

Local authority social work evidence template (SWET)

In the family court sitting at
In the matter of the Children Act 1989

This document is intended to summarise **not** duplicate other documentation contained within the court bundle and should be succinct, approx. 20 pages in length (excluding appendices), with clear links or references to other sources of more detailed information e.g. an expert report or parenting assessment.

Local Authority and Social Worker details	
Court case number	
Filed by [local authority]	
Social work statement number in the proceedings, e.g. 1 st , 2 nd (N.B. A final statement should be completed on the Final Statement Template)	
Social work statement number of this witness e.g. 1st, 2nd, 3rd and date of statement	
This author/witness's name, qualifications and office address	
This author/witness's Social Work England registration number	
I have been the allocated social worker for [insert name(s)] since [date(s)]	

The facts in this application are true to the best of my knowledge and belief and the opinions set out are my own.

Signed:

Date of completion or most recent update:

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The guidance in these sections has been put together to make it easier for social workers completing the SWETs and achieve some consistency across the teams and the three localities. This should be read in conjunction with the formal ADCS guidance which can be found by clicking the link below:

<https://adcs.org.uk/care/article/SWET>

1. Overview of which court order or order/s are being sought

This is an overview, an opportunity to summarise the salient points of the child and family's circumstances in a few paragraphs, ideally less than one page.

There has been a tendency for some social workers to want to start by telling the story here and what we sometimes see at the outset is a full narrative which provides the whole background to the case. It then becomes a chronology in free flowing, story form, which isn't needed and can make things very repetitive. At the other end of the spectrum, we have statements where workers will only put a line or 2 in here, with just a short sentence along the lines of 'The LA is seeking an interim care order for Billy'. There needs to be the right balance.

The purpose of this section is to give a brief overview as to what order the LA is seeking, what the rationale is for this (what benefit it will bring and how it will keep the child safe) and why are we seeking it now (what are the concerns that have led to us needing to go into court and why can't we continue to manage risk in the community).

Following the headings below will make sure that this remains short and focused

Which Order is being sought and why is this necessary now?

When setting out the order being requested you need to be clear as to how this will ensure protection to the child that could not be secured within pre-proceedings or in any other way, ie why this and why now. If you are recommending that a child is removed from their parents' care, explain what imminent risk they need to be protected from and why the risk cannot be managed through the proceedings as is. It is helpful to set out briefly where the child is currently, who they are living with and, if not with parents, what the precipitating factor was that led to them being there. You need to provide a brief overview of work completed prior to making the application, and the framework around the safety plan e.g. PLO, a Child Protection Plan, section 20.

If there is more than one child, and they have different care arrangements or you are looking at different orders / plans then set out the order being requested and the arrangement for each child in a separate paragraph so it is very clear who is where and what the family set up is.

What are the nature of multi - agency concerns in relation to the parent(s)?

Here, you just need to give a short flavour of how long standing the concerns are and what they are in relation to, without providing a chronology and getting into a full narrative.

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2. Family network composition

2.2 Child/ren's family network

*This section should include family members and any other people the child/ren have significant relationships with, such as close family friends. Who is important to them? Please specify the individual's relationship in respect of each child subject to the application. Please set out these individual's full names, their dates of birth, their nationality, ethnicity and their current addresses unless this needs to be kept confidential for safety reasons. In such situations, send this information directly to the court as well as Cafcass, **do not** record it here.*

When this is printed out on Liquid Logic you are able to export to Word and then it will be filed to court as a word document. Once this is done any addresses that have been pulled through on LL can be removed.

Name	Relationship	Parental Responsibility	DOB	Nationality	Ethnicity	Address (where safe to disclose)

2.3 Has anyone listed, above, been identified as an alternative carer(s) for the child/ren?

Alongside the name, it is helpful to include a brief note about how and when they were identified e.g. put forward by a parent, via a family group conference (or similar), or identified by the social worker. Detail any potential alternative carers who have been ruled out in section 5.

3. Child impact analysis (complete for each individual child)

3.1 Description of the child's day to day experiences during the period under consideration

In a nutshell, here is where you think about what life has been like for the child, what it's like for them now and why a court order is now being sought.

This needs to be an analysis of how the issues in the case have impacted on the child. Sometimes what we see here is simply another narrative, it provides a story of what has happened during our involvement in terms of actions taken and things that have happened, in a linear timeline, but it doesn't really drill down into being fully focused on the child and consider what the demonstrated impact on the child is.

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This is about the child's own story and their actual lived experience. As an example, if they are a newborn baby and they haven't even left the hospital and there is a plan for them to go into foster care, then you can provide a short narrative to explain what harm they could have experienced in utero, what experience they have had in the hospital and how the plan for foster care will keep them safe from the concerns about their parents' lifestyle and behaviours. Or, if they were living with their parents, for example if the parents have used drugs or there has been domestic abuse and the child has lived in that home, it's about looking at things through the child's eyes and thinking about what they have experienced, what do we know / what evidence do we have of how this has affected them.

If the child has been moved into an alternative care arrangement prior to us going into court it's also about reflecting on this change and the positive impact this has hopefully then had.

Don't forget that it is also important to include positive aspects of the parents' care and relationships with parents/siblings, as well as the concerns relating to the application.

3.2 The child's needs. An analysis of the harm they face. Risk and protective factors

This is a change from our old SWET, it seems to be an amalgamation of what was 4.1 and 3.2, one of which asked about the child's needs (including consideration of the welfare checklist) and one which asked about SW analysis of the harm the child has suffered and/or any risk of harm the child continues to face, including the analysis of the event/s that led to the application. This is now all incorporated into one section.

From what we get passed to read, workers seem to have really different ideas about what to include – we see a variety of different ways SWs complete this section, and the quality can be really variable. We see some really excellent content, but also some examples where things need strengthening. Because it talks about harm and it mentions touching on events leading to the application, we often see this section again completed as a narrative based story, which looks very similar to the chronology and sets out, in a similar timeline, the events of the case from start to finish. This can be where things then start to get repetitive if you are not careful. The court has to consider the question of why here and why now, so the events leading to the decision to issue are important, but there needs to be accompanying assessment of the issues.

Often, when we get too much narrative we see the section lack depth and analysis, and it doesn't always successfully drill down into the issues in the case, how the children have been harmed, and what risk of harm the children continue to face. Another thing we see is cutting and pasting from other documents, so as well as the story telling we see sections cut from conference reports or other documents where there's lists of concerns, lists of positives or strengths, alongside the complicating factors, but without any actual deep digging into those and the impact and evidence around threshold. We also see some really good reports where people have used headings or separate paragraphs to break down the issues of concern, provide a real understanding of each and which equates to harm and which is a complicating factor. For example, a short discussion around domestic abuse, thinking about the first worst and last, the frequency and severity, the impact on

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the child, the insight the parent has into the issue, and the support offered to try and reduce the risks.

From a legal point of view the solicitors use your SWET as a basis to write the threshold document, and this is your main written piece of evidence to prove threshold of harm, so this is the key section in the report to do so. You need to consider the issues of actual harm caused, potential harm if nothing happens and things remain the same and of course, impact.

Consider in this section whether you are saying that the child has suffered significant harm, is likely to suffer significant harm or both. If you are saying that the child has suffered significant harm you must provide clear, concrete examples of the type of harm which you are saying has been caused. You need to ask yourself 'What is the impact on the child?'

If you are seeking interim removal of the child you will need to be clear about the harm that you believe will occur before the final hearing is able to take place, should the child remain with their parents/carers.

You also need to remember that this information should be balanced, and protective factors should be identified here too. Don't forget to distinguish between strengths and what is actual safety.

The evidence used here can be primary – the direct experience of the social worker – or secondary – the social worker's evaluation of evidence from assessments or the views of other people who know the child/ren or who have assessed their needs

Consider the welfare checklist here but avoid repetition (you don't need to specifically reference each of the welfare checklist questions. Some headings within the checklist are fully covered in other parts of the SWET anyway, eg this section explicitly covers harm, the wishes and feelings section is the next one, parenting capacity is contained in section 4, there are a couple of new sub-sections in section 6 related to the child's uniqueness and identity, as well as their education and wellbeing, and the powers of the court is considered in the balance sheet when you cover the various options available to the court).

3.3 The child/ren's wishes and feelings and how these have been identified (please include the child/ren's own statement, where age appropriate)

This needs to be meaningful and set out and summarise any direct work that has been completed, and the outcome of this, such as words and pictures or the Three Houses.

You need to consider who the child enjoys spending time with, plus their view of the care plan and their understanding of proceedings (where applicable).

Remember, using children's own words can be very powerful.

Individual children need individual paragraphs.

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3.4 The child/ren’s participation in the court case.

Children should be as fully involved in proceedings as their needs dictate. Set out the appropriate level of involvement for each child in line with their best interests, with clear reasoning.

If it is an older child you need to consider whether they might need their own advocate.

Remember, children can write their own letters to the judge, and arrangements can be made for them to visit the court and to meet with the judge on their own.

4. Analysis of the evidence of parenting capability

4.1 Summary of work previously undertaken with child/ren and the family that has led to these proceedings e.g. pre-proceedings or convening a family group conference (or similar).

Date	Organisation	Description of assessment/intervention	Outcome and effectiveness
	This is pretty straightforward, include all formal assessments and interventions already completed.		

Mother

We often see lots of inconsistent and different ways social workers complete this section. Sometimes, social workers have already completed a separate assessment, but they still cut and paste everything from the parenting assessment into here, with the headings that are generally used under Parenting Capacity such as Basic Care, Ensuring Safety etc. This isn’t needed. Other times, this will even look like an attempt to write up a full parenting assessment but within the court document.

There should be limited scenarios. We are either:

- Frontloading all our evidence and filing a separate assessment,
- Have completed a pre-birth assessment and plan to do a post birth assessment in proceedings;
- Have completed limited assessment work, have no written assessment as yet, and a trigger incident has brought it before the court so we need to complete further work.

If this is a planned application and all the assessments have been completed through the PLO process and we are ruling out the parent(s) then this needs highlighting and you need to state that an assessment has been completed, with some summary information such as how long it took, who and what it involved, what issues it has looked at, and what the finding of that assessment was, then refer to the standalone parenting assessment

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itself. There might also have been other work completed, such as a cognitive assessment or PAMS done; if so that needs to be discussed and referred to as well. If we go in and we haven't yet completed our assessment and plan to do further assessment work through the court process then you need to highlight what assessment work has been completed, how effective this has been and what intervention there is still to do.

The formal ADCS guidance states that :

“For the child’s mother, father and anyone else with parental responsibility, please consider:

- Some analysis of the capabilities of each parent to meet the child/ren’s needs, include any gap and think about why is an order being sought now?, and also if and how this gap can be bridged in the child/ren’s timescale.
- The analysis should address the fundamental question: ‘Can this person provide this child/ren with a good enough standard of care for the rest of their childhood?’
- Include details of support or interventions (either past or present) from any professional agency involved with individual members of the family or the family as a whole, as applicable, detailing learning, changes, progress and the gaps that remain.
- If a parenting assessment is required, is in progress or has been completed, please include this information here.
- Please also use this space to record details of attempts to seek out absent parents.

The ADCS guidance doesn’t distinguish from an initial statement and a final statement. There needs to be some discussion regarding what the issues are (as per guidance notes above) but this is not a lengthy, 25 paragraph narrative and needs to be as succinct as possible, no more than approx. a page or 2 for each parent. Remember, you do not need to go into background history and upbringing and into storytelling mode.

Father

As above

Other members of the household and/or person(s) with parental responsibility

As above

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5. Analysis of the evidence of wider family and friends' capability as alternative carers for the child/ren

The ADCS guidance states that:

“Demonstrate what is known about the capabilities of wider family members and/or friends to meet child/ren’s needs as alternative carers, including an analysis of skills or resource gaps and if/how they can be bridged in the child/ren’s timescale. Key considerations for a viability assessment:

- Unsuitable family network members should be excluded via a comprehensive filtering process.
- In considering the viability of someone to become a child/ren’s permanent carer, three additional tests should be met in line with the current Regulations that apply to proposed placements. They are:
 - a) That the carer understands in broad terms the needs of the child/ren
 - b) That they understand the level and type of care the child/ren will need throughout their childhood because of their earlier experiences
 - c) That the carer has expressed an authentic willingness to be part of the team around the child/ren until matters are fully resolved.
- With reference to (a), it would be helpful to share an overview of what information has been shared with potential carer(s) to enable their understanding of the issues.
- The genogram and ecomap (as appropriate) in Section 12 below should be comprehensive and inclusive, clearly identifying relatives who are already protective contacts for the child/ren.
- It may also be helpful to reference the status or outcome of viability assessments – if they have not yet started, include details of when such assessments will happen or note whether they are currently in progress.”

The guidance notes above are pretty detailed and self explanatory. If our connected carer’s team has completed an assessment, whether an ICCA or a full assessment of any kind at this stage, then this will be filed separately so, as per the guidance in the previous section, you only need to summarise the outcome of any formal assessment completed.

Each person discussed needs a separate heading.

6. The proposed S31A interim care plan – the ‘realistic options’ analysis

6.1 Options considered for the placement. Please have regard to the following: Realistic options

1. *To be defined as realistic, the proposed placement must be assessed as sufficiently resilient and sustainable to justify the label of ‘permanent’. Evidence of a robust filtering process is required to ensure each option assessed as realistic meets that standard.*
2. *In care proceedings, no arbitrary limit can be placed on the number of realistic options available for the child/ren, but one option must always be preferred. A clear reason (or reasons) must always be given for this preferred status in the body of this document.*

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3. *Preferred status means that on the assessments and evidence available, the preferred placement should offer the child/ren the prospect of recovering from any trauma they have experienced: personal growth and development within a family where they are guaranteed unconditional love; strong educational prospects; good health outcomes; and – as far as can be predicted – one or more positive lifelong attachment/s which promote their unique identity.*
4. *Determining the rank order between realistic options is a matter of professional judgement about the relative importance to the child/ren of various attributes of the carers and/or the relationship between the carers and the child, or the carers, child and birth parent/s. Ideally, placements should be listed in order of preference / strength.*

We have had lots of discussions about what should go in here. In the previous SWETS the realistic and discounted options tables were set out in a more complicated fashion. This section seems to have been amended to make it less so and is set out more in line with how it is in the children's guardians' reports.

However, the court needs to be absolutely assured that the social worker has thought carefully through each option, discounted those that are not safe or realistic and reached the best conclusion. When listing the options it is sensible to put the most realistic option first. It may be that at this stage, the long term placement options are not yet clear and the primary concern is to provide stability and safety for the child. If so, then explain your choice of interim care plan and placement options. You also need to give consideration to the order being requested to support or discount each placement option and include that in here.

If you are ruling out a placement entirely, for example if placement with a father would be an unsafe option for a child under any order, then you can use the one box to rule out this option regardless of what order there is (eg you can write 'placement with Mr Smith, father, under any order'). However, if you are discussing a placement option which is realistic and you are stating a preference for one order over another then you need to give separate consideration to the various order options in each box, providing the rationale as to why you are ruling out one option and why the other is preferable.

When thinking about the benefits or otherwise of each option you need to consider things like the safety of the child, decisions and who can make them (ie the effect on PR), management of family time, the wishes of the child, and the proportionality of the order. When considering the child being at home with parents or living with a family member, you need to consider what support can be provided by the local authority in order to attempt to maintain that arrangement and why any risks associated with it are, or are not, manageable with such support in place.

Please remember that in an initial court hearing we can only consider no order, ask for an interim care order or interim supervision order, or support the making of a section 8 private law interim order such as an interim child arrangements order. We sometimes see social workers include the rationale for discounting orders like special guardianship orders, placement orders or adoption orders, however these aren't things we would consider at the point of issuing care proceedings. Even if we have frontloaded all of our assessments the court needs time to allocate a children's guardian to undertake their enquiries and then timetable to a final hearing, they would never be able to realistically make a final order at that first hearing, so you don't need to think about these in this level of detail at this stage.

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Long-term placement options explored	Is this option realistic and viable or has it been discounted?	Reason(s) why it is viable or why it has been discounted?

6.2 The preferred and proposed placement option for the child or each individual child if part of a sibling group

- This is a proportionality evaluation that compares the preferred carer against the other realistic options, there is no need to repeat the information set out in the table at 6.1.
- It is helpful to explain why siblings will not be together, if that is the recommendation, and to reflect on the ‘cons’ of the placement even if it the best option.
- An analysis of the likely impact of the preferred option on the child/ren should be included.

6.3 Summary of diversity and cultural considerations

Please have regard to [protected characteristics](#) including gender, religion or belief, race, disability, and how the child/ren’s cultural identity and beliefs will be met.

This is a new standalone section, previously this would likely have been covered in the Child’s Needs section, but having this, and the next section 6.4 as separate things to now consider, highlights the importance of the unique lived experience of the child and of making sure we are able to recognise and meet their individualised needs.

6.4 Summary of any health, wellbeing and educational considerations

It may be helpful to very briefly say how schooling arrangements have been considered as part of the care planning process and whether the child or one of the children has any regular medical appointments or ongoing health needs that have been factored into this decision. Consideration should also be given to ensuring the child’s interests and activities are supported.

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7. Family time/ the plan for contact

The contact or family time plan should involve siblings and anyone else with whom the child/ren has a significant relationship, in line with the genogram and ecomap. It must be kept under review as circumstances change.

Children's wishes regarding family time are important and need to be reviewed on a regular basis, reflecting any changes in the family circumstances.

Don't just include immediate family but think about all people who are important to the child, including their friends and close friends of the birth family.

Support required may include worker supervision and guidance, and practical support such as taxi fares being paid, or phone credit etc.

Child	Who contact is with and relationship to the child	Frequency and duration	Level of support/ supervision required	Brief rationale for the level of contact proposed

8. The range of views of parties and significant others

This section has a vital opinion-sharing purpose:

- *Set out and analyse the individual's views about what should happen for the child/ren in the future.*
- *Facts should be confined to those relied upon in evidence.*
- *Where possible, an indication of whether the facts are accepted or contested should be given here.*

8.1 Mother's views

8.2 Father's views

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8.3 Views of anyone else holding parental responsibility or wider family members

8.4 Views of other parties or significant others

- *Significant others may include the Cafcass guardian, CP chair, a health visitor, the IRO or court appointed experts.*
- *Where possible a short statement or email from the IRO should be included here.*
- *Please be sure to include the full name and job title of anyone providing a statement for inclusion here as well as the date on which they provided it.*

The above is from the formal guidance – in our new LL template we now have a separate views section for the IRO.

9. Case management issues and proposals

9.1 Record case management issues here alongside details of any further proposed assessments

Use this space to list any factors that may lead to delay, including any special factors or the vulnerabilities of key participants plus any further proposed assessments including why they are necessary. For example, this may include the assessment of family members in other countries, a parent having bail conditions, or the requirement for an interpreter or an advocate etc.

The important thing here is ‘proposals’ and you must be clear about what work you are proposing is needed and also as much detail as possible about it, eg what will it involve, how long will it take, who is going to be doing it. This would include any further assessment work you consider necessary, either by yourself, another person or an expert, such as a parenting assessment, any assessments of family members, PAMS intervention, any hair strand testing or the like, and also what the expectations are around parents and what you want them to do. The Public Law recommendations highlight that expert assessments should only be used when absolutely necessary, and requests will be scrutinised closely by the court.

You should also highlight any area which is likely to cause difficulty or delay, such as parental litigation capacity or provision of a support package from adult services.

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9.2 Significant events happening in the near future which are relevant for the child

Date	Event e.g. transitioning from primary to secondary school	Source of evidence/document reference	Significance
	This is pretty self explanatory		

10. Statement of procedural fairness

Confirm here that the local authority's concerns and the contents of this statement have been communicated to the child/ren, mother, father, and significant others, and state how this has been communicated. Have these concerns been clearly understood? If not, please be explicit about attempts to engage parties and any help that has been provided to them to participate in the process. This may include access to legal advice and representation, translators, advocates etc.

11 The social work chronology (last two years)

There is a change in the new SWET in that the chronology is now the last section of the document, whereas previously it was section 2. There is also a last section after the chronology to put any information going back further than 2 years. This means that the chronology should be limited to only 2 years and anything prior to that is to be set out in more of a summarised narrative. This should hopefully be easier for workers to complete.

In the chronology itself it can be helpful to try and quantify events, rather than just putting in lots of cumulative entries, eg in 2020 there were x many missed health appointments for the children including those for x,y and z; throughout 2020 - 2021 school attendance for John was only 49% in the Autumn term, and although this rose to 70% in Spring, in the Summer term it as back down to 52%. If the events are significant such as injuries to a child, injuries from a domestic abuse incident, a sexual abuse allegation etc then these need to be highlighted individually.

Also, if cutting and pasting anything from Liquid Logic do not miss out where the information has come from, who was involved and very importantly, what the outcome was. So, for example, if there was a domestic abuse incident then ensure you highlight what the outcome was, was the offender arrested, where were the children, what support was offered. We often read things like 'Referral was received in relation to home conditions being poor' or 'School shared that they were really concerned as John became distressed in class and didn't want to go home'. Sometimes on their own these raise more questions than answers,

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such as was the referral accepted and was a C&F completed, what was the outcome of this? Who did school share this with, what did they do, what support was put in place? Please don't make any reference to individual legal advice ie you can say LPM held – agreed proceedings to be issued, but do not use individual names or cut and paste any specific legal written advice.

Date	Incident or sequence of incidents relevant to the child's welfare	Significance
	<p>Please find below some examples to assist with thinking....</p> <p>These are real live examples from SWETS we have looked at whilst developing this guidance. We have included a mixture of positive examples we have seen and ones where we thought there might be more effective ways to explain the significance. They have been fully anonymised and some detail changed for this purpose.</p> <p>We hope you find these helpful....</p>	<p>We find that often this box is just left blank, or social workers are not clear about what needs to go in here. The significance here is linked to threshold; you need to ask yourself, what is this event telling me in terms of harm and impact.</p>
November 2019	<p>Case 1</p> <p>Baby Jane was cared for by her maternal grandparents whilst her mother, Ms Smith, stayed in a crisis house for 6 weeks, following a non-psychotic episode during the post natal period. Ms Smith had thoughts that the baby was not hers and was struggling to bond with her.</p>	<p>Jane did not come to any harm during this period, and was safely cared for by her grandmother whilst her mother was unwell, but her attachment to her main caregiver was disrupted for 6 weeks.</p>
January 2020	<p>Jane and Ms Smith moved to a mother and baby unit where they stayed for 3 months.</p> <p>Ms Smith was reported to be accepting support, working well with staff and providing excellent care to her baby and was quick to respond and had things prepared in advance. However, it was reported that she has unresolved trauma from childhood which she would benefit from ongoing support with. After leaving the unit both mother and baby returned to live with grandparents.</p>	<p>Jane was provided with excellent care in the unit by her mother and returned to a familiar setting with grandparents. She experienced no harm as a result of her mother's breakdown.</p>
July 2020	<p>Referral received stating that Ms Smith attended baby clinic and reported that her relationship with her parents, whom she resides with, was fraught.</p> <p>Ms Smith also reported that she was not taking her medication as prescribed and requested support from a social worker.</p> <p><i>It would have been helpful here to explain what the outcome was, was a C&F assessment completed and if so what intervention was put in place and how successful was this?</i></p>	<p>Ms Smith reported low mood and was not taking her medication as prescribed. It is positive that Ms Smith recognised that she needed help with Jane and requested a social worker.</p> <p><i>We wouldn't suggest adding new information into here, the information about having low mood could go in the body of the event. Instead, it might be helpful to comment on the significance in terms of any understanding during that time as to how the</i></p>

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		<i>fraught relationship and mum's mental health was impacting on her care of her daughter, and what impact any intervention and support had .</i>
August 2020	<p>Referral received due to a domestic abuse incident between Ms Smith and Mr Green. Ms Smith alleged that Mr Green had threatened her with a knife and that there was a lot of physical abuse in their relationship.</p> <p><i>Again, it would have been helpful here to explain what the outcome was, was a C&F assessment completed and if so what intervention was put in place and how successful was this? From the information in the accompanying significance box it would appear mum had support from Harbour, but that box shouldn't introduce new information so reference to Harbour and other support should be made here.</i></p>	<p>It is recorded that Jane was not present during the incidents of violence that Ms Smith disclosed so she did not come to direct harm on this occasion.</p> <p>It is positive that Ms Smith engaged with Harbour. However, concerns were raised at the time that she struggled to see the potential impact of domestic abuse on her daughter.</p>
February 2021	<p>Ms Smith was admitted to Sunderland Royal Hospital following low mood and an overdose. Ms Smith was reported to be engaging with the crisis team but had stated that she knows what to say to get back home to Jane.</p> <p><i>It would be helpful here to have reference to the child. Where was she when mum was admitted to hospital, who cared for her?</i></p>	<p>Ms Smith stated that she knows what to say to professionals to get back home to Jane.</p> <p><i>The above doesn't really evidence threshold, harm or impact. A better way to word this might be.... Risk of emotional harm to the child due to her mother's disguised compliance.</i></p>
March 2021	<p>Jane was made subject to a Child Protection Plan under the category of physical harm.</p>	<p>Jane was made subject to a Child Protection Plan.</p> <p><i>The above doesn't really evidence threshold, harm or impact. A better way to word this might be.... A multiagency decision was reached that threshold had been met for significant harm.</i></p>
	<p>The case escalated to PLO.</p> <p>What was the outcome of this, what was agreed and what support was attempted?</p>	<p>A Parenting Assessment of Ms Smith was completed, and discussions were had in relation to long term planning for Jane.</p> <p><i>The above doesn't really evidence threshold, harm or impact. A better way to word this might be.... There is now such a level of concern that the risks can no longer be managed within CP anymore. The parenting assessment should be highlighted in the other box as a significant piece of work that led to PLO.</i></p>

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March 2019	<p>Case 2</p> <p>The baby (KP) of Mr Parker's previous partner (MM) sustained life threatening injuries whilst in the sole care of Mr Parker. It was noted that an ambulance had also been called for the child 3 days earlier, due to a bang to the head.</p>	Significant non-accidental injury to a baby.
April 2019	<p>Mr Parker pleaded guilty and was sentenced to 3 years imprisonment for Wounding/Inflicting GBH in relation to the above offence. Information shared by Police ahead of the Initial Child Protection Conference was that "Mr Parker's brother and mother were present and his brother kicked off in court when Mr Parker was sentenced. Mr Parker also kicked off and had to be restrained. The whole family are anti Police and blame the child's mother for bringing the prosecution." Also is it necessary to use the actual quote which reads as quite damning, colloquial and judgemental.</p>	<p>The family were felt to be colluding with Mr Parker and their behaviour resulted in them being removed from the court.</p> <p><i>The above doesn't really evidence threshold, harm or impact. A better way to word this might be.... The court determined that Mr Parker caused the injuries and therefore he presents a significant risk to children. Mr Parker's family's reaction would indicate that they had little insight into those risks.</i></p>
May 2019	<p>Verbal argument between Mr Parker and then partner. Partner reported that Mr Parker made threats towards her and refused to allow her to leave the address.</p> <p><i>It would be helpful to have any known outcome here, there was no child at this time so we were not involved but was there any support offered etc?</i></p>	Risk of exposure to domestic abuse.
12 th June 2020	<p>A male Registered Sex Offender (RSO) disclosed that he was in a relationship with Miss Jones and was looking to move to an address next door to a member of Miss Jones' family, where children were present.</p> <p><i>Again, what was the outcome?</i></p>	Miss Jones is vulnerable to unsafe relationships and the children in her extended family could have been placed at risk of sexual harm.
14 th June 2020	<p>Miss Jones' father Mr Patrick Holmes reported concerns about her relationship with a male RSO. Miss Jones was spoken to and stated she was fully aware of the male's RSO status and that she may be pregnant with his child.</p> <p><i>As above, what was the outcome, what support was offered to the family by any services?</i></p>	Maternal grandfather was seen to be acting protectively on this occasion, however Miss Jones' awareness and lack of understanding of the risks highlight her vulnerability and concerns about her ability to understand potential risks to children.
September 2020	<p>Referral made to Durham Children's Services by Community Midwife in respect of Unborn Jones (now John).</p> <p><i>Outcome needs to be clear, that a pre-birth assessment was allocated to a social worker</i></p>	Concern raised in respect of unborn baby due to Miss Jones' Learning Disability, Agoraphobia and Mr Parker's previous offences.
January 2021	<p>Child and Family Assessment completed by X, Social Worker.</p>	This identified risk of significant harm therefore Strategy meeting to be requested at 28 weeks.

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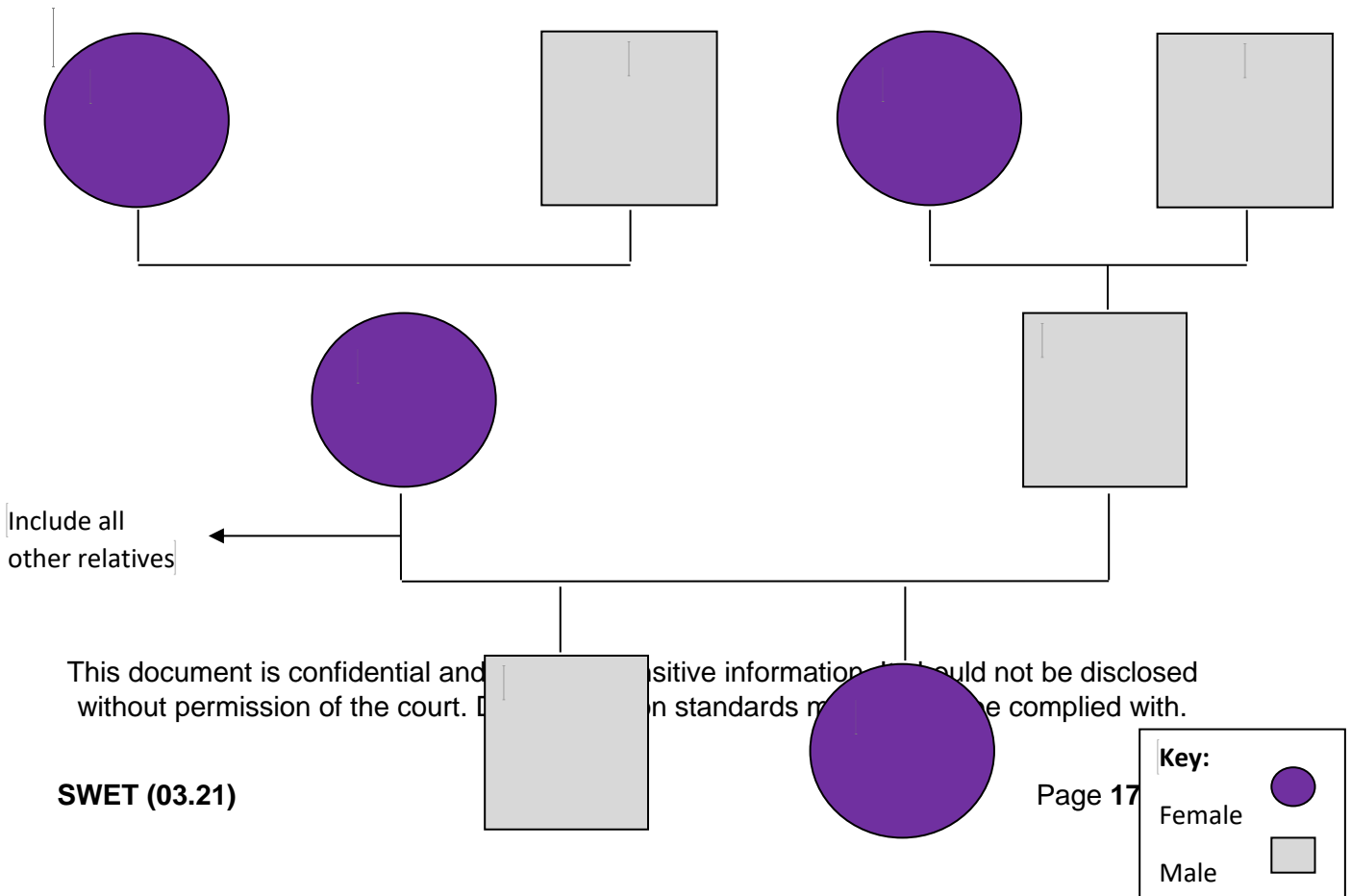
	<i>Instead of highlighting new information in the significance section, it would be helpful to identify here what the main risks are that have been identified as the outcome of the assessment and that the recommendation is for a strategy to be held. Then the significant section would simply highlight that the assessment identifies a number of concerns which place the baby at risk of significant harm</i>	
January 2021	Family Group Conference held. Family members put forward their proposed plan regarding the care and safety of the baby, including full supervision of Mr Parker with him.	Unfortunately, due to the negative Initial Connected Care Assessment of the grandparents, the safety plan put forward was not deemed robust enough to protect the baby from the risk of potential physical injury.

12.1 If there has been involvement with the family over a longer period, please summarise this involvement here.

Summarise historic incidents and events of relevance e.g. any previous proceedings with a connected person, if this seems helpful for context purposes and is not covered in the chronology of the last two years, above.

Genogram (mandatory)(but format may be adapted)

Include family members and their relationship to each child, identify anyone who has been identified as a potential carer by adding 'PC' next to their name(s)



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Key:

- Female
- Male

12.3 Ecomap (risky and protective contacts) (optional)

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