[](https://www.nctrust.co.uk/Pages/home.aspx)

Partnership Support Service

Children, Families Support Service

OPERATING MODEL

October 2017

|  |  |  |
| --- | --- | --- |
| Version No | Version Date | Version Owner |
| 1 | 5 November 2015 | BW |
| 2 | 20 January 2016 | BW |
| 3 | 3 February 2016 | BW |
| 4 | 8 June 2016 | BW |
| 5 | October 2017 | PS |
| 6 | February 2018 | PS |
| 7 | February 2022 | MR |

Contents

1. Introduction
2. Service Purpose
   1. *Code of Conduct*
   2. *Context in which the Service Operates*
   3. *What the Service does not do*
3. Process and Practice Standards (Responsive work)

* Information advice and guidance
* Responsive process duty
* Early Help Assessment review
* Locality Follow ups

1. Process and Practice Standards (Proactive work)

* Process and practise standards, gateway to services

1. Recording - Capita
2. Contact with Parents Policy
3. Escalation Policy
4. Related Documents (saved on Sharepoint)

TF Outcomes Plan

TF Dataset provided by BIPM

Users Manual for Capita One

1. Introduction

NCT’s Partnership Support Service provides information, advice and guidance to professionals working with families who may need early help. The service is also the ‘gateway’ into key worker led services and interventions.

This mandatory operating model has been introduced to ensure practice delivered by the Partnership Support Service is consistent across its workers and teams, and is effective and high in quality.

The operating model is designed to establish practice standards for timescales and activities but is still flexible enough to be responsive to the needs of customers. All enquiries about the operating model should be directed to:

Maxine Reilly, Team Manager, Partnership Support Service [Maxine.Reilly@nctrust.co.uk](mailto:Maxine.Reilly@nctrust.co.uk)

Paula Smith, Service Manager, Children Family Support Service [paula.smith@nctrust.co.uk](mailto:paula.smith@nctrust.co.uk)

1. Service Purpose

The purpose of the Partnership Support Service is to provide information, advice and guidance (IAG) to professionals working with families who may need early help. Telephone IAG is also provided to parents as required through our support to MASH front door where referrals do not meet the threshold for social care assessment.

The service does not work directly with families; it does not case manage or key work. However, the service can demonstrate how it contributes to better lives for children and families.

**The Line from the Partnership Support Service to Better Lives for Children**

Children are safe

Children are healthy and have improved life chances

Children achieve their best in education, are ready for work and have skills for life

All vulnerable children achieve the best possible outcomes

Families function well

So that....

Families can start their journey to feeling stronger and more resilient

So that....

Professionals can get the right early help to families quickly

So that....

The Parnership Support Service provides high quality information, advice and guidance about early help to professionals working with families who need early help

So that....

2a Service Code of Conduct

To deliver its service to the highest possible standard, the Partnership Support Service (PSS) has adopted the national best practice code of conduct for Information, Advice and Guidance (IAG) provision. The service will aim at all times to be:

**Accessible and Visible**The PSS will be recognised and trusted by customers. It will have convenient entry points from which customers may be signposted and referred to the services they need, and be open at times and in places that suit customers needs. Professionals in need of early help IAG will be aware of the PSS and have well informed expectations of the service.

**Professional, Knowledgeable and   
High Quality**PSS staff will have the skills and knowledge to identify customers needs quickly and effectively. They will have the skills and knowledge either to address the customers needs or to refer them to suitable alternative IAG services or provision. Their quality standards will be clear, transparent and regularly evaluated.

**Clear on Their Role and Responsibilities**

The PSS will be clear on what their role is and what they can and cannot do. Links between IAG services will be clear from the customers perspective. Where necessary customers will be supported in their transitions between services

**Available and In Line with   
Customer Needs**

The PSS will be targeted at and tailored to the needs of customers. They will be informed by priorities at local, regional and national level. Delivery will be in a range of formats and settings at different times and locations tailored to meet the needs of customers.

**Diverse**

The PSS will reflect and respond to the diversity of its customers.

**Friendly and Welcoming**

The PSS will encourage customers to engage successfully with the service. It will be professional, tenacious and will act on the facts.

**Impartial**

The PSS will support customers to make informed decisions about early help based on the customers needs and circumstances

**A Balance of Responsive and Proactive**

The PSS will reflect customers present and future needs. It will respond in a timely manner to requests for their service. It will take assertive steps to reach customers and anticipate their needs.

**Enabling**

The PSS will encourage and support customers to become active participants in early help by enabling them to access and use early help information. The service will champion high aspirations for children and families

**Motivated at all times by a   
Commitment to Better Lives for Children and Families in Northamptonshire**

The PSS will strive to hear and respond to the voice of the child at all times

The EHSS uses its audit and supervision process to check these standards are being met.

2b Context in which the Service Operates

The Partnership Support Service operates as a partner and provider in the early help system. It is guided by the following:

* Early Help Strategy 2015-2020
* Early Help Pathway and Practice Manual
* Early Help Assessment
* Northamptonshire Thresholds and Pathways for Children and Families
* Working together to Safeguard Children 2018
* Keeping Children Safe in Education 2021

2c What the Service Does NOT Do

The Partnership Support Service does not and cannot:

* + - Case manage families
    - Act as a key worker for a family
    - Provide an alternative to a robust assessment for children or families
    - Replace or supplement the role of the lead professional
    - Supervise lead professionals, therefore will not support practitioners in their practice decisions which remains the responsibility of the lead professional’s employing organisation
    - Be relied upon for safeguarding or threshold decisions which remain the responsibility of the lead professional and their employing organisation.

Following a review of the information provided, PSS decide on the appropriate Early Help Pathways and provide information advice and guidance to partners to support their direct work with families.

1. Process and Practice Standards (Responsive work)

The work of the Partnership Support Service is split into two strands – responsive work and outreach work.

What does responsive work mean?

Responsive work is providing information, advice and guidance to professionals when they request it. This includes:

* Responding to requests for advice and guidance received via telephone, email, request for advice online form or face to face
* Offering a duty system to reduce delay in responding to requests
* Responding to children and family support service recommendations made by the MASH for families referred to the MASH who do not meet tier 4 social care thresholds

Who is the customer for responsive work?

Many different groups of professionals may seek information, advice and guidance from the Service. These include, but is not limited to:

* School staff
* Police officers
* Youth workers
* Social workers
* GPs, health visitors, midwives, school nurses
* Childrens centre staff
* Housing and tenancy support officers
* Community safety and community development workers
* DWP and Job Centre Plus

3a. Responsive Process – Information, Advice and Guidance (IAG)

All Partnership Coordinators must follow this process when responding to requests for advice and guidance received via telephone, email, Capita allocation, Request for Advice online form or face to face. Partnership Coordinators must refer to Thresholds and Pathways to ensure Safeguarding is considered throughout the process. If level 4 threshold is identified, it should be referred into MASH by the referrer or the Partnership Coordinator (discuss your concerns with your team manager first).

Partnership Coordinators must also ensure the Voice of the Child is present in discussion with the Professional and in any assessment provided. Consent of the child should also be considered where appropriate.

A&G request comes direct to Early Help

IAG request received by Partnership Coordinator (PCo) – by phone/email/Capita allocation/MASH Locality Follow ups/Request for advice online form

- Involvement to be built on Capita

Contact referrer/person wanting advice and discuss current concern/issue in line with information sharing protocols

PCo dealing with query add their name as Caseworker and record in Capita Involvement Com Log: record to include source and summary of concerns, history of family on Carefirst/Capita, risks to child and actions required. Record outcome of discussions on Communication log, and who will take required actions.

**PRACTICE STANDARD –**

**Capita Communication Log: source and summary of concerns, history of family and risks to child to be completed within 5 working days of allocation**

**Capita Communication Log: Contact with referrer, Outcome of discussions and required actions to be completed within 10 working days of allocation.**

**All First Contacts to be completed within 15 working days of allocation.**

3c Responsive Process – Duty

Partnership Coordinators are on ‘duty’ on a rota basis. The purpose of duty is to provide timely information, advice and guidance to partners, parents and/or carers who have contacted MASH with concerns that do not meet threshold for social care assessment, but support is needed to avoid escalation of concerns.

Contacts are dealt with on the **same day or next day** by the Partnership Coordinator on duty – the contacts should not be transferred out to the locality PC Coordinator unless a ongoing piece of work is needed with that partner.

* Email from member of public – telephone contact to be made to parent/carer to discuss concerns and gain consent to share concerns with partner who can provide support. Where messages are left, the caller needs to be asked to speak to the Partnership Coordinator on duty, to maintain audit trail. With consent contact to be made with partner to share concern and request support to be offered to children and family.

The TS Targeted Support Involvement should be created on Capita, and all recording made in Com Log. If contact is made with the family and contact is needed with partners outside of duty, the Involvement should be allocated to the Locality PCo to follow up. The Duty PCo should email Locality PCo to advise of allocation.

* Email from partner – telephone contact to be made to partner to provide information, advice and guidance about providing early help support to children and family. Where messages are left, the caller needs to be asked to speak to the Partnership Coordinator on duty, to maintain audit trail. The Capita Involvement should be created on Capita, and all recording made in Com Log.

**Early Help Assessment Reviews:**

Early Help Assessment are allocated to the Locality Partnership Coordinator based on lead professional base with status EHA Open. EHA’s are to be reviewed by the PC within 15 working days of allocation.

Partnership Coordinators to review the EHA for the following:

* Identify Supporting Families markers for attachment
* Voice of the child has been captured and recorded on the assessment
* Signposting to appropriate services and strengthen the Team Around the Family

Once reviewed, email to be sent to Lead Professional with identified Supporting Families markers so these can be included in action plan and also any advice and guidance.

If Supporting Families markers have been identified, Capita status to be changed to EHF: Identified, saved and then return status to EHA Open.

**Locality Follow Ups:**

Links with MASH Partnership Coordinators Operating Model Page 3&4

MASH Partnership Coordinators will work on early help recommendations following a MASH referral. Should ongoing support be required the case will then be allocated to a Locality Partnership Coordinator to contact the Lead Professional to ensure support is in place and offer advice and guidance on next steps.

The process for allocation to Locality is as follows:

We review the case in MASH and make all the calls needed, we will even check consent again (even if MASH say they gained consent). We allocate for follow up in the community when we: Have not had confirmation of EHA/ support or that we are not confident of a follow up by a professional/ school, we also will allocate out when school are asking for locality support, for example, if the EHA is active and locality knowledge or attendance/ guidance may be needed at the next TAF.

Cases that have been screened by a social worker in MASH with an outcome of Early Help will continue to be sent as a message to the Early Help and Prevention desktop on care first.

Partnership MASH will continue to action cases on the desktop within 3 working days

1. Process and Practice Standards

a. Proactive work

What does Proactive work mean?

Proactive work is making proactive, assertive contact with professionals working with families to support them to work with whole families to identify needs and provide support at the earliest opportunity.

This supports the Partnership Support Service delivery of the Supporting Families approach.

Supporting Families are identified via a series of data sources and risk factors, alongside partners identifying families needing early help support. Used in conjunction with ‘Thresholds and Pathways’ the Supporting Families Outcomes Plan (Appendix 1) helps to determine a family’s level of need and what support may be needed to progress towards positive outcomes. This approach is adopted to promote earlier help and access to additional support so the concerns do not escalate or result in statutory intervention such as social care or Youth Offending Service involvement.

**Practitioner identification of ‘Supporting Families**:

1. Identify family meets at least 2 markers when you are completing referral to Children Families Support service interventions, reviewing an EHA’s with clear interventions
2. On Capita change status to EHF Identified
3. Add Reason to EH Family Identification
4. Tick boxes of presenting issues
5. SAVE
6. Return Status to previous status
7. Add Com Log to record that the family have been identified and which markers appear to be met.
8. SAVE

This Proactive work also includes working with partners to promote early help support to families, improve awareness of Thresholds and reduce inappropriate referrals to MASH.

This can include, but is not limited to:

Team meetings – internal teams and partners

Thresholds and Pathways training

Partner/Setting awareness raising regarding early help pathways

Case discussions with partners to promote early help pathways

Team Around the Family meetings

Network Meetings

Early Help Refresher Training

1. Process and Practice Standards Gateway to Services

Partnership Coordinators are the ‘gatekeeper’ to referring to targeted intervention.

Should a family require support from a targeted service within CFSS, the following steps need to be taken:

* SofS and rational to be added to coms log
* Actions to be clearly identified on the coms log.
* Status to be changed to appropriate status and allocated to the correct team following guidance on ‘Step up Process’

Family Support Inbox:

* Requests for support from Social Worker will be sent to this inbox
* Requests to be reviewed by Duty Partnership Coordinator
* If request is for CFSS support Duty PC to add coloured category so Business Support can allocate appropriately
* Group work requests to be forwarded to TS Group Work to be actioned.

1. Recording

What is Capita One?

Capita One is the recording and case management system used by non-social care teams working with children and families. The Partnership Support Service uses Capita One to record all communications and contacts made regarding individual families, and to record tracking of families engaged with Supporting Families Programme. The TS Target Support Involvement is used to record allocations to Partnership Coordinators, who then record all communication and activities in relation to early help Information, Advice and Guidance and Supporting Families Program tracking relating to all family members within the involvement.

Partnership Coordinators are expected to follow safe recording and information practices in all records on Capita, and are expected to follow all guidance relating to Capita recording of TS Targeted Support involvements.

As Capita One is an NCT-wide recording system, Partnership Coordinators are expected to engage with and adopt any recording practices required as users of Capita One.

1. Contact with Parents Policy

The Partnership Support Service is predominantly an information, advice and guidance for professionals. However Partnership Coordinators are expected to respond to all early help enquiries, which may include parents who are self-referring to MASH for help and support. Partnership Coordinators in the community are not expected to have regular or daily contact with parents but should be prepared to give face-to-face advice to parents if they are in a setting open to the public.

Requests for support from parents/careers [Partnershipadvice@nctrust.co.uk](mailto:Partnershipadvice@nctrust.co.uk) will be triaged using the same processes as requests from professionals. Where possible, consent should be gained during first contact to share information with appropriate services to enable early help support to be provided.

1. Escalation Policy

Safeguarding

Partnership Coordinators will escalate to MASH any concern that a child is suffering, or is at risk of suffering, immediate significant harm. Partnership Coordinators will at all times advise partners to follow NCT procedures for reporting and recording safeguarding concerns

[Report a concern - Help and protection for children (nctrust.co.uk)](https://www.nctrust.co.uk/help-and-protection-for-children/Pages/report-a-concern.aspx)

Early Help Practice

Partnership Coordinators will escalate to their Team Manager any concern that:

* An agency or organisation appears to be delivering ‘poor’ or ‘ineffective’ early help
* An agency or organisation appears to be deliberately disengaging with or avoiding early help
* An agency or organisation appears to be demonstrating ‘disguised compliance’ with early help
* An agency or organisation has repeatedly not delivered early help assessments
* Partnership Coordinators will be expected to provide at least 3 examples that demonstrate their concern which led to the escalation that demonstrate a sustained or escalating problem.

Team managers will attempt resolution with the early help lead within that agency or organisation. Team managers will work alongside other colleagues (for example school effectiveness, police crime commissioner’s office, NCT commissioners) to seek resolution with the agency or organisation.

If unsuccessful, team managers will escalate to the Strategic Lead for Children Families Support Service .