

TRANSFER PROTOCOL

Transfer of Children Between Teams

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Children's Services

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1. Children's Services Transfer Protocol- Introduction

- 1.1 The purpose of this protocol is to ensure that when it is necessary to transfer case responsibility for a child / young person between services this is achieved in a timely and effective manner, has a focus on the child and is in line with our *practice model.
- 1.2 This Transfer Protocol sets out the agreed process and points of transfer for children, young people and their families that require an ongoing service.

2. Principles of transfer

- Our model of practice is based on building strong relationships with children, families and networks, keeping a clear focus on children and during the transfer process. The following points explain the principles that sit behind the transfer of cases.
- 2.2 All children transfer at a meeting which produces the plan eg EH meeting, CIN meeting, ICPC, LAC, CGM, PLO meeting etc. The child must be seen by the assessing worker within one week prior to that meeting being held, to enable time for the receiving worker to be able to read up on the case and arrange a visit. The child will transfer within 24hrs of the meeting being held.
- 2.3 There is the principle of 'no delay' thus ensuring that children and their families receive support with no gap in service provision.
- 2.4 The child's experience, their needs and journey should always be at the heart of decisions to transfer cases.
- 2.5 It is the assessing team's decision as to the outcome of the assessment, including what service a child needs to transfer to. There should be no delay in transferring, as the process is child focused. Any concerns the assessing team's decision should be discussed between Service Managers, however this should not delay the transfer.

- 2.6 Good quality information will be passed from the transferring team to the receiving team to prevent gaps in knowledge and to ensure that the welfare and protection of the child is paramount.
- 2.7 All service managers will attend the Weekly Allocations Meeting [WAM] to ensure consistency of approach and a receiving worker will be identified so that the child can transfer at the arranged CIN, ICPC, LAC meeting/ review. The service manager must attend this meeting prepared with the name of the receiving worker.
- 2.8 The child will transfer at the arranged CIN, ICPC, LAC meeting/ review which will occur within 10 working days after the Weekly Allocations Meeting is held. This timeframe ensures that the receiving social worker has time and notice to attend.
- 2.9 If 10 days minimum notice is not provided, then the assessing worker will need to arrange a visit to see the child and family to occur within the 10 days window, so the visit can then be the handover point, however this is seen and an exception rather that general rule. If the 10 days' notice is not provided for the ICPC, then the assessing social worker will need to attend the CGM. Where during the S. 47 process the preliminary date of the ICPC was provided, however due to the delay of taking to the Weekly Allocations Meeting there is only 5 days' notice, it would then be expected for the assessing worker to arrange a visit within the 10 days from the date of the Weekly Allocations Meeting and the child will not transfer until that visit occurs. If, however the receiving worker fails to attend the arranged visit, this will not prevent transfer within 24 hours of that visit occurring.

3. The Transfer Process

3.1 No child will be brought to the Weekly Allocations Meeting (WAM) unless the case closure/transfer checklist is completed, except for S. 47 investigations. Where S. 47 is triggered, the child's name and brief case summary will be

- added to the Weekly Allocations meeting's list with the preliminary ICPC date/ time to ensure no delay in identifying a receiving social worker.
- 3.2 The receiving worker will be invited to the CIN, ICPC, LAC meeting/review after which the child will transfer within 24hrs.
- 3.3 Transfer between services should not be blocked. Statutory requirements and court directions must always be adhered to.
- 3.4 Step Down to Early Help and Targeted Support will work in a similar manner, therefore when the child's case is ready to transfer, the child's details are added to the Weekly allocations Meeting's list, and the worker identifies the date and time when the child will be heard at the weekly Early Help Panel. This date should be the earliest possible date where the child can be heard, and where the assessing worker can attend to present the child at the Panel.
- 3.5 There are limited circumstances where more than one social worker will be allocated to a family. There may however, be some exceptions, for example, a child in Care who becomes pregnant and there is a need for a separate referral in relation to their unborn child; or instances involving child-on-child abuse within the family home necessitating the need for two workers.
- 3.6 It will be the responsibility of the MASH to ensure the transfer-in Conference is scheduled, and to ensure the case closure/ transfer checklist is completed so the child can transfer directly to CFF. The Transfer-In child should be added to the Weekly Allocations Meeting list as soon as the transfer-in is requested, and the preliminary date for the Transfer-in Conference to must be shared with the CFF team taking the case, with the ICPC being held within 10 days.

4. BCP Transfer Standards

4.1 No child will be brought to the Weekly allocations Meeting until all the case closure/ transfer tasks as outlined on the case closure/ transfer sheet are complete. In terms of S. 47s, it is the expectation that all case closure/ transfer tasks will be completed prior to the ICPC/ RCPC and will not transfer to the

receiving worker until such time that the tasks are completed. The assessing worker's team manager is ultimately responsible for ensuring the tasks are complete and the work is of good quality prior to transfer.

5. Team to team transfer arrangements

5.1 Integrated Front Door /MASH

- A decision will be made within 24 hours of a contact/referral being received.
- Children requiring an assessment will be transferred to the assessment service.
- Children who have been accommodated on the day or overnight by EDT will be transferred to the assessment service.
- Transfer-in CP conferences will be transferred directly to CFF from MASH.
 The expectation will be that the transferring Local authority will need to attend
 the transfer-in ICPC to present their case. The MASH team manager will
 ensure all strategy discussions are requested in a timely manner before
 transferring a child to the assessment service.
- Where a referral is received on a child who was open within the last 3 months, the child will transfer directly to the previous team.
- Where a referral is received about a child with a disability and the criteria is met for CHAD [Children with Health and Disabilities], the child will transfer directly to this service. This also includes carer assessments where the child meets the CHAD criteria, otherwise these assessments transfer to Assessment.
- A telephone call/ email will be held between an Assistant Team Manager, or Team Manager from the MASH to the appropriate receiving team manager to alert the team of the transfer.

Requests for court reports

 Section 7 and 37 reports, where there has been prior Social Care involvement within the last 3 months, will be allocated to the originating team (excluding the assessment service)

- Where the child was allocated and closed by the Assessment service within the last 3 months it will be transferred to the Children and Families First team.
- All other Section 7 or 37 reports to be allocated to the Children and Families
 First Service.
- Requests for statements or reports by other Local Authorities or Courts on children not in the BCP area may not require any input from BCP, other than to respond to state the child is not BCP responsibility.
- If there are requests to move a child into the BCP area, and therefore a
 request or Court Order to complete a statement/ report, this will be transferred
 to the Children and Families First Service upon receipt of the Court Order
- All children transferred will be overseen and managed by the Team Manager, however the team manager may delegate some of their responsibilities to their Assistant Team Manager.
- Pre- birth assessments will be assessed in line with S. 17 general duties.
 Where the unborn baby has no older, open siblings, the assessment service will undertake the assessment. Where there are older siblings in the household who are open, the pre-birth would be transferred to the responsible team to assess
- Where a child is in Care or care leaver falls pregnant, and where the allocated worker of the Mother-to-be has concerns, a referral should be made to MASH within the area where the Mother-to-be for the unborn baby.

5.2 Assessment Teams – Transfer Process

- Children will only be added to the Weekly allocations Meeting list when they
 are ready to transfer and the CIN/ ICPC/ LAC review meeting date/time is
 known.
- The team manager is expected to quality assure and ensure that all tasks on the case transfer/ closure list have indeed been completed prior to adding the Weekly Allocations Meeting list
- Children and Young People requiring Looked After status are to be transferred to the Children & Families First Teams as soon as possible and within the 2-week standard at a maximum.
- Unborn babies whose siblings are currently subject to Care Proceedings. The Assistant Team Manager/ Team Manager of the Assessment team will

- telephone the Assistant Team Manager/ Team Manager of the PLO and Court Service for discussion and agreement to transfer.
- Children requiring PLO process will be taken by the assessing team to a legal gateway meeting. If the assessment has been completed and the child has been added to the Weekly allocations List for transfer, and the LGM determines PLO is required, then the PLO meeting and/or initial hearing [whichever is first] will be the transfer point. In addition, the assessing social worker is expected to attend this legal gateway meeting to present the case and the PLO and Court Service can then be present to hear the presenting concerns. If an ICPC occurs prior the LGM being held, it is still expected that the assessing social worker will attend the LGM, although the child may transfer at an earlier date to the receiving social worker.

5.3 Children & Families First Teams [CFF]

- The transfer process is set out within this policy and applies to all children transferring teams/ services.
- Where the ADM decision is agreement for adoption, referrals will to be made to Aspire Adoption within 24 hours where secondary allocation with a Family finding social worker will take place.

6. Children in Care Service - Transfer Process

- Cases will be transferred to the CiC service at the 2nd CiC review and after the permanence plan that includes the child remaining in Care has been agreed. If the permanence plan is for reunification within a 6-month period, the child will not transfer. Where the child is within Assessment, then there may be exceptions where the child could transfer to CIC if permanence of remaining in Care is clear and Edge of Care and Family Network meetings have been explored.
- Children who cease to be Looked After by becoming subject to CIN/CP plans or month Supervision Orders will transfer to Children and Families First

- teams, with the planning for this transfer to begin at the 3-month point to be completed after 6 months of the post CiC plan.
- Weekly Allocations meetings with the 16 plus team will take place. At this
 meeting all children aged 15 years and 8 months old will be discussed and will
 be allocated a Pathways Worker.
- As each child reaches 18 years of age a formal handover meeting will take place between the social worker and personal adviser, which may involve both Team Managers as required. This will include those:
 - Young People aged 18-25 (who were relevant /eligible).
 - Young People aged 21+ who remain in education/training.
 - Young People aged 21-25 (who were former relevant) who re-present to the service as they want to return to education.

7. CHAD- transfer process

- New referrals will be received via MASH in the first instance and where the threshold criteria is met, the child will be transferred directly to CHAD for assessment.
- Where a safeguarding referral regarding a child with a disability is received this will transfer directly to CHAD for the Sec 47 and assessment. The process will be the same as it is for children transferring to the assessment service
- Any safeguarding concerns on closed cases will to be referred to the MASH
- Where safeguarding concerns arise and a child is open to CHAD, all siblings will be assessed by CHAD and remain open to CHAD if work is required.
- Where a child is subject to care proceedings the team will continue to support
 the child and their siblings if already open until their permanency is achieved.
 Thereafter, the team will liaise with the Children in Care teams as per transfer
 protocol to arrange transfer of the siblings.

8. Private Fostering Team - Transfer Process

- Should safeguarding concerns arise or a need for additional services under S17, the Private Fostering Team Manager will discuss with the allocated worker's responsible Team Manager to ascertain how best to assist the child and/or family and whether this requires further assessment/ transfer.
- Where a new referral is made to the MASH regarding a private fostering arrangement the child will be transferred from MASH straight to the private fostering team
- Where safeguarding concerns are raised for the child, these must be assessed in line with safeguarding policies by the allocated worker

9. Case transfers to Aspire Adoption (RAA)

- The local authority will take primary casework responsibility for all children for whom adoption or Special Guardianship is being considered to the point of Care and Placement Orders.
- In the case of relinquished babies, the local authority will take primary casework responsibility until the formal witnessed CAFCASS consent has been obtained.

10. Special Guardianship Assessments- process for referral to Aspire

- The child will remain allocated to the allocated worker.
- The allocated worker will refer a child to Aspire for a full assessment of a family member or friend within 1 working day following the conclusion of a positive viability assessment.
- If a negative viability assessment is concluded and the Court orders an SGO
 assessment, then this will be referred within 1 working day from the Court's
 decision irrespective of whether the sealed or draft Order is received by the
 Local Authority to avoid further delay.
- Enquiries and notifications about Special Guardianship Order applications,
 which are received by the local authority where the child is not the subject of care proceedings, will be referred to Aspire within 1 working day

Case Transfer Process

Child identified for transfer and name added to WAM list

Worker ensures all case recording is up to date and on Mosaic prior to the WAM as per transfer sheet: demographics; visits; Relationships (including other professionals working with the family); impact chronology; genogram; case recordings; supervision; Assessments; Court Orders, packages of support; transfer/ case summary

Assessing Team Manager discusses the child and family with the receiving team manager at WAM or prior to WAM (including Early Help where) The proposed plan must be discussed.

Details included in transfer spreadsheet by Team Manager (at least 48 hours prior to transfer meeting)

Assessing Team Manager must ensure all transfer tasks are completed 48 hours prior to the date the child will transfer. Receiving Team Manager must check the case is in order within 48 hours of transfer and raise any issues within this timeframe with the assessing Team Manager who must then resolve within 48hrs of it being raised. The assessing team will be expected to 'put right' any uncompleted tasks and the SM should be informed.

Weekly Allocations Meeting [WAM]

A case discussion is held, including the date of the transfer meeting. The receiving Team Manager must provide a name at WAM of the receiving worker. Children are not expected to be discussed at WAM until the assessment is completed with the exception of S. 47s. WAM will not run a 'waiting list'.

Receiving TM discusses the case with proposed receiving worker and shares the date where a transfer meeting will occur. The assessing Team manager will then transfer the child to the receiving worker on Mosaic within 24 hours of the transfer meeting, and action that child to the team manager so they are aware it has transferred.

The assessing worker should ensure that the child and family are aware of who the receiving worker is and be provided with details to contact that worker. The receiving worker should ensure they are available and present at the transfer meeting to meet the family/ enable introductions. With Children in Care, good practice would ensure both the assessing and receiving worker undertake a joint visit within one week prior or after transfer

Note: There may be, by exception, a child who cannot transfer within 2 weeks/ 10 working days due to the complexity of the case. The availability of the family or the new worker should not prevent transfer. Disagreements between TMs must not delay transfer- the child will transfer, and the TMs must then resolve any differences within 48 hours. Where TMs are unable to resolve, they must escalate to SMs within that 48hrs. Any delay by exception must be agreed by both the assessing and receiving SM. A child must continue to be visited by the allocated worker in line with visiting policies until transfer occurs- no child will be unallocated at any point. Transfers happen through discussion at the Weekly Allocations Meeting, and the receiving TM is expected to then discuss with the receiving worker- a worker should never find out about a child through their work tray or email.

Step Down to Family Hub [level 2] + Targeted Support [level 3] Flowchart

<u>Assessing (SW)</u> Team Manager makes decision to step down a child and adds Management oversight to this effect and the level the child will step down to. The assessing (SW) Team Manager must then add the child to the WAM list and invite both the Family Hub and Targeted Support SM to the WAM to discuss.

The allocated (SW) worker must discuss closure/ step down with the family and gain consent for Early Help support and the ongoing support plan.

Social Worker can ring Family Hub/check FIS for advice re possible local services to provide ongoing support for CYPF

Universal/ + Family Hub - Level 1/ 2

If services are already in Place

The receiving Team Manager must provide a date for a network meeting to occur within 10 working days.

The SW worker must attend this meeting.

This network meeting will consider a lead professional and if services required to meet the needs within the Family Hub Reach area

If Services are not in place

The receiving Family Hub or EH family Hub Navigator are to source IAG, signpost or make referrals to relevant services and arrange a network meeting within 10 working days with all professionals and families identified in Step Down including the assessing (SW) worker

Final step

The assessing (SW) worker must complete all case transfer tasks and share information at the network meeting. The family will not transfer unless this is complete.

The assessing (CSC) Team Manager must add a management oversight/ transfer note to Mosaic with the name of the Family Hub reach area/ EH Family Hub Navigator (if appropriate) and contact details prior to closing to the assessing (CSC) team.

The receiving Family Hub/EH Family Navigator will continue to update records on SCM relating to the agreed support package that is being provided if this is being offered

Targeted Support Level 3

The **assessing** team must add the child to the WAM, requesting a targeted L3 service. The assessing worker will have completed the transfer checklist documents and details 48 hours in advance of meeting

The **receiving** team will agree a network meeting within 10 days and invite the **assessing** worker, all professionals and the family who will be supporting this child to the meeting

The **receiving** team and the network will review the step-down plan, agree the LP, interventions and transfer of support plan

Case closes to assessing team

Case closes to assessing team