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| **Child Protection** *Process of protecting individual children identified as having suffered, or at risk of, significant harm as a result of abuse or neglect.* | **Strategy Discussion and S.47 investigations** |
| * A Strategy discussion must be held where risk to a child or likelihood of serious significant harm has been identified. * The decision whether to initiate a Strategy Discussion will be made in the MASH * One outcome of a Strategy Discussion may be an enquiry under Section 47 of the Children Act 1989 and completed within 10 days. A Section 47 enquiry will decide whether and what type of action is required to safeguard and promote the welfare of a child who is suspected of, or likely to be, suffering significant harm.   If you are asked to attend a Strategy Discussion or contribute to a S.47 assessment you should prioritise this as it is likely the child has been deemed as at risk of serious harm |
| **Child Protection Plan** |
| A Child Protection Plan is one possible outcome from a S.47 enquiry. It is a detailed inter-agency plan setting out what must be done to protect a child from further harm and to support their health and development.A Child Protection Plan can only be written by a qualified social worker and they will be the Lead Professional while the Plan is in force. The Plan is shared with the parents of the child and they will be made aware of the concerns the Social Worker has for the child’s health and development or the risk factors they have identified that may place the child at harm.  Where possible or appropriate parents will also be supported to make the changes necessary to allow them to better meet their child’s needs and keep them safe from harm.   * If a child has a Child Protection Plan they will have an allocated Social Worker. * The Social Worker will bring together a ‘Team Around the Child’, (core group) once a child becomes subject to a Child Protection Plan and they will meet on a regular basis. The child may also be a member subject to age and level of understanding. * The Lead Professional will always undertake to see the child as necessary in order to see if they are well and that the Child Protection Plan is having an impact on both their safety and wellbeing. They will also directly ask the child’s views to ensure that they are represented in the Plan and at TAC meetings if the child is not present. * A Child Protection Plan should not last for a long time. If the Plan is not effective then the recommended actions will need to be changed through the statutory review process or if it is working well the Plan may be stepped down to a Child in Need Plan. * Anyone may be asked to attend a Child Protection meeting either regularly, or as a one off, if there are questions about your area of expertise that you can support with or share information about. * Statistically children on CP Plans are more likely to have SEN due to the potential for neglect or abuse. This could be due to a complex range of factors but is frequently related to a lack of protective factors in the family setting. The protective factors required by children include physiological, safety and a sense of belonging. If any of these are absent in the early developmental stages of life it may cause the child to develop insecure attachment or experience delayed development. * Some Child Protection Plans may include a reference to the child having to attend education. Attendance at an educational setting such as school or an early years setting can be a protective factor for children at risk. Not only is attendance at an educational setting an opportunity for children to be seen and heard by practitioners from outside the family on a daily basis but the development of the child both cognitively and socially can also be observed and assessed on a more frequent basis. |
| **Child in Need (CiN)**  ***A child in need (CiN) has*** *the universal needs of all children and more complex additional needs than those requiring an Early Help Assessment*  ***(Level 3 Continuum of Help and Suppor****t)* | * The majority of children’s needs should be met by universal services or Early Help but there will be some who, without additional specialist support or services, may not thrive and develop in line with expectations. * If they meet the threshold to be a CiN they will have a Single Assessment carried out by a qualified Social Worker. This assessment must be completed in 35 days. * Undertaking a Single Assessment under S.17 of the Children Act 1989 requires the consent of parents and additionally the young person where they are over 16 years of age and have capacity to give consent. Not only is consent a legal requirement but it increases the likelihood of parents actively participating and committing to making changes through accepting input, advice and support from appropriate specialist services. * All Single Assessments should consider educational or learning needs. There is a statutory duty on education professionals and Local Authority services to support the gathering of information for a Single Assessment * An outcome of the Single Assessment may be that a CiN Plan is issued but not every child that undergoes assessment will have a CiN Plan issued. * The initial CiN meeting to agree the need for a statutory plan land to set out the services or support that are required may be convened before the Single Assessment is completed should that be necessary. * A good CiN Plan is dynamic and supports the family to find long term sustainable solutions to the difficulties they face. While the child is the focus of the Plan it is important that parents or carers are an integral part of overcoming the barriers identified. It also draws on the strengths and protective factors identified in the Single Assessment. * One outcome of a CiN Plan may be that the child must access education and be supported to attend. There is a statutory duty on education professionals and Local authority services to support actions arising from a CiN Plan. * The Initial CiN Plan must be reviewed within 4 weeks of being issued after which they may be reviewed frequently but at a minimum every three months. ’ depending on whether the needs are long term but being met or the child needs a short period of intensive input from multiple agencies. * Ordinarily a CiN Plan should not exceed 6 months in duration but if it does the review meetings should be chaired by a Team Manager in order to establish what needs to be done to positively change the outcomes for the child. * A Child in Need may have profound, lifelong or complex disabilities and usually have an EHC Plan. These children are more likely to have a long term CiN Plan and may also access specialist services such as short breaks on a regular and planned basis. * Children in Need will not always have learning difficulties but may have needs such as homelessness, behaviour that challenges or physical difficulties which can hinder their access to education. * The needs and outcomes of a CiN Plan should be reflected in the Sections D and H1/H2 of an EHC Plan should the child have one. |
| **Early Help**  *Early Help refers to any support or plan put in place to support a child on Level 2 or 3 of the Continuum of Need. These children may have lower level or short term needs either in their own right or as part of the family unit which means they will benefit from a multi agency approach to support them.* | * Early help or the requirement for additional support is identified through a multi agency plan such as My Assessment or My Plan + * Regular meetings are held to try and support everyone involved to make positive changes through the Team Around the Child/ Family approach (TAC/TAF) * The implementation and review of these multi agency plans is undertaken by the Lead Professional, a key person who is responsible for holding the Team around the Child/ Family to account for their allocated action points and monitoring the progress towards agreed outcomes in the plan . They support and challenge the TAC/TAF to make changes that will support the child who is the subject of the plan. * They are rarely a Social Worker but usually hold a role whereby they have close professional links with the child or family |
| **Families First/ Families First +** |
| * Sometimes the child’s needs are more complex or require a more specialist level of expertise when Families First/ Families First + may become the Lead Professional or be an active participant in delivering services * The Families First Team Support the coordination and development of local partnerships and provide advice, guidance and support to practitioners working in the community with children and young people with additional needs. |
| **Children in Care (CiC)**  *Children are those that are given accommodation away from their families at the request of their parent and those in care as the result of a Care Order.* |
| * Children in Care are sometimes referred to as Looked After Children (LAC) both terms have the same meaning. In Gloucestershire the agreed identification is Children in Care * A Child in Care can be accommodated in two different statutory ways via either S.31 or S.20 of the Children Act 1989.   **Where a child is taken into care under S.31**   * The Local Authority has had to go to Court to ask for a Care Order to be granted. The child’s parents or family may not agree with the LA decision to take the child into care. This is also often very hard for the child who may have to move school and leave their family home with very little notice * A child in care accommodated under S.31 may still live with their parents while subject to assessment or being the subject of a care plan. Where this is the case the Social Worker must visit the child at least weekly. * The birth parents retain parental responsibility (PR) for their child although the PR is shared with the LA. * A Child in Care accommodated under S.31 must have a Care Plan which is subject to review every 6 months * When visiting their child the Social Worker must make adequate time to see the Child alone and ask for their views. The notes of the visit must be recorded on Liquid Logic and any concerns escalated in line with GSCB guidelines.   **Where a child is accommodated under S.20**   * The parents retain PR but the LA is providing some aspect of the care usually in the form of accommodation or short breaks. This is may also be very hard for the child who may have to move school and leave their family home with very little notice * Accommodation under S.20 should always be a mutually agreed arrangement between parents and the LA. * Under S.20 parents may request that their child is returned to their care at any time. If the LA believes the child will be in danger by being returned to parental care they will have to apply for a full care order. * In an EHC Plan is important to define whether a Child in Care is accommodated under S.31 or S.20 as this impacts on whether the LA has to share PR and may be liable for certain living costs * Does this also need further explanation about consent, contact, SMART care planning? |
| **Parental Responsibility (PR)** |
| * Parental Responsibility is defined in section 3(1) of the Children Act 1989, meaning ‘*all the rights, duties, powers and authority which by law a parent of a child has in relation to the child and his property.’* * It is always held by the mother and also by a father where the parents are married although an unmarried father also acquires parental responsibility if he becomes registered as the child’s father (for a child born after 01/12/03 ), or through a legal order. * PR is only removed from parents completely at the point if the child is adopted. * Birth parents retain PR even if they are not allowed contact with their child and are not allowed to know their current address * PR is acquired by the local authority if the court commits child to its care. |
| **Children who are cared for by persons other than their birth parents** |
| * **Where possible Social Care will try to place a child at risk of harm with a family member before considering foster care, residential care or adoption.** * **A Child Arrangement Order is made by the Family Court and is usually agreed when parents have separated and the primary residence of the child is being agreed. If one parent is named as the person with whom the child will live then it does not automatically follow that the other parent has no contact or the child may not live with them for part of the time. A Child Arrangement Order was previously known as a Residence Order and/or a Contact Order. Where the Child is not in Care or there has been no Social Care involvement the Child Arrangement Order is a matter of Civil Law but it can be useful in determining which parents address is the primary one.** * **A Child Arrangement Order may be obtained by a Grandparent or other close relative where a child is on the edge of care or their parents are no longer able to keep them safe and in this case the order may be sought or supported by Social Care. In both cases the Order gives the person shared PR with the birth parents but does not allow them to change the child’s surname.** * **Special Guardianship Orders were introduced in 2002 as a way of giving children who were looked after usually by relations some permanence without adoption. A Special Guardian has PR but the key difference is that although birth parents will still share PR that of the Special Guardian takes precedence over that of the birth parents. An SGO automatically ceases at the child’s 18th birthday.** * **Special Guardians can apply for a financial allowance from the Local Authority but they are not automatically paid a weekly allowance as foster carers are** * **Foster Carers can be either employed by the LA or by a private fostering agency. They are guaranteed a minimum weekly payment set by the government each year. Some foster carers have areas of specialism such as respite care or caring for young offenders. Foster carers do not have PR and all correspondence about the child in care should be directed through the named social worker unless otherwise specified.** |
| **Child in Care Plan and Review** |
| * **Every CiC will have a detailed Care Plan. Progress towards the outcomes on this Plan are reviewed twice yearly by the Independent Reviewing Officer in consultation with the child, family carers and associate professionals** * **The child’s allocated and named Social Worker should be in contact or meet with thechild at agreed intervals** * The child is entitled to ask their Social Worker to visit them or contact them at any time regardless of the frequency of planned visits and the Social Worker must comply * If the Child in Care is in a long term foster placement the frequency of visits may be reduced to once every 6 months but only with the express agreement of the child and after a stable placement duration of a year. .   **The Care Plan should always include the details with regards to**   * The placement where the child will be resident including the reasons why it has been chosen and how that placemnt will meet the child’s needs * The long term expectations e.g. permanence, adoption or a short term intervention * If the child is 16 years old or above a Pathway Plan detailing the steps taken to prepare them for leaving care * The health plan **Every child will have a nurse led, 6 monthly health check (this can be used with agreement as the medical evidence for an EHC Needs assessment)** * Personal Education Plan (overseen by the Virtual School) * A contingency plan in case of placement breakdown or unforeseen circumstances * the date of the first Child in Care review * the name of the allocated Independent Reviewing Officer (IRO)   **Contact arrangements**   * The Care Plan will also set out details of contact arrangements between the Child in Care, their birth parents, siblings and any other relative or friend who has a connection. Contact arrangements will be set out in the placement section of the care plan and should detail the location, frequency and duration of contact visits. * Contact may be face to face or via telephone call or email. The agreed form of contact should be one which is accessible to the child themselves and does not rely on adult intervention, unless appropriate due to age or lack of capacity. * The welfare of a Child in Care is of paramount importance therefore it may be necessary for contact to be supervised. This may be minimal, for example the contact takes place in the carers residence so a suitable adult is present or may be more vigilantfor example contact takes place in a neutral setting with the social worker present throughout. * The type of contact arrangements may change for different people but will always be determined by the risk to the welfare of the child. * Where possible and safe the child’s wishes with regards to contact should also be taken into account. * **A Care Plan and any subsequent amendments must always be signed by a Team Manager** |
| **Independent Reviewing Officer (IRO)** |
| * **Every CiC must have an allocated Independent Reviewing Officer (IRO). The IRO will** scrutinise the LA’s care plan for the child and listen carefully to the views of the child and others about the plan. They will challenge the LA if they believe the plan is not in the best interests of the child. Social Workers cannot change a Care Plan without the agreement of an IRO. * The IRO cannot order changes to an EHC Plan but they can express their views to the Social Worker who can then respond through the consultation process either at the issuing of an EHC Plan or the issuing of an Amendment Notice. * The IRO will make sure that the LA is a good “corporate parent” to children in care, this means children in care get the same services as other children would and that their “corporate parent” does everything as well for them as a good parent would do for their own child at home. * As a LA representative the EHC Service team members are also ‘corporate parents’ |
| **Care Leavers and Leaving care** |
| * Eligible care leavers are entitled to leaving care support until at least 21years old * Planning for leaving care starts from the age of 16 in general and will be written into a Pathway Plan. * The Preparing for Adulthood outcomes in an EHC Plan should reflect the Pathway Plan particularly in relation to financial independence, employment or training and housing. * Every CiC ‘leaves care’ on their 18th birthday. Adult Social care cannot legally deliver any service to a Child in Care before their 18th birthday * Young people who wish to pursue education and training have the right to return and request assistance from their Local Authority until age 25 * Since 2014 young people have had the potential to ‘stay put’ with their foster carers but they will still be a care leaver |

**If you have any question about a child who is known to Social Care or you want to know if they are open to services ring the Social Care Team for your Locality and ask to speak to the Duty Social Worker**