the Financial Regulations and Standing Orders of Torbay Council as well as providing clarity for Social Care Managers and Practitioners around decision making.

**2.2** It is informed by the requirements of relevant legislation, including:

* Children Act 1989
* Children (Leaving Care) Act 2000
* Children Act 2014
* Freedom of Information Act 2000
* Education Act 1966
* Crime and Disorder Act 2003
* Anti-Social Behaviour Act 2003
* Ensuring Regular School Attendance – guidance on the legal measures available to secure regular school attendance DfE) 2003
* Guidance on Education-Related Parenting Contracts, Parenting Orders and Penalty Notices (DfE) 2005
* Education and Inspections Act 2006

**2.3** In support of the Scheme of Delegation two further documents have been developed to enhance management grip and oversight of practice. At **Appendix 1** is a framework for communicating key events, decisions or planning changes to ensure managers have greater situational awareness as part of the work to stabilise the service as the basis for sustained improvement.

**2.4 Appendix 2** sets out a framework for management oversight of key decisions /plans /transition paths around defining service elements. This has been articulated to ensure there is no delay in decision making for children and young people and due to the need to enhance management grip, oversight of decision making and ensure clarity at all levels about where decision making sits.

1. **AUTHORITY TO VARY ANY PROCEDURE**

**3.1** Children’s Social Care Leadership Team (CSCLT) can recommend in-year changes, liaising with the Deputy Director Children’s Social Care for final approval. The Head of Business Support will ensure the Scheme of Delegation is subject to annual approval by Children’s Services Senior Leadership Team (CSLT) with a schedule of all the changes made during the year.

**Financial Scheme of Delegation – Children’s Social Care**

The Children’s Social Care Scheme of Delegation details general and specific accountabilities and the responsible officer.

|  | **Accountabilities** | **Responsible Officer** | **Procedure Ref.** | **Financial Ceiling** |
| --- | --- | --- | --- | --- |
|  | **Personnel** |
| **1.1** | **Staff Selection *(must be within establishment of workforce plan and budget and, during the operation of a vacancy freeze with the express approval of CSMT both the DSC and the Chief Executive*)**  |
|  | Approval for new posts | Ecan process signed by AD/DD, DCS, Finance, HR and CEX | HR Procedures |  |
|  | Variation to Establishment | Ecan process signed by AD/DD, DCS, Finance, HR and CEX | HR Procedures | **Within budget** |
|  | Sign off of ECAN for vacant established post  | Ecan process signed by AD/DD, DCS, Finance, HR and CEX | HR Procedures |  |
|  | Permission to advertise and recruit | HOS (Ecan process signed by AD/DD, DCS, Finance, HR and CEX)  | HR Procedures |  |
|  | Agency staff to backfill vacancy  | Ecan process signed by AD/DD, DCS, Finance, HR and CEX | HR Procedures | **Within budget** |
|  | Overtime costs | Staffing Budget Holder, and in accordance with HR policy  | HR Procedures | **Within budget** |
|  | Action following a DBS check where a positive disclosure is made | Appointing Manager / if question, risk assessment by HOS seeking approval from Assistant Director and guidance from HR  | HR Policy & Guidelines |  |
| **1.2** | **Staff Training*** External training courses (inclusive of travel and expenses)
* Away Day expenses
* Internal training courses
* Business Units
* Children & Families (Social Care)
 | Head of Service/Service Manager to sign off request and Strategic Workforce Manager to agree budget (via Workforce Development Group and relevance of training/course/cost). If more than £1k a learning agreement is required. | HR Procedures | **£1,500****Within budget****Within budget****Within budget****Within budget** |
| **1.3** | **Disciplinary Procedures** | Disciplinary Procedures on HR pages / intranetDisciplinary Procedures on HR pages / intranet |  |
|  | Informal Discussion | Line Manager with guidance from HR if required |  |
|  |  |  |  |
|  | First Written Warning  | Line Manager or other appropriate manager as delegated Panel: Manager who reports direct to CSMT member (e.g HOS) and guidance from HR who may/may not be present |  |
|  | Final Written Warning  | Line Manager or other appropriate manager as delegated Panel: HR Officer, CSCLT member  |  |
|  | Dismissal Stage | Line Manager or other appropriate manager as delegated Panel: Assistant Director, CSCLT member and HR |  |
|  | Appeal | Line Manager or other appropriate manager as delegated First Written Warning Panel: HOS and HRFinal Written Warning Panel: Assistant Director/Deputy Director, CSMT member and HRDismissal Panel: AD/DD/DCS, HOS and HR Appeal Panel: Dismissing Officer and HR Final Appeal Panel: Members / Dismissing Officer & HR |  |
|  | Suspension | HOS only after advice from HR and agreement from AD/DD or DCS |  |
|  | Employees in Probation Period | Step 1: Line Manager only with guidance from HRStep 2: Manager who reports direct to CSCLT member and HRAppeal against Step 2: Assistant Director/Deputy Director and HR |  |
| **1.4** | **Capability Procedure (Performance)** | Capability / Grievance Procedures on HR pages / intranetLeave Arrangements Policy on MyView Leave Arrangements Policy on MyView  |  |
|  | Informal Discussion | Line Manager  |  |
|  | Initial Formal Meeting/Formal review Meeting | Line Manager  only with guidance from HR |  |
|  | Final | HOS + HR |  |
| **1.5** | **Grievance** |  |
|  | Informal Stage | Line Manager following discussion with HR |  |
|  | Formal – Stage 2 | Line Manager or Senior Manager not previously involved with guidance from HR |  |
| **1.6** | **Appeals** |  |
|  | Appeals – Warning | 2 x Managers more senior than at disciplinary stage + 1 x HR |  |
|  | Appeals – Dismissal (misconduct only) | DCS and HR  |  |
|  | Final Appeal Panel | Members, Dismissing Officer, HR  |  |
| **1.7** | **Leave** |  |
|  | Annual leave (as per policy) | Line Manager |  |
|  | Carry over annual leave above corporate policy carry forward(Maximum 5 days in special circumstances) | DCS |  |
|  | Compassionate leave up to 5 days maximum | Line Manager / Team Manager  |  |
|  | Any extension to paid Compassionate Leave outlined above  | DCS with advice from HR |  |
|  | Unpaid leave | HOS |  |
|  | Career Break | HOS and Assistant Director  |  |
|  | Time off for Public Duties  | HOS |  |
| **1.8** | **Miscellaneous** |  |  |
|  | Authorisation for ID cards | Team Manager  |  |  |
|  | Additional payments – acting up | HOS in consultation with AD | HR procedure |  |
|  | Provision of Employment Reference | Line Manager to provide/signed off by Service Manager |  |  |
|  | Appraisal Judgment  | Line Manager |  |  |
|  | Early retirement and access to pension/flexible retirement | CSMT, in accordance with Corporate approvals final approval Chief Executive |  |  |
|  | Approval of travel claims | Line Manager | HR procedure |  |
|  | Request payment for Eyesight Test | Line Manager | HR procedure |  |
|  |
|  | **Finance** |
| **2.1** | **Contracts with Outside Bodies, e.g. Limited Companies and Consultants** |
| **2.2** | **Tenders for Contracts** | **Rules of tenders included in Financial Procedures** |  |
|  | Up to £10,000 (1 quotation) | Director, Assistant Director or authorised deputies In consultation with corporate procurement team  | Procurement procedure | **Up to £10,000 (NB, excludes placement of an individual** |
|  | Contract where total value is from £10,001 up to £50,000 (three quotes) |  Director, Assistant Director or authorised deputies In consultation with corporate procurement team | Procurement procedure | **Up to £50000 (NB, excludes placement of an individual)** |
|  | Contract where total value is above £50,001 (min. 3 tenders)  | Director, Assistant Director or authorised deputies In consultation with corporate procurement team | Councils Standing Orders | **Above £50,000 up to (social Services contracts £625,000 (NB, excludes placement of individual)** |
| **2.3** | **Departmental Financial Management including Budget Monitoring** | Financial Scheme of Delegation  |  |
| **2.4** | **Service Areas** |
|  | s.17: One off or cumulative expenditure  | Team Manager  | Financial Scheme of Delegation | **Up to £300 in any one transaction not repeatable to the same family twice** |
|   | s.17: All cumulative expenditure | Service Manager  | Financial Scheme of Delegation | **Over £300 and or payment to family already in receipt of two previous payments** |
|  | Approval of Care Package  | Chair of Access to Resources Panel  | Financial Procedures | **Up to £5,000 one off or cumulative** |
|  | Approval of Care Package | Assistant Director Children’s Safeguarding |  | **Over £5,000 per weekly placement one off or cumulative** |
| **2.5** | **Write Off’s** |
|  | Writes off up to £1000 | Assistant Director/Deputy Director |  | **Up to £1,000** |
|  | Writes off over £1000 and up to £5,000 | DCS and Head of Finance  |  | **Over £1,000 up to £5,000** |
|  | Writes off over £5,000 and up to £50,000 | Joint report from Director and HOF for approval by Executive Member |  | **Over £5,000 up to £50,000** |
|  | Writes off above £50,000  | Joint report from Director and HOF for approval by Chief Executive |  | **Above £50,000** |
| **3.** | **Finance** |
|  | **All payments must be made in accordance with Financial Regulations.**  |
| **3.1** | Approval for legal costs and independent assessments | Chair of Legal Gateway Panel |  |  |
| **3.2** | Approval of various allowances, e.g. adoption, SGO, CAO, etc. | Via Access to Resources Panel |  |   |
| **3.3** | Family time for Children in Care (otherwise known as contact) | Team Manager  | Financial SOD | **Up to £300**  |
| **3.4** | Family time for Children in Care (otherwise known as contact) | Service Manager  | Financial SOD  | **Over £300**  |
| **3.5** | Authorisation of cost of secure placement | DCS/Assistant Director / Secure Panel  |  |  |
| **3.6** | Petty Cash  | Team Manager | Head of Finance  | **£100**  |
| **4** | **Legal**  |
| **4.1**  | Decision to seek legal advice from Legal Section | Team Manager after discussion with Service Manager |  |  |
| **4.2** | Decision to enter PLO | via Legal Gateway Panel |  |  |
| **4.3** | Instruction to Solicitor in Proceedings  | Service Manager  |  |  |
| **5** | **Complex Needs** |
| **5.1** | Complex Needs – Shared Funding (NB: excludes OOA placements – see 7.13) | Chair of Complex Needs Panel |  |  |
| **5.2**  | Assessment (including continuing care)  | Care Manager Adult Services /Social Worker in consultation with Team Manager |  |  |
| **5.3**  | Negotiation with Health to gain agreement in principle | Head Of Service; Delegated to Service Manger  |  |  |
| **5.4**  | Negotiations with other Agencies re Funding. Dispute with outcome | Head of Service |  |  |
| **5.5**  | Transition of children with complex need including post 18 year funding.  | Transition Meeting via Access to Resources Panel  |  |  |
| **5.6** | Aids and Adaptations (Children in Care and CWD) | Service Managers up to £1000.00 – HOS above £1000.00 HOS/Panel with accompanying documentation (audit trail) or in emergency HOS over £1000.00 |  | **£1000.00 for Team Managers and above HOS****Over £1000.00** |
| **6** | **Children’s Social Care Practice Accountabilities** |
| **6.1** | Decisions on outcome of referrals and assessments | Team Manager  |  |  |
| **6.2** | Sign off s47  | Service Manager |  |  |
| **6.3** | Responsibility to assess case  | Case Holder, with management oversight from Team Manager |  |  |
| **6.4** | Responsibility to call a child's care planning or review meeting and chairing of pre admissions to care planning meeting | Team Manager  |  |  |
| **6.5****a****b** | Chairing a CIN meetingChairing a Care Planning meeting | Social Worker but Team Manager at 16 weeksTeam Manager |  |  |
| **6.6** | Chairing of Core Groups | Team Managers initial. TM/SW every other one thereafter |  |  |
| **6.7** | Chairing of Legal Gateway Panel | Head of Service |  |  |
| **6.8** | Chairing of PLO meetings | Team Managers |  |  |
| **6.9** | Agreeing to accommodate a child with parental consent | Via Access to Resource Panel or AD/DD in the case of an emergency with Service Manager/Head of Service Recommendation |  |  |
| **6.10** | Agreement to a residential placement | DCS via Access to Resource Panel or AD/DD in the case of an emergency with Service Manager/Head of Service Recommendation |  |  |
| **6.11a** | Agreement to change a placement where increase in cost will be incurred | DCS via Access to Resource Panel or AD in the case of an emergency with Service Manager/Head of Service Recommendation |  |  |
| **6.11 b** | Agreement to change a placement where no increase in cost will be incurred | Via Access to Resource Panel or AD in the case of an emergency with Service Manager/Head of Service Recommendation |  |  |
| **6.12** | Agreement to discharge a child who is accommodated under Section 20, 1989 Children Act | Head of Service |  |  |
| **6.13** | Decision to apply for an EPO (Emergency Protection Order) | Head Of Service following strategy discussion. In exceptional circumstances, where delay would place the child at risk, delegated to Service Manager |  |  |
| **6.14** | Decision to initiate care proceedings in any court | Head Of Service via Legal Gateway Panel. In exceptional circumstances, where delay would place the child at risk delegated to Service Manager. |  |  |
| **6.15** | Signing of applications to courtSigning of care plans to court | Team ManagerTeam Manager  |  |  |
| **6.16** | Endorsing initial and final care plans | Service Manager |  |  |
| **6.17** | Court directed placements  | Emergency authorisation to place paperwork required. Approved in retrospect via notification to Access to Resources Panel within one week.  | Financial SOD |  |
| **6.18** | Decision to apply for discharge of care order | Team Manager following CLA Review and appropriate consultation with Service Manager | CLA Procedures |  |
| **6.19****a** **b** | Monitoring care plans of Looked After ChildrenMonitoring care plans of non-Looked After Children | Team Manager of Caseholder and Independent Reviewing OfficersCaseholder and Team Manager |  |  |
| **6.20 a** | Agreement to ‘Needs and Outcomes’ search externally for a residential placement | DCS via Access to Resources PanelAssistant Director DD in emergencies only but must have sight of all relevant paperwork |  |  |
| **6.20 b** | Agreement to ‘Needs and Outcomes’ search externally for a non-residential placement | Via Access to Resources PanelAssistant Director DD in emergencies only but must have sight of all relevant paperwork |  |  |
| **6.20 c** | Agreement to placement with ISPs | Head of Service |  |  |
| **6.20 d** | Authority to terminate or suspend placement as a consequence of challenging behaviour | Head of Service |  |  |
| **6.21****a****b** | To ensure statutory reviews of CLA are carried out as per Departmental policyAuthority to postpone a CLA Review beyond statutory time limits | Independent Reviewing Officer & Team ManagerIndependent Reviewing Officer with Child’s Head Of Service |  |  |
| **6.22** | To chair statutory reviews of CLA | Independent Reviewing Officer |  |  |
| **6.23** | Carrying out of statutory visits for CLA | Caseholder |  |  |
| **6.24** | Ensuring statutory visits have taken place in accordance with legislation | Team Manager |  |  |
| **6.25** | 1. Missing children : notifying police
2. Missing children : over 24 hours
3. Missing children : over 72 hours
4. Missing children : (decision to inform media)
 | Team Manager / Delegated to Social Worker. Team Manger and Service Manager. Exploitation Manager/Co-ordinator to be informedTeam Manger and Service Manager. Head of Service to inform Assistant Director/DD and Exploitation Manager/Co-ordinator to be informed Assistant Director/DD/DCS  | ***Practice Guidance for Children/Young People Missing from Home/Care and Education in Torbay*** |  |
| **6.26** | Charing of Complex Strategy Meetings  | Relevant Head of Service |  |  |
| **6.27** | **Death of a child in care** |  |  |  |
|  | * notifying the Director, ***Director OR AD will notify the lead member.***
* notifying the Assistant Director/DD and HOS
* Team Manager
* HOS YOT/ IYSS
* notifying Ofsted/HOS QA /
 | Assistant Director/DDAssistant Director/DD or Head of ServiceHead of ServiceHOS Quality AssuranceHead of Business Support  |  |  |
| **6.28** | **Children Looked After. (NB: refer to out of hours service re. foster care**)Consent to: immunisation/ vaccination (e.g. meningitis) Consent to emergency treatmentConsent to surgeryConsent to contraceptive treatmentConsent to high risk medical treatment ***Note if a general anaesthetic is required DCS delegation to AD/DD*** | Parent and/or Carer/Social WorkerParent and/or Carer/Social WorkerParent and/or Carer/Social WorkerParent and/or Carer/Social WorkerParent and/or Carer/Social WorkerParent and/or Carer/Assistant Director/DD |  |  |
| **6.29** | Consent to marriage of CLA or Care Order | Parent and/DCS following consultation with Team Manager  |  |  |
| **6.30** | Consent to termination of pregnancy and HIV testing of CLA | Parent and/or Team Manager in consultation with young person (Fraser competent) Head of Service informed If not Fraser competent, seek legal advice immediately. |  |  |
| **6.31** | Signing a passport application of CLA | Social Worker (applicant signatory)Service Manager (counter signatory) |  |  |
| **6.32** | Authorising a trip abroad for CLA | Head of Service |  |  |
| **6.33** | Letter authorising child to leave country | Head of Service |  |  |
| **6.34** | Authorising request for DBS checks on children’s carers | Team Manager/Line Manager | HR Procedure on DBS Checks |  |
| **6.35** | Informing Ofsted re. DBS check | Assistant Director/DD |  |  |
|  | ***NB Decisions in respect of children who are the subject of Court Proceedings (Civil or Criminal) are not delegated within the department as they remain within the jurisdiction of the Court. Children on a Care Order are those who are on a Care Order to Torbay Council.*** |
| **6.36** | Case allocation/closure | Team Manager / ATM |  |  |
| **6.37** | Authority to place looked after children at home or with person who has parental responsibility. | Head Of Service (Placement of Children with Parents Regulations) |  |  |
| **6.38** | Authority to place siblings separately long term in foster placement | Service Manager following "sibling separation meeting" and subject to agreement of fostering service decision maker and consultation with IRO and with a Together or Apart Assessment |  |  |
| **6.39** | Authority to place siblings separately short term | Service Manager in consultation with Team Manager and IRO |  |  |
| **6.40** | Authority to place children separately where Adoption is the plan | (Adoption Agency Decision Maker) in consultation with IRO |  |  |
| **6.41****a****b** | Agreement to suspend contact (child on Care Order Section 34(6) Children Act 1989Notification of all persons concerned | Service Manager with legal advice for up to 7 days. Will then have to go to court.Team Manager with legal staff  |  |  |
| **6.42** | Contact at discretion of Local Authority | Team Manager following LAC Review |  |  |
| **7** | **Agency Decision Making**  |  |  |  |
| **7.1** | **Fostering:** approving of Fostering Panel minutes  | Service Manager Fostering  |  |  |
| **7.2** | Oversight / approval of new foster carer household  | Service Manager Fostering  |  |  |
| **7.3** | Approval of foster carer annual review minutes  | Head of Service/ Service Manager Fostering |  |  |
| **7.4** | Foster care exceptions  | Head of Service /Service Manager Fostering |  |  |
| **7.5** | Connected person temporary approval as foster carers (Reg. 24)  | Head of Service  |  |  |
| **7.6** | Agreement for Specific Child Support / transition Payment (in addition to fostering allowance)  | Head of Specialist Services / Fostering Team Manager  |  | **Additional** **Tier 1 £224****Tier 2 £301****Tier 3 £400**  |
| **7.7** | **Adoption:** Children’s plans for adoption (including Foster to Adopt) | HOS for adoption (delegated by ADM) | Head of Specialist Services |  |
| **7.8** | Change to child’s plan for adoption  | Permanence Panel then Head of Service  |  |  |
| **7.9** | Adopter approval and panel matches / business (e.g. disruptions)  | Adoption Panel then ADM (Assistant Director) |  |  |
| **7.10** | **Secure Accommodation** |  |  |  |
| **7.11** | Making application to Assistant Director for Secure Accommodation | Team Manager, having taken advice from HOS |  |  |
| **7.12** | Authority to endorse secure application | Assistant Director may be delegated to HOS |  |  |
| **7.13** | Chairing of Secure Panel  | DCS / can be delegated to Assistant Director  |  |  |
| **7.114** | Agreement for emergency 72 hour secure bed application  | AD approval but secure panel / court date required before end of 72 hour period.  | Children Act regulations  |  |
| **8** | **Child Arrangement Orders**  |  |  |  |
|  **8.1** | Departmental agreement to apply for Children Arrangement Orders/ SGO | AD |  |
| **9** | **Child Protection Plans**  |  |  |  |
| **9.1** | Subject child not being seen in first 24 hours | Team Manager to provide a rationale on case file as to not being seen but has to be agreed and signed off by Service Manager.  | Safeguarding Children Policy |  |
| **9.2** | Subject child not being seen within 10 days of Conference  | Team Manager to provide a rationale on case file as to not being seen but has to be agreed and signed off by Head of Service. |  |
| **9.3** | Decision to reconvene ICPC within 24 months of previous de-plan | Head of Service  |  |
| **9.4** | Decision to initiate Section 47 Enquiry | Team Manager |  |
| **9.5** | Decision to call Initial Child Protection Conference following Section 47 enquiry | Service Manager |  |
| **9.6** | Decision **not** to call Initial Child Protection Conference following Section 47 enquiry | Service Manager |  |  |
| **9.7** | Chairing of Initial Child Protection Conferences | Independent Reviewing Officer |  |  |
| **9.8** | Chairing of Review Child Protection Conferences | Independent Reviewing Officer |  |  |
| **9.9** | Delay of Child Protection Conference/Review beyond timescales | **There will be no approvals given** |  |  |
| **10** | **Disabled Children’s Services**  |  |  |  |
| **10.1** | Approval of care plan and allocation of resources including Direct Payment  | Team Manager CWD |  |  |
| **10.2** | Agreement for Direct Payment up to £2000 in cumulative amounts Over £2000  | Service ManagerHead Of Service |  |  |
| **11** | **Care Leavers Service**  |  |  |  |
| **11.1** | Payments to care leavers  | Team Manager IYSS/YOT YOT / IYSS |  | **Up to £1000**  |
| **11.2** | Payments to care leavers  | Service Manager  |  | **Over £2000** |
| **11.3**  | Care Leavers allowance for independence  | Service Manager can be delegated to Team Manager |  |  |
| **11.4** | Care Leavers emergency payments (up to £400) | Service Manager  | Care Leavers Finance Booklet  | **£400** |
| **11.5** | Care Leavers emergency payments (above £400) | Team Manager, in consultation with Service Manager. Retrospective approval by Head Of Service is permitted when it relates to housing costs, and there has been insufficient time to obtain these approvals in advance. | Care Leavers Finance Booklet  | **Balance available of the authorised imprest account** |
| **11.6** | Leaving Care Grant | Service Manager  | IYSS Entitlements  | **Up to £2000** |
| **11.7** | Equipment for further education  | Service Manager  |  |  |
| **11.8** | Agreement to ‘Staying Put’ | Head of Service/AD |  |  |
| **12** | **Professional Standards**  |  |  |  |
| **12.1** | Responsibility to maintain professional standards and discipline | All staff |   |  |
| **13** | **Financial** |  |  |  |
| **13.1** | Approval of travel claims | Team Manager |  |  |
| **13.2** | Approval of orders for equipment | Team Manager |  |  |
| **13.3** | Approval of travel claims for CPD | Team Manager  |  |  |
| **13.4** | Responsibility to ensure balanced budget | HOS  |  |  |
| **13.5** | Decision to write off equipment | Head of Business Support |  |  |
| **13.6** | Approval of application for courses and funding | In line with Workforce Development Plan and Personal Development Plans. Head of Service/Service Manager to sign off Request and Strategic Workforce Manager to agree budget (via Workforce Development Group and relevance of training/course/cost) If more than £1k a learning agreement is required.  |  | **Within budget** |

**Appendix 1: Management Communication Framework**

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| **Reporting to DCS /DD / Assistant Director**  | **By whom**  |
| Child death, open case or closed case  | Immediately  | HOS / SM/TM  |
| Child death: unknown child where abuse or neglect is suspected | Immediately  | HOS / SM/TM |
| Significant or serious injury which child is unlikely to recover from  | Immediately  | HOS / SM/TM |
| Allegation against staff member  | Within one working day  | LADO / HOS Safeguarding and QA  |
| Significant or serious misconduct / grievance  | Immediately  | HOS / TM/SM |
| Media enquiries  | Same day | HOS / TM/SM |
| Child missing after 24 hours: CP / LAC (whereabouts unknown)  | Next working day  | HOS / TM/SM |
| Child missing after 72 hours: unknown (whereabouts unknown)  | Immediately  | HOS / TM/SM |
| **Prevent:** referral of a child to **Prevent / Channel** panel Looked after child / child on CIN / CP plan  | Next working day | HOS / TM |
| Youth Justice CSSPI report | Immediately | YOT Manager |
| Trafficked child: UASC or looked after child status  | Next working day | HOS / TM/SM |
| Issues of Unallocated cases  | Within one working day | HOS / TM/SM |
| Cases unallocated within one week  | Working day 6  | HOS / TM/SM |
| Compliments/Complaints re: service provision received from other organisations / agencies  | Within 5 days | Service Manager/Head of Business Support |
| Staff Health & Safety serious injury  | Within one working day | HOS / Line Manager in consultation with Head of Business Support |
| Legal threat to authority / Judicial review  | Immediately | HOS / Line Manager Principal Solicitor |
| Out of timescale CPC or LAC review  | Same day  | HOS Safeguarding and QA  |
| Re-referral into MASH within 3 months  | Within one working day | TM / ATM |
| ICPC within 24 months of a previous CP Plan  | Next working day  | SARS Business Support |
| CPC / LAC Review likely to be out of timescale | Within the week before due date  | SARS Business Support |
| **Reporting to Head of Service** (as above) | **By whom**  |
| Statutory visits not within timescale  | 1 day out of timescale  | TM / ATM |
| Inadequate Audit Finding  | Same working day | Auditor |
| Outstanding Audit findings  | Within 5 days | Auditor  |
| Audit unable to be completed within timescale  | Week before due date  | Auditor  |
| Complaint Response  | At timescale or before | Response author  |
| Proceedings / court reports not filed within timescale  | Immediately issue known  | Report author / TM / Senior Solicitor  |
| Court proceedings out of timescale and/or change of plan  | Immediately issue known | Case holding SW/ TM / Senior Solicitor  |
| **LAC arrangements** * Risk of placement break down
* Children with potential risk of 3rd move
* Placement move
* Respite placements over 8 days or 70 cumulative days
* Family & Friends placement
* CLA no school placement
* Access to Resources Panel
 | Immediately issue known | Team Manager / Virtual Head Business Support |
| Care Planning: approved / signed off  | At completion  | Team Manager – Service Manager to endorse |
| Multi Agency Meetings: MARAC / MAPPA: non-attendance must be covered – inform your HOS / HOS QA to ensure cover arranged | Immediately issue known | Attending staff member / manager |
| Allegation re: foster carer: HOS agrees move of child; level of investigation  | Immediately issue known | TM / ATM |
| Recommendation to end CP Plan at first review  | Supervision prior to period end | TM / ATM |
| Unresolved professional dispute / escalation re: Independent Chair / SW disagreement on CP plan / Ending Plan. HOS to resolve with Head of Service Safeguarding and QA | Immediately issue known | TM / ATM |
| Professional dispute / escalation re: partner dispute regarding service delivery decision e.g. close case / refusal of CP approach HOS Safeguarding and QA to resolve in line with TSCP Escalation Policy  | Immediately issue known | TM / ATM |
| Care Proceedings: expectation that proceedings will be filed within 2 weeks of decision. Informed if otherwise Service Manager | Immediately issue known | TM / ATMRelevant Solicitor / Senior Solicitor  |

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| **Expectations (HOS)**  |
| **Issue**  | **Action**  | **Timescale**  |
| MP, Member or complaint via DCS  | Draft response completed, overview by AD/DD  | within 5 working days  |
| Complaint by parent / child | Draft response completed, overview by AD/DD  | within 10 working days  |
| Case file audits  | HOS responsible for all audits expected from relevant service area  | By timescale – in QA Framework |
| Supervision file audits  | HOS responsible for audits of Team Manager supervision records from service area | Six monthly: May November  |
| Placement in year tracker meeting  | Via Access to Resources panel via relevant HoS | Weekly  |
| Budget meetings  | HOS to attend finance / budget meeting  | Monthly meeting |
| Cover Arrangements  | HOS responsible for ensuring adequate cover is in place to meet the needs of their service area  |
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| **All Staff**  |
| Annual leave (see HR Policy) | A/L to be agreed in advance of booking TM’s and ATM’s should not have A/L at the same timeA/L should be booked on **‘My View ‘** |
| Sickness absence (see HR Policy) (first day) | All staff to phone and speak to Line Manager on first day of sickness Staff must not leave a message with business support, another team member or Manager.  |
| Sickness absence (see HR Policy) (subsequent days)  | If self-certifying, individuals must call Line Mananger within 30 minutes of normal start time on the first day and after 3 continuous sick days if not returning on the 4th day of absence to update and advice including date of return.  |
| Flexi (see HR Policy) | Flexi will only be approved if it has been built up whilst in the office or with clients NOT working at home If a specific piece of work is required to be completed at home, the HOS must approve first. Flexi must be booked in advance and NOT on the day.A maximum of 18.5 hours may be accrued in credit and a maximum of 7.4 hours may be accrued in debit. Debit balances must be brought up to 0 hours ideally within the following fortnight and no longer than 4 weeks. |
| Working From Home  | WAH should be approved in advance for completion of a specific piece of work. Service delivery is a priority & WAH can be refused or rescinded (WAH policy)  |
| TM availability  | TM should be available to staff by telephone when in work but off site. Court attendance may require cover arrangements  |
| Meetings  | Team Meetings must be prioritised by all staffMeetings should be attended promptly, ready to begin at the time allotted. All members should be ‘present’, i.e. Not working on IPADs or Phones.  |
| Duty Rota’s:  | Important to ensure that duty is covered, any difficulties report to TM for immediate resolution  |
| Training / Development activities  | If committed, training must be attended unless the Team Manager advises that you return for a case related issue. If cancelling staff must inform line manager and Workforce Development immediately.  |
| Supervision  | Supervision is a joint responsibility. It must be prioritised and both partners must be prepared for the session. Where cancelled, rebooking must take place immediately  |
| Dress code  | Staff must dress professionally and appropriately for their role, and to afford respect to our clients.. Footwear should be safe and meet our insurance requirements e.g. no flip flops or loose sandals. 'Court’ expect staff to be dressed professionally to enable the worker to display gravitas and authority.  |
| Contact with Elected Members / MP’s  | This must be via a HOS. Any message left for a staff member or TM should be diverted without response.  |
| Press Office / Media Communication Team (see Corporate Policy) | Staff members should not talk directly to the press. All calls should be forwarded to the Media Comms team. Contact with the Media / Comms team will be done by AD or DCS unless delegated.  |

**Appendix 2: Head of Service, Service Manager and Team Manager Oversight of Key Decision Points**

**MASH /Single Assessment**

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| **Management Oversight** | **What needs to be done** | **Who by** | **Outcome** |
| Decision Making in MASH | MASH specific audit tool to be used.6 per TM every month6 to be moderated by HoS every month. | Team Managers,QA by Head of Service | Internal thresholds remain consistent, well understood/applied and therefore children safe at front door |
| Re-referrals decision making | MASH to be responsible for all re-referral decisions across service | MASH Managers | As above |
| Outcome of S47 investigations | Service Manager to have oversight of sample of cases on regular basis, to sign off and quality assure decision making.Including sample of those not reaching threshold | Service Manager | Safe and consistent application of ICPC thresholds in Single Assessment team.Knowledge and application of S47 process ensured. |
| S47 enquiries leading to second period of CP planning within 24 months of closure | Head of Service to have oversight and decision making for all cases | Head of Service | Ensure safe and consistent decision making within CP process. |
| Audit activity | 1 x monthly | Team ManagersAssistant TM’s | Regular case review and consistency of practice |
| QA of monthly audits | 4 x monthly | Head of Service | Audit compliance assured, consistency of audit quality assured and analysis of ongoing practice |
| Personal/professional supervisions for staff | 1 x monthly in SAT1 x monthly in MASH | Team ManagersAssistant TM’s | Ensure safe and reflective practice available to all staff |
| Initial visits to children to have management oversight | All initial visits in Single Assessment service to be authorised  | Team ManagersATM’S | Compliance with timeliness and quality of initial visits to children |
| Exemptions of initial visit within 1 day (CP) or 5 day (CIN) | SW to record case note 24 hour following successful visit within timescales or on 5th day if not occurred and notify TM and HoS. | TM to consider rationale.Head of Service to be made aware of and sign off all exemptions of 5 day visiting. | Compliance with practice standard, ensuring children seen in timely manner |
| Immediate allocation in SASF. Decision making re UBB where previous Legal Proceedings | Service Manager to be chair POEM on ALL such cases. | Head of Service | UBB managed well with good oversight of key decision making |
| Decision making re all cases where PLO being considered | Service Manager to chair all POEMs | Head of Service | All cases meeting legal threshold have timely and effective oversight |
| All NAI or injuries to non-ambulant babies referred to service | Head of Service to have management oversight of initial decision making  | Head of Service | All cases where serious and significant injuries identified have timely and effective oversight |
| Complex cases including FII, CSE with numerous children, complex child abuse investigation, allegations against a professional | Head of Service to ensure appropriate skilled and experienced social care manager/consultant social worker to chair strategy meeting | Team manager and/or Head of Service | All complex cases to have timely and effective management oversight |

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| **Management Oversight** | **What needs to be done** | **Who by** | **Outcome** |
| **IYSS**  |
| Risk of custody cases  | QA case file / sign off CP overlap / sign off  | Head of Service | Minimise use of custody |
| Southwark  | Sample audit SA  | Head of Service | Ensure quality of Single Assessments |
| ATR approval / post 18 cost  | Approval  | HOS IYSS | Ensure budget planning |
| Audit Activity in Care Leavers Service | 1x per month | Team Manager | Regular case review and consistency of practice |
| QA of Audits | 1x per month in Care Leavers3x per month in YOT | SMHead of Service | Audit compliance assured, consistency of audit quality assured and analysis of ongoing practice |
| Exemption of Care Leavers contact at every 2 months | Approval | HOS IYSS | Compliance with practice standard |
| Suspend Youth Justice National Standards | Approval | Team Managers | Compliance with practice standard, ensure risk is managed in the community |
| Pathway Plans | Approval | Team Managers | Ensure quality of work |
| Use of Bed and Breakfast accommodation | Approval | HOS IYSS | Minimise inappropriate accommodation use |
| Asset Plus Assessments and Plans | QA and Approval | Team Managers | Ensure quality of work |
| Panel reports | QA and Approval | Team Managers | Ensure quality plan |
| Court reports | QA and Approval | Team Managers | Ensure best outcomes |
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| **Safeguarding and Quality Assurance Service**  |
| **Management Oversight** | **What needs to be done** | **Who by** | **Outcome** |
| Ensure that improvement is embedding  | Introduce a data set of performance measures Develop a PARIS report that captures agreed data set and monitors compliance with practice standardsMonthly QPRM meeting | Head of ServicePARIS TeamHead of Service Head of Performance and head of Safeguarding and Quality Assurance | Cultivate data and information for a learning organisation approach across the team  |
| Audit Activity | Monthly dip sample/audit CP and CLA plansReview sections of children’s services audits which relate to the service  | Senior IROHead of safeguarding and Quality Assurance | Effective use of data and auditing to better inform practice  |
| Observation of Practice  | Annual observation of CP Conferences and CLA Reviews 360 feedback system to ensure that all areas of the multi-agency partnership are able to feedback on the quality of chairing including parents, carers and young people | Head of Service  | Chairing is robust, consistent and complies with practice standardsData analysis / serviceuser feedback is used to inform training, learning and serviceimprovement |
| Dispute Resolution Process  | Monthly dip sample/audit of DRPs | Senior IRO | Effective challenge by IRO’s  |
| CSE / Missing  | HOS Chairs TSCB MET Subgroup Develop a PARIS report that captures agreed data set and monitors compliance with practice standardsAnnual thematic audit to look at the quality and impact of return home interviews | Head of Service PARIS TeamHead of Service / CSE Manager/ Coordinator | Head of Service has strategic overview  |
| LADO Activity  | Bi-annual thematic audit of referrals and response  | Head of Service /LADO | Data analysis is used to inform training, learning and serviceImprovementLADO response is consistent and complies with practice standards  |

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| **Safeguarding and Supporting Families** |
| **Management oversight** | **What needs to be done** | **Who by** | **Outcome** |
| Embed improvement and compliance.  | Sign off CIN and CP statutory visits. | Team Manager. | Evidence of compliance and quality.Ensure management oversight/frequency of visits at the correct level ie Minimum of CIN - 4 weekly. CP minimum of 2 weekly.Ensure that risks are managed and at an appropriate level ie CIN/CP/Legal intervention. |
| Audit activity | 1 x monthly unless AD suspends activity | Team managers Assistant TM’s. | Regular case review and consistency of practice |
| Personal/professional supervisions for staff | 1 x monthly | Team managersAssistant TM’s. | Ensure safe and reflective practice available to all staff |
| Embed consistency and ensure the child’s plan is progressing. | Sign off Core Group minutes and CIN meeting minutes. | Team Manager. | Safe and consistent application of thresholds throughout the child’s journey. |
| Ensure that a clear rationale for decision making is recorded on the system.  | Record decision and action to be taken and sign/date stamp to endorse.  | Team Manager, Service Manager Head of Service. | Ensures oversight recorded. |
| Prior to the visit due date, sign off and notify Head of service that the statutory visit will be overdue. | Sign off exemptions for CP visits with action plan.Head of Service informed by Performance of all overdue CP/CIN | Service Manager. | Agree and have clear knowledge of children not visited when subject to CP planning and why.  |
| Receive all CP reviews when recommendation for CP planning is to cease.  | Sample analysis of these will be undertaken | Head of Service. | Provide consistent threshold. |
| QA of monthly audits | 4 x monthly | Head of Service. | Audit compliance assured, consistency of audit quality assured and analysis of ongoing practice |
| Outcome of S47 investigations. | Service Manager to have oversight of sample of cases on regular basis, to sign off and quality assure decision making. | Service Manager | Safe and consistent application of ICPC thresholds. Knowledge and application of S47 process ensured. |
| Complex cases including FII, CSE with numerous children, complex child abuse investigation, allegations against a professional | Head of Service to ensure appropriate skilled and experienced social care manager/consultant social worker to chair strategy meeting | Team ManagersService Manager | All complex cases to have timely and effective management oversight |
| Decision making re: PLO and issuing of proceedings. | Service Manager to chair all POEMS. | Service Manager. | All cases meeting legal threshold have timely and effective oversight |
| All NAI or injuries to non-ambulant babies referred to service | Head of Service to have management oversight of initial decision making | Head of Service. | All cases where serious and significant injuries identified have timely and effective oversight. |

**Specialist Services**

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| **Management Oversight** | **What needs to be done** | **Who by** | **Outcome** |
| ADM | Agency decision making functions for fostering and adoption | Head Of Service | Knowledge of service quality and management oversight |
| Outcome of S47 investigations | Head of Service to have oversight of sample of cases on regular basis. | Head of Service | Safe and consistent application of ICPC thresholds in Single Assessment team.Knowledge and application of S47 process ensured. |
| Complex cases | Key involvement in Complex Cases Panel (DCT)  | Head of Service  | Understanding of placement options for DCHealth partner financial contribution to complex placement cost |
| Complex cases including FII, CSE with numerous children, complex child abuse investigation, allegations against a professional | Service Manager to ensure appropriate skilled and experienced social care manager/consultant social worker to chair strategy meetingHead of Service to be informed  | Service ManagerTeam Managers  | All complex cases to have timely and effective management oversight |
| Decision making re: PLO and issuing of proceedings. | Chair Legal Gateway Panel on all cases  | Service Manager  | All cases meeting legal threshold have timely and effective oversight  |
| Audit activity | 1 monthly  | Team Managers / ATM /SM/HoS | Regular case review and consistency of practice / understanding ourselves and the quality of staff practice  |
| QA of monthly audits | 4 x monthly  | Service Manager | Audit compliance assured, consistency of quality assured along with analysis of practice. |
| Outcome of S47 investigations | Service Manager to have oversight of sample of cases on regular basis, to sign off and quality assure decision making.Including those not progressed | Service Manager  | Safe and consistent application of ICPC thresholds in DCT / LAC Knowledge assured.  |
| Exemptions of initial visit within 1 day (CP) or 5 day (CIN) | SW to record case note 24 hour following successful visit within timescales or on 5th day if not occurred and notify TM and SM | TM to consider rationale.Service Manager to be made aware of and sign off all exemptions of 5 day visiting. | Compliance with practice standard, ensuring children seen in timely manner |
| Exemptions | Sign off exemptions for CP visits | Service Manager | Agree and have clear knowledge of children not visited when subject to CP planning and why.  |
| CIN and CP casenotes | Sign off CIN (4 weeks) and CP statutory visits (10 days) | TM | Evidence: compliance and quality.Ensure management oversight/frequency of visits at the correct level ie Minimum of CIN - 4 weekly. CP minimum of 2 weekly.Ensure that risks are managed and at an appropriate level ie CIN/CP/Legal intervention. |
| Core Group Minutes | Sign off Core group minutes and CIN meeting minutes | TM | Provide overview of care plan progression, escalate issues as appropriate. |
| ICPC | Sign off decisions to go back to ICPC within 24 months of closure | HOS | Overview of high risk cases in the service |
| Professional and personal Supervision for all staff | 1 x monthly | TM/SM/HOS | Ensure safe and reflective practice available to all staff |

**Early Help and Targeted Services**

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| **Who** | **Action** | **Outcome** |  |
| **Management Oversight** | **What needs to be done** | **Who by** | **Outcome** |
| Decision making re EH/TH Assessments  | Screen each early help assessment within 24 hours of receiptDecision Recorded Authorised in MASH | TM & ATM | Evidence: safety, compliance and quality of assessments received. Thresholds remain consistent, well understood/applied for TAF workingEnsure managementOversight to ensure timely decisions. Ensure that risks are stepped up to MASH |
| Every child has an Assessment and plan  | Additional Information is gathered on child’s assessment where necessary to support case allocation to Lead Agency.  |  TM & ATM TH | Case outcomes are clearly recorded post panel decisions Assessments and plans are created for each EH case requiring TAF Intervention |
| Targeted Help Panel Decisions  | Cases meeting threshold for targeted intervention are presented at panel weekly. Multi-agency decision on Lead Agency to create TAF plan. Families and professionals clear about outcome of referral/assessment received. |  TM & ATM present to Panel.Panel decision re allocation | All cases requiring a TAF intervention are allocated to a Lead Agency via the EH Panel. Cases are allocated in a timely way to avoid drift and delay.  |
| TAF Reviewing  | Ensure that open early help cases are progressed by lead agency and reviewed regularly at between 6 and 12 weeks. | TM/ATM TH | Prompt / escalate issues as appropriate.TAF Reviews completed regularly to monitor progress of the family plan. |
| Audit activity | 1 x monthly | Team ManagersATM’s | Regular case review and consistency of practice |
| QA of monthly audits | 4 x monthly | Head of Service | Audit compliance assured, consistency of audit quality assured and analysis of ongoing practice |
| QA of direct practice  | Sign off Supervision Tracker for all case supervision with CCW’sPersonal supervision monthly | TM’s and ATM's Targeted ServicesTM’s and ATM's Targeted Services | Ensures compliance of processes and delivery model. Avoids drift and delay Ensures case progress or problem solving for stuck cases. |
| QA of IFSS direct practice  | Hold weekly case tracking meeting to ensure Manager’s oversight and effective planning of cases. | TM. ATM & Senior KW’s IFSS | Prevent drift and delayEnsure throughput of casesReduce barriers to effective outcomes Problem solve ‘stuck cases’ with clear actions  |
| Audit Activity  | Complete monthly case overview and record Manager’s oversight | Senior KW’s  | Ensure compliance with processes and procedures.Ensure quality of practiceReduce risk of case escalation Remove barriers to effective outcomes. |
| Decision making re Edge of Care  | Sign off decisions making on edge of care resource at ATR  | TM & HOS | Overview of high risk cases in the service Ensure cases meet criteria for service. |