

# Devon County Council

# THE CHILD'S JOURNEY THROUGH CHILDREN'S SOCIAL CARE

Case Transfer Protocol

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## Introduction

The purpose of this protocol is to clarify the principles, procedures and arrangements for all children and families transferring between specialist teams within Devon Children's Social Care or stepping down to a targeted Early Help offer. The information in this document supports managers and practitioners to provide effective and accessible services.

As a restorative Children's Services, we understand and value the importance of consistent relationships, built on trust, in delivering lasting positive change. In this context, wherever possible, we seek to avoid recurring patterns of transfers between teams where this is not in the interest of the child. Timely and effective planning and decision-making alongside families can help us avoid unnecessary and impactful transfers.

While every effort is made to minimise changes of Social Worker for each child and their family, a change will be necessary when a child's needs require transfer to a new team or when an allocated worker leaves the authority or moves to a different role. It is therefore inevitable that children and families will need to transfer to respond to these changing circumstances.

It is essential that practitioners and managers are clear about the best practice to be followed to ensure transfers are well communicated, planned and smooth for all children and their families.

This protocol does not seek to directly address every situation. It is therefore important that teams communicate with one another about how best to resolve issues without causing any delay in decision making for children and their families. Ultimately, all decision-making should have the interests of the child or young person at their heart.

## Transfer Practice Principles and Expectations

Consistent practice across the service means we embed a smooth transition process for children and families, which is understood by all involved.

The following principles should be adhered to at stages of transfer:

- The interests of the child are at the heart of all planning and decision-making
- Decision-making is timely and avoids any unnecessary delay
- Children's Social Care teams work collaboratively, with one shared aim to ensure the best possible outcomes for the children and families we support
- Transfers are avoided where they are not necessary and in the interests of the child, so that the total number of transfers any child experiences is kept to a minimum
- Where transfers are necessary; delay, drift and duplication are avoided
- Practitioners work restoratively with families before, during and after the transfer process, by being open, honest, and transparent about any changes and what that means for them
- Wherever possible, we ensure transfers do not adversely impact on children and families' trust of services. Maintaining trust and engagement is crucial for achieving positive, long-term outcomes

The following core expectations should be followed in all case transfer practice:

- It is assumed that sibling groups have the same Social Worker, unless it can be specifically demonstrated that this is not in the child's best interest.
- Transfers will be agreed via an allocations process in each locality taking place each week
- Unless there are exceptional reasons (such as sudden departure of a Social Worker), children and families transferring will always include a joint handover visit (current and incoming social worker) with the child/young person and their parent/carer, and wherever practically possible, a meeting with key professionals and family members
- A child or family will never receive a statutory service without an allocated Social Worker
- Any escalations will go to the respective Head(s) of Service for final decision-making within 24 hours of the escalation being made
- The receiving manager should add management oversight on Eclipse within 24 hours of the child being allocated to the team.

The child and their family should always be told about any changes in worker or team verbally and in writing and given the contact details for their new worker and team.

If involvement with a child/young person and their family is going to end they will be told verbally and in writing, including why the service area is no longer going to be working with them, and how to seek help and support in the future if they need it. The Social Worker should say goodbye, wish the child/ young person well and make sure partner agencies are informed.

## Case Transfer Requirements and File Compliance

When a decision has been made to transfer a child or family to another part of the service, the decision must be clearly recorded on Eclipse by a manager.

The decision can either be recorded in a supervision (if falling within the supervision cycle) or a management case note.

It is then the responsibility of the Social Worker and Team Manager to ensure that agreed timescales and deadlines are met and the transfer for the child and family is swift.

The [Compliance Checklist](#) should be used at this time to ensure that the file is up to date, and this does not hinder the service being offered to the family in a timely manner.

### Compliance Checklist

- ✓ Case summary is up to date on child's file alongside all details and names spelt correctly
- ✓ Pictures included where applicable
- ✓ Child linked with all known family members on Eclipse (indicate if further information is held on Carefirst)
- ✓ The child's ethnicity and religion are recorded on Eclipse
- ✓ There is an up-to-date chronology (not Eclipse generated), identifying the key milestones in the child's life - both positive and negative
- ✓ An up-to-date genogram is uploaded on to the child/family's file
- ✓ Case notes are up to date
- ✓ The last supervision is recorded on file (monthly)
- ✓ Any audit actions are completed and recorded
- ✓ Any relevant management oversights are recorded on file
- ✓ All visits are up to date
- ✓ The child's CIN /CP / CIC plan is clearly recorded on file
- ✓ The professional network is up to date, and this is clear on file
- ✓ The CIN / CP / CIC Worklist is complete on Eclipse
- ✓ All court documents (including court directions, orders, expert reports, agreements, and statements) are on file.
- ✓ The point of transfer is at a key meeting (child protection conference, child in need meeting, child looked after review or early help meeting).
- ✓ Any outstanding payments have been authorised on Eclipse by Management
- ✓ A handover visit must be arranged within 5 working days (one week) of the point of

## Compliance Checklist

The Compliance Checklist is to be used by the Social Worker and Team Manager before children and families are transferred to ensure all requirements are complete.

It is the responsibility of the outgoing transferring team, with assistance from business support, to ensure compliance is completed in time for the child and family to transfer to the next part of the service.

## Points of Transfer

### Re-referral of closed cases

If our involvement ended and a record has been closed but the child is re-referred to Children's Services within 3 months (12 weeks of closure), for these children to have an informed approach to the new referral, the newly received information should be passed to the team who most recently worked with the child. The following process should be followed.

- A contact will be initiated through the Front Door.
- Requests for Support (i.e. referrals into Front Door) are triaged in the inbox by the Front Door Team Manager and / or Advanced Social Worker and passed to the Refcos to upload and create a 'Contact' form and worklist.
- Refcos will upload the Contact onto Eclipse, completing all required fields of information.
- If the child was open to a Devon Children's Social Work Team within the last 3 months, the Refco will identify the Social Work Team that previously supported the child and will allocate the worklist to their 'Team In Tray' in Eclipse (not the individual Team Manager's tray).
- The receiving manager will be responsible for triaging their 'In Tray', allocating worklists to their team, ensuring the necessary communication is made and information is gathered to decide if the child should progress to a referral and further assessment/intervention undertaken. Team In Trays must be checked on a regular basis throughout the working day.

If the child is re-referred after this time, any return to the last allocated team is by negotiation with the team manager and should be done so in the best interest of the child/family. The child/family's circumstance and needs should be taken into consideration. If the issues have remained the same during this period, the benefit of providing continuity of service from the same team may be greater.

Disabled children may have been previously assessed by Disabled Children's Service and the outcome was that they do not meet eligibility support from Disabled Children's Service. In this instance, there needs to be careful consideration, when a re-referral is received, to the impact and understanding of the family particularly where involvement from Disabled Children's Service was limited. As a specialist service it would not be expected that re-referrals, where eligibility is not met, would be allocated to Disabled Children's Service. Where there are queries, an initial discussion with Disabled Children's Service is recommended to inform the decision.

It should be noted that allocation to Disabled Children's Service Support and Advice is not an automatic indicator that a child would be supported by Disabled Children's Social Work Team. This is because DCS Support and Advice have a different eligibility to that of social work support due to being an early targeted support offer.

### Referrals for children (including unborn babies) where parents have had a child previously removed:

If a referral for an unborn child comes to the MASH and the parents of this unborn have had a child placed outside their care in the past, information must be gathered to see what the family situation is now and triangulate information regarding the separation of children from their parent's care. The unborn / child and family will then transfer to the Children and Families team for the assessment to take place there and a wraparound of support identified for the family.

### Child Protection Transfer-Ins from another Local Authority

All Child Protection transfer-ins will come via the MASH. The criterion for acceptance is that the relevant documents have been received. Importantly, it will be at this point the transferring LA will need to evidence the family are confirmed residents of the area. Once this is evidenced the information will be sent to the QA Reviewing & Safeguarding Service Manager. They will then QA the documents using the CP Transfer in [Checklist](#). The Children & Families team are alerted by the Safeguarding service; here a children & families Social Worker is identified. The case is not formerly transferred to Devon until the CP Conference takes place. The CP conference should take place within 15 days of the notification.

MASH will ensure:

- The referring authority has provided written evidence the family are located permanently in Devon; or that they will be residing here for a period.
- The referring local authority has completed an up-to-date assessment and conference report for a transfer-in conference and provided other relevant information including the latest child protection plan, an up-to-date chronology, and any specialist/risk assessments.
- The appropriate Children and Families social work team receives this request for allocation as soon as the decision to accept the transfer is agreed.
- The Quality Assurance, Reviewing & Safeguarding Service is notified immediately (in parallel) so a date can be identified within 15 working days of acceptance of transfer.

The receiving Children and Families Team must attend the Transfer-in conference as the point of transfer. Every effort must be made by the receiving Children and Families team to arrange

#### **Practice tip**

When a child or young person is transferred from Devon to another local authority, the principles and expectations of the receiving local authority should be adhered to. This will ensure a smooth and timely transfer so there is no unnecessary drift or delay.

a joint visit to the family with the previous local authority Social Worker as part of the transfer process. This should be agreed prior to the conference taking place.

### Transfer-in to Child in Need Requests:

When a family moves from one local authority to another, there is no legal requirement for the receiving local authority to have a formal transfer-in process. In Devon, a request to consider a transfer of a child or young person with a Child in Need plan must be considered by Devon to ensure a family receives the right level of support to ensure the child's safety and wellbeing.

MASH will ensure:

- The referring authority has provided written evidence the family are located permanently in Devon.
- The referring authority has provided written evidence the family consent to a Child in Need service and the family has been notified, the offer of a service from Devon will depend on our own assessment of the family circumstances.
- The referring authority has shared an up-to-date assessment, the current Child in Need Plan / Education Health and Care Plan (with appendices) and the latest Child in Need Review meeting record that indicates the need for a continued plan post transfer and the needs this service will support.
- When the above is confirmed, the request will be forwarded to the relevant Initial Response Service for assessment.

### Devon Children and Families Moving Across Local Authority Boundaries

#### Child Protection Plans:

When a child subject to a Child Protection Plan moves to another local authority with their family, the Devon Social Worker must notify that local authority (the host authority) of the family's presence in their area, even if this is a temporary arrangement. When the move out of county is a temporary arrangement, Devon County Council (the home authority) retains responsibility for the child, including all visits and review conference arrangements.

If a family intend to transfer permanently to a new area, we will ask the new (the host) Local Authority to convene a transfer-in child protection conference. We will need to evidence the family are living in the area. Devon (the home Local Authority) is then required to arrange the transfer-in conference within 15 working days.

**Remember:**

The child remains Devon's responsibility until a transfer-in conference takes place in the receiving or host Local Authority.

#### Child in Need Plans:



When a child has a Child in Need plan, and it is assessed the family would continue to benefit from this plan while also moving to another area, a referral to a new Local Authority (if they move) will require the family's consent before taking place. Devon will confirm with the receiving authority this consent has been obtained in writing. The Devon Social Worker must also send an up-to-date assessment, Child in Need plan and the record of the most recent Child in Need meeting. If the family do not consent, the Social Worker and manager need to consider how best to end the plan with the family. This should be at the point of their permanent departure from the County boundary. A clear plan for this should be recorded on the child/ren's file.

It is important to note that the child remains the responsibility of Devon until the transfer in meeting or an agreement to support a family via a Child in Need plan has taken place (whichever has been requested).

The [Compliance Checklist](#) must be completed so that the child's file is ready for closure in Devon.

#### **Practice need-to-know**

All children in the care of Devon County Council remain our responsibility when we place them in other areas. When children move to a new area, we must formally notify the Local Authority where they are residing.

### **Section 7 and Section 37 (Children Act 1989) report requests in private proceedings**

If the family has previously been known to a Social Work team, the request will transfer directly to the previous worker/team to complete.

If the family has not been known to Devon children's services or closed for more than 6 months, the Assessment and Intervention Team will complete this piece of work.

### **Disabled Children's Services**

Disabled children and their family's needs should be supported by all services in Devon. Those with complex needs may require the specialist support for Disabled Children's social work. MASH will consider the summary and contact the Assessment and Intervention Service to consider if the eligibility criteria is met at either a social work or targeted early help level. For those meeting Disabled Children's social work criteria following discussion, these will be transferred directly to the locality Disabled Children's Teams.

MASH is not able to outcome directly to Disabled Children's Service without this discussion and agreement as it may result in further moves and changes for the child.

Where the service identifies a short break need, and wish to undertake an assessment, these will be completed concurrently with the social work planning provided through teams in Devon.

## **Disabled Children's Service – Targeted Early Help**

Stepping across to Disabled Children's Targeted Early Help offer must include the same diligence as detailed in respect to early help. However, given the support needs for children, young people and the impact for families, the transition can be expedited.

It is necessary for a minimum of 6 months to be remaining on the agreed short breaks plan and these must be working well with families being able to access the support and services identified.

The Social Worker must pay due diligence to financial considerations and oversight ensuring that there are no ongoing provisions of financial assistance above those detailed under the provision of short breaks.

### **Early Help**

Referrals will be triaged in MASH by the Early Help Connectors who are able to support providing practical guidance notes for practitioners. At this point the family will be contacted alongside professionals as part of information triangulation and case formulation. Use of resource hubs and local provisions will be identified with guidance and step across.

Following a child and family assessment, where a level 3 need is still identified, a decision can be made for children to be stepped across to Early Help services for targeted support and intervention. In some circumstances this may be in conjunction with a [Short Break plan](#).

The Social Worker will need to identify the best service to meet the family's needs and ensure that the plan and intended outcome for the family are clear. The Social Worker then needs to contact the identified lead professional agency for an initial conversation and also fill out a referral form. The family should be allocated, and the relevant meeting held (CIN, TAF) with the new allocated team and the family. A workflow will then be opened on Eclipse confirming the step down with an alert to the Early Help service within this.

This transfer (step across) can only be completed once an Early Help meeting, called a Team Around the Family (TAF) meeting, has taken place and an Early Help Plan, called a Family Plan, has been put in place.

Early Help will also have the process to be able to step up work if threshold is met and it is felt this is required to meet the child and families need, if required. The family will be stepped back up to the previous receiving team if this is within a 3-month period of the closure date to that social work team. Outside of this timeframe, Early Help will complete a request for support and send directly to the MASH. Early Help will remain the lead professional until a decision on Level 4 has been confirmed.

See procedure [Step down to Early Help from Children's Social Care - Devon Childrens' and Families Partnership \(dcfp.org.uk\)](#)

For disabled children this may happen if the children and family assessment identify a child's disabilities do not meet the eligibility criteria for the Disabled Children's Service.

## Transferring from Initial Response Service to Children and Families (C&F) Teams

### **Child in Need (CIN) Plan:**

If a Child in Need Plan is the agreed outcome of the initial Child and Family Assessment, then the Assessment and Intervention Service Social Worker will arrange a Child in Need meeting and invite the relevant Children and Families Team to attend for a warm handover.

The Assessment and Intervention Service will prepare the outline Child in Need Plan which will be further developed and agreed at this meeting. The Assessment and Intervention Team Managers will chair this meeting and ensure a seamless transfer to a Children and Families Social Worker.

### **Child Protection Plans:**

Transfer takes place at the point of the Initial Child Protection Conference (ICPC) when the Child Protection Plan is confirmed.

The Assessment and Intervention Social Worker must attend the ICPC and take responsibility to present their assessment and outline the plan.

A joint visit with the family should take place prior to the conference to ensure the family has met the new Social Worker from the Children and Families service before the conference takes place. If this has not been possible, then it must take place prior to the first core group meeting, which is held within 10 working days of the conference, to ensure a warm handover.

### **Children in Care aged 0-15:**

If a child is first accommodated by Assessment and Intervention Service, the transfer to Children and Families takes place at the point of the first statutory review which is arranged by the Assessment and Intervention team.

The Assessment and Intervention service will initiate all the child in care processes, including the initial health assessment, undertake any initial placement meetings and complete all initial placement agreement documentation such as the Delegated Authority and Placement Plan.

The Assessment and Intervention team will ensure an outline Care Plan is developed in advance and shared with all participants for the first Child in Care Review. This Care Plan must consider all plans to update their assessment and to test reunification. Where possible the child/ren themselves need to be involved in the development of the plan and then invited to their Child in Care Review and fully participate so their views, wishes and feelings can be shared.

## Transferring to Permanence & Transition Teams (P&T) from the Assessment & Intervention Team

**Unaccompanied Asylum Seeking/migrant/separated children** will transfer from Assessment and Intervention team to Permanence and Transition Team following the completion of a single assessment and Care Plan. The transfer occurs at the first Child in Care Review.

**Young people who are accommodated by the Assessment and Intervention team and are 16 years+** will be transferred at the first review following the completion of the assessment and care plan. This will allow for considerable and immediate intensive intervention to be undertaken to establish whether the child can return home or be placed with connected persons. If, after intensive intervention, their permanence plan is to remain in the care of Devon, then the child will be transferred to the Permanence and Transition Team at the second Child in Care Review.

**When a 16–17-year-old presents as homeless Southwark states that it should be CYPS rather than Housing who undertake an initial assessment.** Case law has clarified the relationship between the duty under section 20 of the Children Act 1989 ('the 1989 Act') and duties under Part 7 of the Housing Act 1996 ('the 1996 Act') in the case of 16 or 17 year olds who require accommodation. The House of Lords case *R (G) v Southwark* [2009] UKHL 26 held that, where a 16 or 17 year old is owed duties under section 20 of the 1989 Act, this takes precedence over the duties in the 1996 Act in providing for children in need who require accommodation.

Where the specific duty is owed under section 20 of the 1989 Act, a 16 or 17 year old should be accommodated under that provision rather than looking to the general duty owed to children in need and their families under section 17 of the 1989 Act. Whilst the section 20 Children Act 1989 duty takes precedence, housing services also have duties towards young people who are homeless or threatened with homelessness. Duties owed by each service will depend on a range of factors, including which service they initially seek help from; the outcomes of any assessments and enquiries; and the wishes and feelings of the young person and their family.

It is therefore essential that children's services and housing services work together to plan and provide services that are centred on young people and their families, and prevent young people from being passed back and forth between services. For more information on joint working between children's services and housing services.

**Children in Care under section 20 (Children Act 1989) where there are no plans to commence care proceedings.** This will relate to a very small group of, often, older adolescents who are open to the Assessment and Intervention Service, where concerns have escalated, and it has been necessary to agree a period of accommodation.

Permanence Panel will take into consideration any outstanding grounds for care proceedings that have not been addressed. Upon agreeing the accommodation period for the children, a decision will have been reached that care proceedings **will not** be commenced. The reasons for this decision must be carefully recorded on the child's file and in agreement by the Permanence Panel to ensure case law is adhered to. A Permanence Planning Meeting must take place no later than 10 days after a child has come into our care to confirm the Permanence Plan.

Where an assessment has been completed, and reunification is not an option within the family setting, the plan will be for the child/ren to remain in local authority care. The family will transfer to the Permanence and Transition Team. This transfer for the family will take place no later than the second Child in Care Review for a child/ren accommodated under section 20 Children's Act 1989.

The Assessment & Intervention team will initiate the first Child in Care Review and the Permanence and Transition Team will be invited to this. A joint visit to the child will take place prior to the review.

If a reunification is successful while the child is still allocated to Assessment & Intervention team, then a transfer to a Children and Families team might be required if either a Child in Need or Child Protection Plan is needed to support and safeguard the child. If this is the situation, the transfer requirements set out above for all Child Protection and Child in Need Plans applies.

### Transfers from Children and Families Team to Permanence and Transition Team

**Care Proceedings/Permanence Decisions.** Where care proceedings are in progress, transfer to the Permanence and Transition Team will take place following the final hearing where the plan is for the child to remain in local authority care.

Where the child has a plan of adoption, with the final order a placement order. Where an adopter has been identified, the allocated Social Worker in Children and families will continue case holding to provide continuity for the child/ren. However, if at the final hearing a placement order is granted, and an adopted placement **has not** been identified this will be an appropriate point for the child to have an allocated Social Worker from P&T and should transfer at this point.

The Permanence and Transition Service will be aware of children with Permanence Plans of long-term care and those with a placement order where an adopter has not been identified. This will be monitored and explored through the Transfer and Allocation weekly meeting. Service Managers and Team Managers can prepare their practitioners for allocations in advance.

Good practice is for Children and Families Team Managers to discuss with the receiving Permanence and Transition Manager the child's Final Care Plan and where necessary consult on the detail to enable a Permanence and Transition Social Worker to be identified early on and fully prepared ahead of receiving the child/ ren.

### Transfers to the Kinship Care Team

#### Special Guardianship Order (SGO) Assessments:

Referrals for 'Private Applications' by family members, professionals (non- social workers) or family friends, where there is a written notification of their intention, will come through the MASH. The Kinship Care Team will engage with the family for advice and information and explore eligibility to apply. Once eligibility is established, the Kinship Care Team will complete this assessment.

Requests for an SGO assessment by the child's foster carer will be referred to the Kinship Care Team by the child's Social Worker via the viability assessment. The [viability assessment](#) will draw on information available in a foster carer's Form F. See [Tri-X](#) and [CoramBAAF](#) for further information guidance and templates.

If the family is not previously known, any request for an SGO assessment will be transferred from MASH directly to the Kinship Care Team for completion in the timescales directed. The request needs to be in writing from the applicant.

**Temporary approvals for family members and family friends as family and friends foster carers (Regulations 24 and 25 of the Care Planning, Placement and Case Review (England) Regulations 2010):**

The allocated Social Worker refers the viability assessment to the Kinship Care Team who will quality assure the viability assessment and refer to the Agency Decision Maker (Head of Service for the service area the child sits under) for temporary approval. Once granted, the Kinship Care Team will commence a full assessment of the family member "as soon as practicable", in line with standard 30 of the national minimum standards for fostering services 2011.

It is expected that parts A & B of the Form C will be completed by the Social Worker prior to referral for temporary approval, and in no more than three weeks post temporary approval in the event of an emergency placement.

Once temporarily approved, the Kinship Care team will undertake either a special guardianship assessment or a family and friends fostering assessment for full approval, or both, depending on the child's assessed needs, and in consultation with the applicants and the timetable of any care proceedings

**Transfer from Children and Families, Disabled Children and Permanence and Transition Teams to Adopt South West and Kinship Care Teams**

**Adoption Orders:** Transfer of children placed for adoption takes place at the point at which the Adoption Order is made where there is ongoing support being provided by Adopt South West. Where there are no additional support needs at that time, the family will be closed to Adopt South West and Children's Social Care.

**Special Guardianship Orders:** The transfer of children made subject to Special Guardianship Orders to the Kinship Care Team will take place at the point at which the order is made. If a Family Assistance Order or Supervision Order is made alongside the Special Guardianship Order, or a Child in Need Plan is required, the original team will keep responsibility for supporting the child and will work alongside the Kinship Care Team who will offer support to the Special Guardian(s) as agreed in court.

There is a referral form to be completed for SGO support. This is not dependant on the child continuing to have a Social Worker as they should be referred to the SGO support team immediately after the order is made irrespective. Referrals can come from MASH or the children's teams as with private fostering.

Disabled children subject to Adoption or Special Guardianship Orders will continue to receive support as required from the Disability Children Social Care Team alongside Adopt South West or Kinship Team as per the child's and Guardian's support plan.

More information can be found in [Devon's SGO Policy](#) and associated resources (found on Tri-X under the Fostering, Kinship Care and Adoption tab).



## Transfers to Disabled Children Social Work Teams

Where a child who is already being supported by a Social Worker and has a disability which potentially meets the Disabled Children's Service (DCS) criteria, and where the Social Worker or Team Manager consider the child or young person may benefit from either:

- A) Transfer to a Disabled Children's Social Worker Service.
- B) 'Step down' to the Disabled Children's Service Support and Advice Team for a 'Short Break Assessment', and possible Short Break plan coinciding with a 'step down' to Early Help for Team Around the Family planning, to be arranged by Social Worker. Or in some circumstances, a Short Break plan can be organised for the child and family whilst they remain with the allocated locality team.

The allocated worker will consider with their manager if the child or young person is likely to meet Disabled Childrens' Service criteria based on information available at the time by using the DCS eligibility criteria detailed in appendix 5.

This will include gathering information including the EHCP, clinic letters and consulting the Disabled Childrens' Service screening tool for guidance, which can be found on Eclipse in templates. The Initial conversation should take place between the Disabled Childrens' Service Referral Assessment Team consultation line or Manager and the allocated worker. This conversation will be recorded on the child or young person's case record by DCS Referral Assessment Team. If, at this stage, it is clearly evident that they are not the right team, Disabled Children's Service will tell you.

If we need to further understand the needs of the child young person and finalise decision-making, Disabled Children's Service will allocate for a full Eligibility tool to be completed, feeding back the outcome and recording the decision.

If a transfer is agreed, as the service is the right team, it will be necessary to explore when the right time is in the Child and Family's Journey. These timings will be worked out by locality Team Manager and the receiving Disabled Children's Service Team Manager.

Transfers will be agreed/managed via an agreed allocations meeting/process in Disabled Children's Service each week.

In some circumstances an assessment will be undertaken by the Assessment & Intervention Service in conjunction with the existing allocated worker with any handover including careful

### **Practice Need-to-Know:**

Disabled Children's Service is part of Children's Services. Social workers should not refer to the service but must have a conversation.

Support and Advice is a targeted early help offer that does not constitute social work intervention and is provided under a different eligibility criteria.

Where children and young people are assessed and do not meet the eligibility for Disabled Children's Service, the team manager will follow the locality transfer process.

consideration about how to communicate these changes to disabled children and young people.

### **Disabled Children supported through Permanency and Transition:**

Disabled children who are in care, will continue to be supported by the Disabled Children Social Care Teams where appropriate. The relevant locality Permanence and Transition managers will allocate a Personal Adviser as that child reaches 16 years of age to support transition to adult services at 18 years of age. Permanence and Transition must recognise the different needs and impact upon disabled young people when considering the timescale for allocation. Many will have complicated needs which include communication and difficulties with experiences of change.

The Personal Advisor will continue to support each care leaver/care experienced person until they are 25 years of age (as required by the Children and Social Work Act 2017). The Disabled Children Team has the responsibility of contacting the relevant Permanence and Transition Team manager to where the young person is currently living.

### **Transfer of Children between localities in Devon**

In situations where a child with a Child in Need or Child Protection plan moves to a different locality within Devon, unless it is impacting the service for the family, they will maintain the same Social Worker for continuity and consistency in the work being offered and the relationship already built with the child/ family. **However, there may be anomalies to this, should this be the case they should be discussed on a case-by-case basis between locality Head of Service about where the child is best placed and how a positive outcome can be maintained for the child and family.**

If children and families need to be transferred between localities and social workers as agreed by Head of Service, all good practice principles, and expectations of transfers between services, will still need to be applied for transfers between localities.

### **Step Across from Permanence and Transition Teams**

Any decision to step a child across from being a Child in Care, to Early Help Service (or the Support and Advice Team if the child has disabilities) must follow the same process as the step-across process and good practice principles of transfers.

Where an interim Child in Need Plan is recommended as part of a reunification plan, for continuity for the child and family, the Permanence and Transition Team should continue to manage the plan and not step this across to Children and Families. For children with disabilities, the Disabled Children team would continue to manage the plan as part of their service offer.

### **Transfer to Adult Social Care**

When it is necessary to consider the involvement of Adult Social Care, we need to start planning transition early. Consideration should be given to the Care Act Eligibility criteria at appendix 6 and other adult frameworks such as the Mental Capacity Act.



Referrals should be made to adult social care as soon as is reasonably practicable on or after the child or young person's 14<sup>th</sup> birthday. However, for those over 16, it must be remembered that it is necessary to seek the young person's consent. If the referred person is over 16 and they have mental capacity, they can consent to this referral. If the person referred is over 16 but does not have mental capacity to consent to this referral, then a parent, carer or professional must act under the Mental Capacity or Best Interest Decision framework.

For these young people, plans should contain a focus on developing their independence with careful consideration of their life journey and outcomes.

The Adult Social Care initial assessment will consider if there is a likelihood, based on the information, the young person has eligible adult social care needs.

Information about this process and the Preparing for Adulthood Toolkit for social workers, children, young people and their families can be found [online](#).

### Ending our Intervention with a Child, Young Person and their Family

All steps to be completed as per transfer protocol and file compliance checklist; in readiness for closure, with closure form completed and authorised by the line manager.

Where actions remain outstanding, a clear timescale must be given for all actions to be completed; within 10 working days. This must be followed up by the line manager to ensure actions are completed. **Any delays in this need to have management oversight with new timescales agreed.**

A clear management case note must be recorded providing rationale as to why closure/ending of our intervention is appropriate with reference to outcomes and an analysis of risk.

Children, young people and their families should have clear understanding as to the closure, who is their point of contact or lead professional (where applicable) and what their plan now looks like where one is to continue. Social Workers / practitioners should ensure direct work has been undertaken with children and young people to support the ending of their relationship with you which would have also been used to inform the readiness of the family for closure.

## Joint Allocations

### Family Practitioners

When a child's plan requires the additional support / interventions of a **Family Practitioner**, the following best practice applies:

- The allocating line manager will have a discussion with the allocated social worker in respect of intervention/support required and intended outcomes. The allocated worker will share necessary information detailing the intervention/support required, intended outcomes and how this will be reviewed.
- The Family Practitioner will be allocated to the child on their electronic file as a secondary worker. The family will be informed (both verbally and in writing) with Business support writing to all those identified.

- The Family Practitioner will discuss their intervention/support with their line manager in supervision to ensure it is clear, understood and timescales and outcomes are being achieved.
- Arrangements for a review of the Family Practitioner's intervention/support will be arranged through joint supervision with the allocated social worker and through invitation to relevant family and professional meetings.
- Upon the ending of the Family Practitioner's intervention/support, the Family Practitioner will complete a summary of their involvement and outcomes on the child's record.
- The line manager will end their allocation to the child on their electronic record and the Family Practitioner's personal supervision record where it applies.
- Where support/intervention is required again for the child, best practice would be for the same Family Practitioner to be allocated to provide consistency and familiarity to the family and professionals.

### Joint Allocation of Personal Advisor and Children's Social Worker

When a child reaches the age of 16 years old who is open to Devon Children's Social Care and they fall under the categories below, they are entitled to a service under Leaving Care Act 2000. Depending on their eligibility as a care leaver, will dictate how the 'Joint Working' arrangement to allocate a **Personal Advisor** within the Permanence and Transition Team is applied. This guidance refers to joint allocation of Relevant Young People:

- Relevant Young Person
- Former Relevant Young Person
- Qualifying Young Person

For further information on joint working expectations of Personal Advisor's with Social Workers, please see Appendix 4: Joint Working Expectations Personal Advisors.

#### The Line Manager is responsible for:

- The line manager will identify a Personal Advisor to be allocated to the relevant young person, a minimum of one month prior to the young person turning 16 years old. The young person will be informed (both verbally and in writing) with Business Support writing to Child, Parents, Carers and Professionals where applicable.
- The Personal Advisor and Social Worker will be informed, and the Personal Advisor will be added to the young person's electronic record, as a secondary worker.
- If the young person's Child in Care Review falls just before their 16<sup>th</sup> birthday (within 1 month), the Personal Advisor will be invited to attend, to begin best practice introduction.
- Where the line managers for social worker and the Personal Advisor differ, there must be a joint discussion with both practitioners about future supervision arrangements within 2

weeks of allocation. Best practice will be for joint and separate supervision to take place with the two allocated workers.

- Where joint supervision is not possible, the line manager will need to alert any key issues and tasks to be undertaken within 48 hours (unless urgent and immediate) that arise from supervision.

#### **The allocated Social Worker is responsible for:**

- Arranging a joint allocation discussion to share the Needs Led Assessment, Pathway Plan, and any other key documents (e.g., risk assessments and up to date chronology).
- Arranging a joint visit to the young person and key family members, and where necessary a professional meeting (where a Review has not recently taken place or due) for the Personal Advisor to meet the team around the young person.
- Setting expectations of the role of the Personal Advisor in line with the child's Pathway Plan and how they will contribute to the review of the Needs-Led Assessment and Pathway Plan Review and undertake visits to the child (for example jointly/singly).

#### **The Personal Advisor is responsible for:**

- Reading the young person's file, ensuring the Needs Led Assessment, Pathway Plan, relevant key documents are considered and understood.
- Making themselves available for attending joint allocation visits/meetings with the social worker as outlined above as far as reasonably possible.

#### **Ending of Joint Allocation of Personal Advisor with Children's Social Worker:**

When a child reaches the age of 18 years old and becomes a Former Relevant Child and there is no involvement from Adult's Social Care, the Personal Advisor will become the sole allocated worker with Children's Social Care. All arrangements for joint working with the child's Social Worker will end.

In preparation for the ending of joint allocation, the young person will be informed of the upcoming changes to allocation with the social worker taking steps to ending their relationship positively and sensitively with the young person.

In preparation for the ending of joint allocation, supervision should explore the likely impact of this for the young person and how any concerns/risks created by the change can be mitigated. For this to be meaningful, these discussions should start when the young person is 17 years old and 6 months.

Upon the young person reaching 18 years old, the allocated children's social worker will place on the young person's record a transfer summary of their involvement and highlight their ending of intervention/support for this young person as per the transfer summary outlined in appendix 1.

The Personal Advisor will discuss with their line manager, who will be responsible for chairing the young person's Pathway Plan, reviews post 18 years old and any additional support needs

of the young person the Personal Advisor will now be undertaking in the absence of an allocated social worker.

### **Joint Allocation between Personal Advisor and Adult's Social Worker**

When a child turns 18 years old and is transferred to Adult's Social Care, they will still be entitled to the Care Leaver offer and have a Personal Advisor until the age of 25 years old (as required by the Children and Social Work Act 2017). The support and intervention delivered through the Personal Advisor will be the responsibility of Permanence and Transition Service in Children's Social Care. Services and support provided by the Adult's Social Worker will be the responsibility of Adult's Social Care team.

Upon the young person reaching the age of 18 years old, the following best practice applies in respect of the joint allocation with Personal Advisor and adult's social worker:

#### **The Adult's Social Care Manager is responsible for:**

- The adult's social care manager will identify an adult's Social Worker to be allocated to the young person upon their 18<sup>th</sup> birthday and notify the Permanence and Transition Team Manager and Personal Advisor.
- Supervision arrangements e.g., joint or singular supervision. Where joint supervision is not possible, the supervising line manager will alert the other line manager/Social Worker/Personal Advisor to any key issues, tasks to be undertaken within 48 hours (unless urgent and immediate) that arise from supervision.
- Both line managers will complete a manager oversight record on the young person's file (Eclipse & Care First) with a summary of the allocation and agreements reached on management oversight.

#### **The Permanence and Transition and/or Disabled Children's Service will be responsible for:**

- Adding the professional relationship to the young person's Eclipse record.
- Arrange a joint discussion with adult's Social Worker to share the Needs Led Assessment, Pathway Plan, and any other key documents (e.g., risk assessments). Documents are to be provided due to the use of different recording systems.
- Arranging a joint visit to the young person and key family members where appropriate to do so.
- Arranging a professional meeting (where a Review has not recently taken place or due) for the adult Social Worker to meet the team around the young person and discuss roles and responsibilities in communicating and contributing to the care planning of the young person.

#### **The Adult's Social Worker is responsible for:**

- Reading the young person's key documents, ensuring the Needs Led Assessment, Pathway Plan, relevant key documents are considered and understood and uploaded to the Care First file.
- Reporting to the Personal Advisor and/or Line Manager any difficulties in understanding, conflicts arising, or meeting expectations as outlined in the Pathway Plan that has been tasked to adult's social care e.g., specialist accommodation.
- Making themselves available for attending joint visits/meetings with the Personal Advisor if requested to, however, where adult is settled, the involvement of the adult social worker may reduce, and this might not be appropriate for the young person.
- The agreements reached for shared responsibility will be reflected in the case summary on the young person's file. Where arrangements need to change or there is an unexpected change of worker for example, (either social worker or Personal Advisor), this will need to be updated.
- Providing social care advice to Devon 0-25 team

### **Ending of Joint Allocation of Personal Advisor with Adult's Social Worker:**

When a young person is allocated a Personal Advisor and is open to adult's social care, the Personal Advisor will remain allocated to the young person until they are 25 years old (as required by the Children and Social Work Act 2017).

In preparation for ending their involvement, the young person should be informed of the upcoming changes to allocation with the Personal Advisor taking steps to ending their relationship positively and sensitively with the young person.

In preparation for the ending of joint allocation, supervision should explore the likely impact of this for the young person and how any concerns/risks created by the change can be mitigated. For this to be meaningful, these discussions should take place at least 6 months prior to any Pathway Plan ending.

Upon the young person's Pathway Plan ending, the allocated Personal Advisor will place on the young person's record a closure summary of their involvement and highlight their ending of intervention/support for this young person.