

Independent Reviewing Service

Alert Policy

CFLL

Reviewed September 2023

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Next review date: September 2024

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# Introduction and Purpose of Alert Policy

* 1. The purpose of this policy is to create a transparent process to enable swift resolution between Independent Chairs (IC) and operational teams within the local authority or relevant partner agencies with regards to care planning and case management for looked after children (IROH 6.1) and children subject to child protection plans. In Surrey the Independent Chair is a dual role – Child Protection Chair and Independent Reviewing Officer (IRO).
  2. The aim of an alert should always be to promote the welfare of children and young people to make sure that their voice is heard, and that action is taken to prevent drift and delay.
  3. The Alert Process will be used to raise alerts and concerns with the Local Authority and partner agencies where the IC is of the view that they are not fulfilling their corporate parenting responsibilities and the action/s assigned to them are not being completed, leading to drift and delay, etc.
  4. This policy is not intended to replace or prevent day-to-day liaison between ICs and operational Social Work teams, other relevant services or partner agencies. The IC will routinely liaise with the allocated Social Worker, their manager and relevant partner agencies where appropriate, in relation to care planning and case management.
  5. This policy is not intended to be utilised where there is an imminent risk of significant harm to a child, identified by the IC. In these circumstances, the IC should urgently follow safeguarding procedures as well as notifying the Social Work team of the safeguarding issue and action taken.
  6. An IC may trigger an alert at any time, including following a looked after children review, a child protection conference, a consultation, an audit or through mid-way monitoring. Alerts will be monitored by the Quality Assurance Service through monthly reports.
  7. An alert can be triggered at any level/stage at any time as deemed necessary by the IC and the process is in place for the best interests of the child.

# Statutory and local guidance

* 1. The IRO handbook requires the Local Authority to have an identified local ‘Dispute Resolution Process’ ([IRO Handbook DFE 2010](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/337568/iro_statutory_guidance_iros_and_las_march_2010_tagged.pdf)).
  2. The Care Planning Regulations require IROs to raise concerns in relation to care planning to relevant managers within the Local Authority, ([DFE Care Planning, Placement and Review Regulations 2010 Volume 2: Section 4.40](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1000549/The_Children_Act_1989_guidance_and_regulations_Volume_2_care_planning__placement_and_case_review.pdf))
  3. The Surrey Safeguarding Partnership (SSCP) procedures stipulate that the CP chair

has responsibility for ensuring consistently high standards of practice by encouraging inter-agency co-operation and identifying shortcomings in practice.([SSCP Procedures Chapter 4: 21](https://surreyscb.procedures.org.uk/zkyqzz/managing-individual-cases/initial-child-protection-conferences#s4630)).

* 1. The Surrey Safeguarding Partnership procedures provide a separate inter-agency escalation policy ([FaST](https://surreyscb.procedures.org.uk/skyqox/complaints-and-disagreements/the-surrey-fast-resolution-process)) which can be used for the resolution of exceptional professional disagreements across the partnership that relate to safeguarding children. ([SSCP Procedures Chapter 7:2](https://surreyscb.procedures.org.uk/skyqox/complaints-and-disagreements/the-surrey-fast-resolution-process))

# Who does this policy apply to?

* 1. This policy applies to and is relevant for all agencies who support and care for our children and those who share corporate parenting responsibility for looked after children or work with and support children who are subject to child protection plans. Specifically, this includes:

**Surrey County Council**

* ICs, managers and leadership in Quality Practice & Performance within the Children Families and Lifelong Learning (CFLL)
* Practitioners, managers and leadership in Family Safeguarding and Resilience & Corporate Parenting within CFLL
* Practitioners, managers and leadership within Virtual School, Additional Needs and Disability Service within CFLL
* Legal services in Surrey County Council
* Other staff as necessary (those involved in a child’s case and care planning)

**Partner organisations**

* Practitioners, managers and leadership within Health, Education, Mindworks, New Leaf, Police and any other key partner agency as necessary.

1. *To reflect the multi-agency practice this policy covers, the Surrey Safeguarding Children Partnership (SSCP) (through its procedures sub-group) have ratified this policy. The Board also has its own separate* [*Surrey FaST Resolution Process*](https://surreyscb.procedures.org.uk/skyqox/complaints-and-disagreements/the-surrey-fast-resolution-process) *to support professionals to address practice disagreements.*

# Concerns which may require alerts

* 1. Outlined below are examples of what type of concerns may trigger an alert.

* A child or young person is in immediate danger.
* There are safeguarding issues which are not being addresses or resolved.
* A child or young person has not been visited according to statutory guidance and has not been seen alone.
* Social work reports have not been completed or approved by line managers on time.
* Public Law Outline (PLO) or legal gateway meetings that have not taken place in a timely way. There has been a delay in seeking legal advice.
* Assessments are not thorough enough or have not been completed.
* There is delay in implementing actions outlined in child protection plans, care plans, or pathway plans.
* There is delay in permanency planning. For example: A child/ young person has no permanency plan at the 4-month review. A child / young person who has been in care for a 12-month period is not in their permanent placement and reasonable steps are not being taken to resolve this
* Health assessments and PEP’s have not been completed on time.
* There are concerns that a child/ young person’s placement is not meeting their needs
* There are administrative issues such as an incomplete episode on LCS that are causing drift or delay for the child/ young person.
* The Independent Chair disagrees with the LA care plan for the child/young person
* The child/ young person’s plan does not reflect due consideration for the child/young person’s expressed wishes and feelings
* There is a potential for a breach of the child/ young person’s human rights
* Delay in completing Graded Care Profile 2(GCP2) or referral for Family Group Conference (FGC)

# Alert Process – In detail

* 1. The IRO handbook sets out an expectation that practice resolutions will be resolved within 20 working days (IROH 6.2). The timescales in this policy must therefore be adhered to, so as to ensure that the Local Authority complies with statutory obligations in respect of ‘IRO dispute resolutions’.
  2. This process is managed through an alert system, which is outlined below.
  3. It may be appropriate for the IC and operational team or relevant partner agency to discuss a concern by telephone/MS Teams, or by arranging a face-to-face meeting. However, care should be taken to ensure that these arrangements do not impede the speedy resolution. The timescales referenced in this document apply even where it is necessary for the IC and operational team or relevant partner agency to meet. At the point the IC has raised an alert (at any stage), this policy requires all parties to prioritise resolution. In addition, so as to ensure data collection and organisational learning, a face-to-face meeting should not replace the need to respond formally, using the alert form within social care recording system (LCS) and sending a paper version of the alert to external partner agencies who do not have access to LCS and who will need to respond to an alert if raised with them.
  4. It will, at times, be appropriate for the IC to raise an alert to the next stage under this process if professional discussion has not achieved resolution, or it may be appropriate for the IC to raise an alert at a higher level straight away. The judgement of the individual IC about the seriousness of the issue should be applied when making this decision.
  5. In accordance with statutory guidance, an IRO may raise an alert at any stage within the process, including raising with CAFCASS (IROH 6.3), where the IC has concerns that the Local Authority is not acting in the child’s best interests. It is the responsibility and discretion of the individual IRO to select which stage of the alert process is most appropriate for the child.
  6. At any time, the IRO will also have access to independent legal advice that may assist in resolving the concerns raised. This may be particularly applicable if the IRO considers it necessary to make a referral to CAFCASS, as CAFCASS lawyers can only provide guidance to IROs (IROH 6.13), rather than specific legal advice.
  7. It is good practice for the IC to liaise with the child concerned in relation to utilising the alert process, if they are of sufficient age and understanding. However, the alert process should always be applied where the IC feels it is in the child’s best interests, even if this is not in accordance with the child’s wishes and feelings (IROH 6.4).
  8. It may be identified that there is a particular theme or policy about which an alert needs to be raised. Where this is the case a **‘policy alert’** will be raised by the Service Manager of Quality Assurance directly to the Assistant Director for Children’s Services and Assistant Director for Quality Practice & Performance. Policy alerts will also be reported to the subsequent Corporate Parenting Board (CPB) or SSCP by the Assistant Director for Quality Practice & Performance.
  9. The Alert Template has been built into Children’s Services electronic recording system (LCS) (Word version of template to be used with external partners who do not have access to LCS – see [Appendix 1](#_Appendix_2_–)). The alert in LCS or word version for external partners, must be used to escalate issues being raised as part of this protocol.
  10. Process to completing the alert form/template:
* The **Independent Chair** **completes Part 1** of the alert template, outlining the issues of concern and desired resolution, with a set timescale for response.
* The **relevant manager** to whom the alert has been raised **completes Part 2** of the alert template.
* The **Independent Chair** **completes Part 3** of the alert template, either accepting and concluding the alert or if not satisfied with the response, consider whether they wish to raise the alert to the next stage.

**There are 6 stages to the alerts process** [**(see flowchart – Appendix 1)**](#_Alert_Process_–)

**Informal Alert**

The Independent Chair raises their concern directly with the allocated social worker and/or manager and tries to resolve the concern informally.   The Independent Chair records the outcome of the discussion on the alert form on LCS.  If the concern cannot be resolved at this stage the formal alert process commences.

**Stage 1 Alert – Team Manager or equivalent**

The Independent Chair sends the alert to the allocated Team Manager or equivalent in the partner agency for a response to the concerns identified. The Team Manager has five working days to respond to the concerns raised.

The Independent Chair with support from the Service Coordinator will escalate to stage two of the process if the response does not sufficiently address the concerns or where there is no response in the timescale required.

**Stage 2 – Service Manager or equivalent**

A stage two alert is sent to the Service Manager or equivalent in the partner agency.  The Service Manager has five working days to respond.

The Service Coordinator and the Independent Chair will escalate to stage three of the alerts process if the response does not sufficiently address their concerns or where there is no response in the timescale required.

**Stage 3 – Assistant Director or equivalent**

A stage three alert is sent to the responsible Assistant Director or equivalent in the partner agency.  The responsible Assistant Director has five working days to respond.

The Independent Chair with support from the Service Co-ordinator will escalate to stage 4 of the process. If the response does not sufficiently address their concerns or where there is no response in the timescale required.

**Stage 4 – Director or equivalent**

The Independent Chair with support from the Service Co-ordinator reports their concern to the responsible Director of Children’s Services (i.e. Family Safeguarding and Resilience or Corporate Parenting) or equivalent in the partner agency for any unresolved alert.

The Independent Chair should consult the Quality Assurance Service Manager, Assistant Director, and Director prior to raising the alert to stage 4.

**Stage 5 – Executive Director or equivalent**

In the unlikely eventuality of the alert being unresolved at director level the Independent Chair has the option of raising the alert to the Executive Director of Children’s Services or equivalent in the partner agency.

The Independent Chair should consult the Quality Assurance Service Manager, Assistant Director, and Director prior to raising the alert to stage 5.

**Stage 6 - CAFCASS/SSCP**

If the alert is not resolved within the local authority The Independent Chair has the option of raising an alert to CAFCASS for looked after children or to the Surrey Safeguarding Partnership for child protection cases.  However, these options should not be triggered at any point without the knowledge and agreement of the Director for Quality Practice & Performance.

# Learning from alerts

* 1. It is recognised that themes may be identified in relation to application of this policy that can aid organisational learning in relation to effective care planning.
  2. The Quality Assurance Service within Quality Practice and Performance division in CFLL will monitor alerts and resolutions and provide information to the Senior Management and operational teams within the Local Authority, Corporate Parenting Board and the Surrey Safeguarding Children Board. These will highlight thematic concerns associated with practice and will inform individual Social Work and IRO practice, and other agencies where applicable, team effectiveness and other Local Authority and other agencies policies related to effective care planning.
  3. The IRO Annual Report will make reference to the number of alerts in each year, the effectiveness of this policy and the outcome of concerns raised.
  4. Where a ‘policy alert’ has been made, the Assistant Director for Quality Practice & Performance will report this and the outcome of the alert to the next Corporate Parenting Board meeting.
  5. A schedule of reporting alerts will form part of performance and quality information reporting to:
* QA Reports to all Children’s Services Practice Challenge and Support Meetings
* Bi-monthly reports to the Directors for Corporate Parenting and Family Safeguarding & Resilience, to be shared with Corporate Parenting Board and Surrey Safeguarding Children Partnership
* IRO Annual Report

# Alert Process – Appendix 1- An Overview

Example using Children’s Services in Children, Families and Lifelong Learning at Surrey County Council. An alert can start at any level/stage at any time as deemed necessary by the Independent Chair (IC) and the process is in place for the best interests of the child.

**Independent Chair (IC) Role**

**Service Coordinator Role**

**Stage**

* Work with the IC to raise and seek resolutions to care planning alerts (at respective level) as necessary.
* Provide a practice view on nature of alerts and proposed resolution (this could be different to the IC).
* Service Manager for QA will raise policy alerts (concerns about an SCC policy or specific practice theme) directly to Assistant Director level for resolution.
* Assistant Director for Quality Practice and Performance will inform Corporate Parenting Board or/and Surrey Safeguarding Children Partnership of any policy alerts*.*
* IC will raise the alert and seek resolution at each respective stage if there are practice concerns.
* The IC may work with managers (at respective level the care planning alert is raised to) within Quality Practice & Performance division to raise the care planning alert and seek resolution.
* The IC will accept or reject the resolution.
* If rejected then the IC will raise a care planning alert to the next stage.
* The IC will remain independent (in role as Independent Reviewing Officer for looked after children) and may disagree with managers/professionals response (this includes managers within Quality Practice and Performance).

# Appendix 2 – Alert Template (Word document version)

INDEPENDENT CHAIR ALERT TEMPLATE

***TO USE WHEN RAISING AN ALERT WITH EXTERNAL PARTNERS WHO DO NOT HAVE ACCESS TO LCS***

Please refer to the Alert Policy in relation to alerts raised by Independent Chairs for assistance in how to complete and respond to this care planning alert.

[The guidance notes are very clear on how to complete the alert in LCS Forms](file:///\\\\surreycc.local\\home\\L\\LindeW\\Data\\Downloads\\Independent%20Chair%20Alert%20Template%20form%20User%20Guide.pdf).

**PART 1 – FOR COMPLETION BY INDEPENDENT CHAIR**

|  |  |  |
| --- | --- | --- |
| **Name of Independent Chair:** |  | |
| **Name of Child/ren:** |  | |
| **Stage of alert** | **Informal** |  |
| **Stage 1** |  |
| **Stage 2** |  |
| **Stage 3** |  |
| **Stage 4** |  |
| **Stage 5** |  |
| **Stage 6** |  |
| **Date(s) and stages of previous alert(s) raised:** |  | |
| **Date of current alert:** |  | |
| **Date response to alert required by:** |  | |

**Reasons for alert:**

*(please place an ‘x’ in the relevant column)*

|  |  |  |  |
| --- | --- | --- | --- |
| A | Assessment/Report has not been completed | |  |
| B | Child's wishes and feelings contradict the care plan | |  |
| C | Independent Chair disagrees with LA care plan | |  |
| D | Plan not implemented in a timely way | |  |
| E | Assessments not thorough enough | |  |
| F | Delay in PLO/legal gateway meetings taking place | |  |
| G | Incomplete LCS issues causing drift and delay | |  |
| H | Concerns the child's placement is not meeting their needs | |  |
| I | The child or young person has not been visited in timescales and/or not seen alone | |  |
| J | Health assessments/PEPs not completed in time | |  |
| K | There are safeguarding issues which are not being address or resolved | |  |
| L | The child is in immediate danger | |  |
| M | Lack of permanency planning | |  |
| N | Human rights may be being breached. | |  |
| O | Delay in completing Graded Care Profile 2 | |  |
| P | Other | |  |
| **If other, please give detail**  *If n/a, please write N/A* | |  | |

***Please detail below brief relevant background information for alert and current situation. Outline any actions already taken by Independent Chair to try to resolve the concerns and in your assessed view, what will be the impact on the child if this alert is not resolved.***

|  |  |
| --- | --- |
| **Description of nature of concerns:** |  |

|  |  |
| --- | --- |
| **Outcomes and actions sought to ensure a good outcome for the child/young person by who and by when:** |  |

**Once you have completed this form please save and send the form to the relevant operational manager to complete part 2**

**PART 2 – FOR COMPLETION BY RELEVANT OPERATIONAL MANAGER**

***The Independent Chair has outlined in Part 1 what action s/he feels the team needs to take in order to resolve this issue. Please state below your response to the Independent Chair’s concerns and whether this action will be taken and by what date. If this action will not be taken by the operational team, please stat what alternative action will be taken.***

|  |  |
| --- | --- |
| **What agreed outcomes and actions will be taken to ensure there is a good outcome for the child/young person, who will undertake this and by when** |  |

|  |  |
| --- | --- |
| **Comment/Further action required if applicable/appropriate** |  |

|  |  |
| --- | --- |
| **Date completed** |  |

|  |  |
| --- | --- |
| **Signed** |  |

**PART 3 – FOR COMPLETION BY INDEPENDENT CHAIR (P3)**

|  |  |
| --- | --- |
| **Does the Independent Chair consider the issues resolved?** | Yes  No |

|  |  |
| --- | --- |
| **Comment/Further action required if applicable/appropriate** |  |

***Once finished, please finalise and close and upload to child/young person’s Wisdom file***