

Surrey Children's Services

Practice Standards
September 2024



Contents

What are Practice Standards?.....	3
Children, Families and Lifelong Learning Ambitions and Enablers.....	5
Practice Standards	6
Direct Work.....	6
Top 10 must do's when working with children and young people	8
Children's Single Point of Access and Early Help.....	9
Youth Homelessness.....	14
Assessments	16
Working with Children in Need	18
Strategy Discussion and Section 47 Investigation.....	20
Working with children in need of protection	22
Children with a disability	25
Looked after children.....	28
Care Leavers Service.....	31
Fostering	33
Adoption	36
Role of the Independent Chair.....	38
Recording.....	39
Management of Practice.....	40



What are Practice Standards?

Please take time to read and understand our core standards and ensure that you commit to them in your everyday practice.

Practice standards describe the way that we work in Surrey Children's Services.

'Practice Standards' set out the service or 'practice' that can be expected by the children and families we support. They are either legally set through legislation and government guidance or based on evidence from research and practice.

This booklet provides an easy reference to Surrey standards. It has been created to:

Provide clear guidance to staff and managers on their roles and responsibilities.

Outline expectations of frontline practitioners and managers, which they can measure themselves against.

Ensure children and families receive a consistent approach across the different areas and services.

Working in Children's Services places the professional uniquely at the heart of the lives of children and families and this raises many complexities and responsibilities. The practice standards outline how practitioners can expect the right supervision and support to effectively undertake their role. They are mandatory, and have been developed in consultation with staff, senior leaders and ambassadors for children and young people.

To support the practice standards and individual practitioner development we have in place:

Training & development through the [Academy](#) and the [Surrey Safeguarding Children Partnership](#).

Resources for Managers : [Leadership and Management \(sharepoint.com\)](#)

[Access to resources](#) through: Research in Practice, Community Care Inform and Care Knowledge.

[Welcome to the CFLL Practitioner Hub \(sharepoint.com\)](#)

[Policies & Procedures](#) on Tri.X

Surrey Foster Care Charter: [Introducing our Foster Carers' Charter \(sharepoint.com\)](#)

[The Corporate Parenting Strategy](#): The promise to children and young people in our care.

[Writing to the Child Guidance Document](#)

[Writing to the Child Guidance Grid](#)

[Writing to the Child Examples](#)



The practice standards are intended to sit alongside Surrey's Policies and Procedures, available on Tri-X at: www.proceduresonline.com/surrey/cs/ . Practitioners should familiarise themselves with the policies and procedures relevant to their role and the families they are working with, and ensure they keep up to date with any changes. It is advisable to register for updates on the Tri-X website by clicking on the following link and entering your details.

[Register for Updates \(proceduresonline.com\)](http://www.proceduresonline.com)

All qualified social workers must be registered with Social Work England and as such, have committed to staying up to date with, and adhering to, the required professional standards to maintain their registration.

I am very pleased to be endorsing our updated practice standards for practitioners working with children. As we continue to strengthen the quality of our work with children, young people and their families, and develop new services to meet their needs, these practice standards are amended to reflect our improvements and expectations.

It is so important that we put children's needs first, and that we make the time and space to hear their voices in our work. This is why we have practice standards that require us to see children alone, to focus on whether children's parents, carers and the wider community are supporting them to thrive, and to plan diligently in response to the risks and challenges children face so that we secure good outcomes for them.

Whether we are involved in assessment, planning or writing records, children's lived experience should shine through our work and be documented and shared in words that children themselves can understand, as well as enabling future adults to look back and appreciate what our work with them was for. You may find the 'Writing to the Child' link particularly helpful for this. [Writing to the Child Guidance Document](#)

Doing great direct work with children, young people and their families starts with relationships: their relationship with their family and community; our relationship with them and with their family; our relationships with other practitioners and partners in the network of connected people supporting them; management relationships that both challenge and support.

This way of working is reflected perfectly in our 'Top 10 Must Dos' and if we ensure that we fulfil the Top 10, then we will find that all the Practice Expectations that follow fall into place.

Whatever your role in children's social work, the practice standards set out clearly what Surrey's children and families have a right to expect from you. Please read them, remember them, and live by them. They're the way we do things around here.

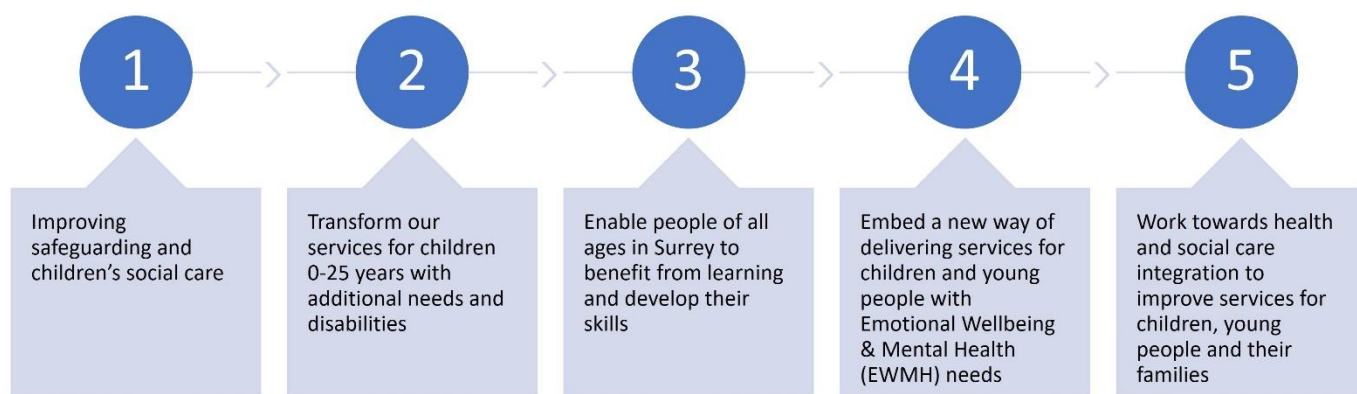
**Rachael Wardell, Executive
Director – Children, Families
& Lifelong Learning**



Children, Families and Lifelong Learning Ambitions and Enablers

In Surrey we root children and families in our hearts and minds because it is our purpose to ensure that children are seen and heard, feel safe and can grow, and everyone benefits from education in Surrey.

Our purpose is to ensure children are seen and heard, feel safe and can grow, and everyone benefits from education in Surrey.



Enablers

Workforce, Data and Systems, Equality, Diversity and Inclusion, Performance, Partnerships and Financial Management



Practice Standards

We have six core practice standards that all those who work in Children, Families and Lifelong Learning should be achieving or supporting others to achieve. If we are not meeting these standards need to improve. How does our practice compare?

1

Children and young people come first, and their needs are considered to ensure that they are safe. Children and young people are spoken to alone and worked with by professionals who have the tools to directly engage with them.

2

All children and young people have a timely, relevant, analytical assessment of their needs reflecting their lived experience and ensuring their voice is heard. The capacity of their parents and carers is assessed, to ensure they can fulfil their responsibilities.

3

All children and young people need connections to help them thrive and to have a sense of belonging. They will be supported through a Family Group Conference or Family Network Meeting to build on strengths, work with their network to develop a plan to help them thrive.

4

Records, (including chronologies, case summaries) are up to date, analytical, well written and where appropriate written to the child. This will enable understanding in significant events; the plan; the purpose of actions or contacts; and what difference this has made.

5

All children and young people have a plan which explains what needs to happen, by when, by whom, what outcomes we are seeking together, how risk is managed and what the contingency plan is. Safety plans will be completed with the child and family.

6

Every child or young person is supported by timely management oversight of the professionals' working with them. Including reflective supervision, quality assurance; measuring progress; and goal setting. The oversight will be clearly recorded.



Direct Work

Direct work includes work we undertake with families to support them and to help them understand and address their needs, helping them to sustain the necessary changes in their lives. Through direct work we build relationships with children and young people. It can assist us to gain a better understanding of the child or young person's world and capture their voice.

Mandatory E-Learning

- ✓ Autism Awareness.
 - ✓ Children's Information Governance.
 - ✓ Working Together to Safeguard Children.
 - ✓ An introduction to Neglect and the GCP2 tool.
 - ✓ Prevent (Home Office).
 - ✓ Young Carer Aware.
 - ✓ Introduction to Special Educational Needs and Disabilities (SEND) in Surrey.
 - ✓ Motivational Interviewing.
 - ✓ Complaints handling and customer relations training.
- ❖ Children, young people, and families are treated with respect. Practitioners respond to telephone calls and messages; they will be on time for meetings and if they are going to be late will tell the person as soon as possible and apologise.
 - ❖ Communication with the child or young person is recorded in a way that reflects their views and can be shared with them.
 - ❖ Practitioners will remember the child or young person's story, and new workers will always be prepared and read the records before meeting the child or young person and their family to understand their history.
 - ❖ Practitioners explain to families and to children and young people their rights to complain and how to do it.
 - ❖ Children and young people are seen alone, in a variety of settings, observed and communicated with according to their age, understanding and development needs.
 - ❖ Direct work sessions are planned, using a range of tools, to support children and young people to express their feelings and discuss difficult topics. Details of sessions are communicated with the child or young person, where possible, so they are aware of what to expect and the session has meaning is purposeful and directly related to the child's plan or situation.
 - ❖ The right settings are available to do direct work so the child/young person can feel safe to talk about their wishes and feelings. There will be time to complete the work so that the child/young person does not feel rushed to express themselves.
- ❖ Every child, young person and family will know who their practitioner is, why they have one, how to contact them, how often they will see them and what their plan is.
 - ❖ Time is spent getting to know a child or young person and their culture, understanding their likes and dislikes, treating them as an individual. This will then provide good grounding to start direct work and build relationships.
 - ❖ Arrangements for the use of translators and interpreters and communication tools to meet any specific sensory or language need will be made.
 - ❖ Consent will be confirmed at every stage of intervention. Children, young people, and families will be clear about what they are consenting to and how their information will be used. Practitioners will be open and honest with the child or young person about any information they may need to share with their parents or professional network if it is felt they are unsafe



Top 10 must do's when working with children and young people

Young people in Surrey who attend Surrey Youth Voice participation groups, developed a list of 'top 10 must do's' for Surrey professionals these are integral to our practice standards.



Top 10 must do's

When working with children and young people



- 1 Relationships:** If we want to, help us to keep in contact and maintain good relationships with our family and friends.
- 2 Honesty:** It's Important that you are always honest with us.
- 3 Reliability:** Follow up on any work you've committed to do, let us know if you need to cancel or are running late and don't make promises you can't guarantee.
- 4 Believe:** Always believe in us and help us to achieve our hopes, dreams and goals.
- 5 Quality:** Spend quality time with us instead of quantity. Get to know us and do activities with us that we enjoy.
- 6 Listen:** We are experts by our own experiences, so please listen to us and keep us at the heart of everything you do.
- 7 Documentation:** Ensure our files and important documents such as ID and EHCP's are kept up to date and are accessible.
- 8 Future:** Take the time to plan our future with us by building our life and independence skills. Acknowledge our achievements, even the little things.
- 9 Individuality:** We are all different, try not to make assumptions of us or our experience. Communicate with us in a way that we understand and adapt your communication styles to meet our personal needs.
- 10 Rights:** Please tell about our rights and entitlements. Article 12 of the Children's Rights Act says; 'every child has the right to say what they think in all matters effecting them, and to have their views taken seriously'.



Children's Single Point of Access and Early Help

Helping families early, by getting help at the right time in the right way can support children and families. Support as an early help partnership is available to build strengths, form relationships and connect families to their communities. Early help in Surrey is provided through a range of services and is relevant to everyone who works in services that support families including the voluntary sector, adult mental health, community health, adult social care, housing and leisure. It is everyone's responsibility to work together in Surrey to promote the welfare and development of children.

Family Information Service and Local Offer

helps to identify services in the community to support children and their families.

[About the Family Information Service - Surrey County Council](#)

[Surrey Local Offer](#)

Early Help Hub

Ensures the needs of families are quickly triaged and allocated to targeted or intensive services or signposted to services in the community to ensure the right support is provided at the right time.

Multi Agency Partnership (MAP)

Triangulates information received from a range of sources, including the child, family and partner agencies, which have been made to the C-SPA as part of a 'Request for Support'. Children's Services, Police, Health and Education make up the core agencies of the MAP who are responsible for deciding the right service to support the needs of the child, young person and family. The MAP service makes evidenced based decisions alongside the Continuum of Support Framework.

Children's Single Point of Access (C-SPA)

Is the umbrella term for the front door to support and provide information and advice for residents, families and those who work with Surrey children and young people. The service is committed to children, young people and their families receiving the right help at the right time. The C-SPA assesses families alongside the Continuum of Support Framework

[4.2 Continuum of Support for children and families living in Surrey | Surrey Safeguarding Children Partnership](#)



Targeted and Intensive Support

Some families may need a co-ordinated response to meet their needs.

- **The Family Centres** work with families in their homes and local communities offering a tailored package of support. They are located in communities where they are more likely to be needed. Each family centre has a different service offer to meet the emerging needs of the children and families in the area they cover. The teams work with the whole family, and the ages of the children will be 0-18, and up to 25 with an additional need and or disability.
- **The Family Support Programme** provides targeted support for families with children and young people. The teams are based in District and Borough Councils and therefore have close links with housing, benefits and wider community support teams. They support whole families where there are interconnect needs, including and not limited to housing, school attendance, domestic abuse, substance misuse and employment support. The teams work closely with all family members, and the ages of the children will be (although not exclusively) aged 5-18 and up to 25 with an additional need and or disability.
- **The Intensive Family Support Service (IFSS)** provides practical support to the whole family, where there are overlapping and interconnected needs across more than one family member, or the family is identified as requiring whole family support which no other services can provide and there is no current statutory support from Children's Services. The service works with children and young people ages 0-18.
- **The Adolescent Service** works with young people ages 11-18 to provide rapid, time limited and intensive support to vulnerable young people in need of extra support. The Adolescent Service will work across targeted, intensive and statutory domains within the continuum of support, with a strong focus on preventing escalation. They will provide intervention where the adolescent is the primary concern, there are multiple and complex needs, and the impact of which will increase their likelihood of entering care or custody or suffering extra-familial harm. The service offers support in a number of ways, including:
 - **The Area Teams** – providing planned mid to longer term targeted, intensive and social work intervention via dedicated teams.
 - **The Central hub** – providing intensive, responsive extra familiar based services that provide central and additional functions across Surrey. This includes Missing, Risk and Intelligence, Intervention Support (contextual), Edge of Care, 16/17 year old Homelessness Prevention
 - **The Youth Offer** – provides community-based youth work services including Child and Young Person Havens mental health support, Engage Custody support, detached and bespoke extra-familial support.
- **The Youth Justice Service** is a multi-disciplinary service supporting children from the age of 10 to 18 who have encountered the criminal justice system. By adopting a Child First approach the service aims to prevent offending, reduce likelihood of recidivism, minimise use of custody and support those who have been harmed.



Practice expectations

- ❖ Children and young people will be listened to, and their wishes and feelings considered throughout the work. Their voices will be clear in every record. Children and young people will be spoken to across early help services. Where it is not possible to speak to them directly (e.g. MAP) other methods and strategies will be utilised to enable a child focused approach.
- ❖ Evidence based tools and approaches will be used to work with families including solution focused approach and motivational interviewing techniques. It is recognised that these approaches empower children and families, build relationships creating better opportunities for improved outcomes that are sustained. Working in this way is in line with the Family Safeguarding Model adopted in Surrey. Young people who are subject to either a child in need or child protection plan, or who are looked after will use the Family Programme and record their direct work, interventions, assessment, analysis and planning within the Family Workbook.
- ❖ Every child and family supported through co-ordinated early help will have a plan that is developed with the child in mind, focused on their needs and intended outcomes. A meeting will be held with the family and partner agencies who are supporting the child at the earliest opportunity. The type of meeting (e.g. Team Around the Family, Child in Need) will be based on the needs of the child.
- ❖ The adolescent service will adopt a team approach to group supervision and reflective practice. This will help to ensure that relationships with families are 'held' by the team and develop a collective approach that will enable the team to respond to families with consistency as practitioners have an existing knowledge of them reducing the likelihood of families having to repeat their stories. The team will use the time to actively reflect, think and consider best approach to complex circumstances and decisions.
- ❖ A family group conference or family network meeting be organised at the earliest opportunity, so that the family can come together to build upon their resilience and create their family plan of support for the child or young person. The purpose of this meeting will be fully explained, and consent gained to contact the support network and the child or young person (who will be invited where appropriate).
- ❖ Networks (with consent) will be contacted, prepared and supported to attend meetings. Their strengths and support needs will be identified and formalised within the family plan. All reasonable efforts will be made to contact those with parental responsibility to progress the referral for a family meeting.
- ❖ The child's/young person's records will be kept up to date and include a clear and concise summary with analysis that identifies risk and harm, chronology that is relevant and closure record completed at the end of the intervention.



Timescales at a glance

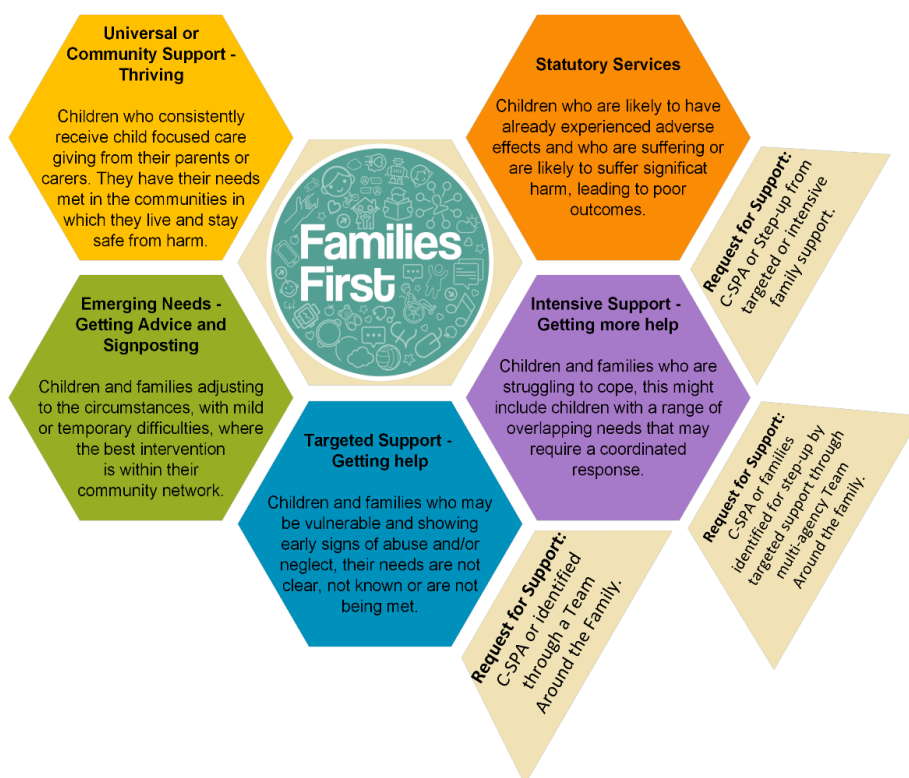
Early Help Hub	<ul style="list-style-type: none"> • Requests for support progressed within 48 hours of allocation to an Early Help Advisor leading to initial decision made. • Children/young people who are or have been missing will be allocated to the relevant team for the completion of a Return Home Interview on the day of notification.
MAP	<ul style="list-style-type: none"> • Red – screening timeframes 4 hours. • Amber – screening time 24 hours within a contact, 48 hours if gone to a MAPE. • Green – screening time 5 working days
Targeted and Intensive Support	<p><u>Family Centres and Family Support Programme</u></p> <ul style="list-style-type: none"> • Initial contact with family within 5 working days of allocation • First visit within 10 working days of allocation • Early Help Assessment within 45 days (calendar days) of allocation • 1st TAF before the conclusion of the early help assessment or no later than 6 weeks <p><u>Intensive Family Support Service</u></p> <ul style="list-style-type: none"> • Referrals progressed within 24 hours • At point of allocation contact to be made with the family within 24 hours • Child to be seen within 5 working days of referral • Frequency of visits will be decided in supervision based on the needs of the child/young person and family. It is anticipated their needs will require frequent visits to complete work and create change, but for most there will be a visit at least every 10 working days • Supervision will take place every 4 weeks • The assessment will be a whole family piece of work and will take no longer than 45 working days • A Team Around the Family approach will be taken. <p><u>Adolescent Service</u></p> <ul style="list-style-type: none"> • Referral progressed within 24 hours • At point of allocation contact to be made with the family within 24 hours • Child to be seen within 5 working days of referral • Frequency of visits will be decided in supervision based on the needs of the child/young person and family. It is anticipated their needs will require frequent visits to complete work and create change, and at minimum there will be a visit at least every 20 working days (or inline with CP/CLA standards if this applies) • Early help/C&F assessment to be completed within 35 working days



- Extra Familial Harm risk assessments should be completed within **15 working days** and include a safer meeting and creating a plan. Safer Plans to be completed at the earliest opportunity and prior to the completion of the assessment.
- 1st TAF *before **the conclusion of the early help assessment or no later than 35 working days***
- Child in need, child protection and child looked after meetings will occur in line with statutory practice standards set out on pages from 18, 22, 28 of this document.
- Review meetings will take place **every 6 weeks (or if looked after inline with looked after standards)**
- Supervision will take place **every 4 weeks**
- When missing the Return Home Interview should take place **within 72 hours** of the child/young person returning home. See [Missing Children Procedure](#)

Youth Justice

- Referral for consideration of an Out of Court Disposal progressed within **48 hours** of the Joint Decision-Making Panel (JDMP) Triage meeting.
- At point of allocation, contact to be made with the child and parent/carer within **48 hours**.
- Prevention & Diversion Assessment (PDAT) to be completed within **20 working days** and returned to the JDMP for a youth justice outcome to be agreed.
- Child/young person will complete **up to 12 weeks** of intervention and will be seen weekly.
- Children/young person who receive statutory Court Orders will have an Asset+ assessment completed.
- Frequency of intervention sessions will be proportionate to the child's/young person's needs alongside being balanced with the requirement to ensure the safety and well-being of the child and ensure public protection.
- Supervision will take place every **4 weeks**.



Youth Homelessness

This section concerns 16 and 17 year olds who are homeless, threatened with homelessness or whose housing lacks safety, security or stability. The young person may have presented or been presented to Surrey Children’s Services or one of the 11 District or Borough Councils in Surrey.

Case Law - [The Southwark Judgement](#)

Government Guidance - [Provision of accommodation for 16 and 17 year olds who may be homeless and/or require accommodation](#)

Policy & Procedure - [Preventing Homelessness in Surrey - Joint Protocol for 16 & 17 year olds](#)

Timescales at a glance

Duty to refer referral	<ul style="list-style-type: none"> • Within 24 hours of consent being given • Surrey’s Youth Homelessness Lead to be alerted to the young person via email at the point of contact. Email address: central.hub@surreycc.gov.uk with ‘homelessness’ in the email subject title
Assessment	<ul style="list-style-type: none"> • C&F assessment completed as soon as possible (by the adolescent service), but no longer than working 10 days from the date of referral • The social worker will notify the relevant housing authority of the outcome of the assessment by email within 3 working days of the assessment being completed
Meetings	<ul style="list-style-type: none"> • Joint meeting with housing on the same day as referral or no longer than 3 working days of the young person presenting as homeless
Support	<ul style="list-style-type: none"> • Advocacy referral to be made on the same day of referral

Practice expectations

- ❖ Young people will be supported in a timely manner and provided with the right support at the right time. This includes access to an advocate and where appropriate mediation services. Surrey’s contracted advocacy Service is Reconstruct and referrals can be made here: [Surrey Advocacy partner portal – Reconstruct UK](#)
- ❖ A family group conference, family network meeting, or team around the family will be organised at the earliest opportunity (with consent and holding the right meeting according to the needs of the child/young person) so that the family can come together to build on their resilience and create their family plan of support for the young person. A referral will also be made to Surrey’s Edge of Care Service, where consent has been obtained.
- ❖ The Options Leaflet - [‘What is Best for Me?’](#) will be provided to the young person at the start of the assessment process and be available for the young person to take away to fully consider their options. It is essential that the young person receives accurate information, fully understands their options and is consulted



regarding the implications of; being accommodation by children's services and what it means to them to be looked after; what may be available to them if they do not wish to become looked after. The young person will also be shown the YouTube video, that accompanies the leaflet, and is available here: [Housing advice for young people - Surrey County Council \(surreycc.gov.uk\)](https://www.surreycc.gov.uk) wish to become looked after.

- ❖ There will be a range of outcomes available to the young person, which could include remain or returning home to family, staying with relatives or trusted adults or accommodation provided by Children's Services where they meet the criteria for Section 20. Where the young person has capacity to do so, they should be supported to make an informed decision about their housing.
- ❖ Where accommodation is required during the assessment, the default for this is under Section 20 of the 1989 Children's Act, unless the young person has already specifically stated otherwise.
- ❖ Young people who do not opt to become 'looked after' will be supported by a child in need plan with an allocated social worker. This plan should set out the services that will be provided to meet their needs. In rare circumstances the young person may be offered accommodation as child in need, or support may include housing services under Part 7 of the 1996 Housing Act. In this situation the young person will continue to have an allocated social worker providing support under a child in need plan.
- ❖ All agencies will work together to support the young person and ensure their needs are met. Housing should be notified of the outcome of the C&F assessment and a joint meeting will be held with all key parties involved. The young person should be supported to join the housing register at the earliest opportunity.
- ❖ Any plans for reunification should be made based on a robust assessment, considering the young person and their network.



Assessments

An assessment will be completed to gather information and to analyse the needs of the child and their family to determine the nature and any risk of harm. Identity and culture will be explored to understand the child and their needs. This should be considered at all stages of intervention.

Assessment Service should utilise the 'Approach to Assessment'

Timescales at a glance

Contacts/referrals	<ul style="list-style-type: none"> Processed within 24 hours At point of allocation contact to be made with the family within 24 hours
Visits	<ul style="list-style-type: none"> All children seen within 5 working days of referral, further frequency to be determined at 10 working day management oversight Visits to be recorded within 48 hours
Assessments (Child and Family or C&F)	<p><u>Assessment Service</u></p> <ul style="list-style-type: none"> Completed within 35 working days where intervention should be proportionate to need. Where there is complexity 10 additional working days can be agreed with management oversight meaning completion by 45 working days A manager will provide an oversight on the records on or before 10 working days to identify next steps, new needs and outcomes <p><u>FST, Adolescents, CWD and CLA</u></p> <ul style="list-style-type: none"> Completed no longer than 45 working days from the point of the referral or decision to start the C&F. Pre-birth assessment to be completed by 24 weeks gestation
Transfer, step down or closure	<ul style="list-style-type: none"> Transfer to family safeguarding to be completed within 10 working days of completion of assessment Step down to targeted or intensive services within 10 working days of either completion of assessment, a Team Around the Family or hand over meeting to consider new step down Closure of the child's records to be completed within 72 hours of completion of assessment with no further action
Chronology and Case Summary	<ul style="list-style-type: none"> Updated within 5 working days post allocation and reviewed prior to closure or transfer

Practice expectations

- ❖ During the initial visit the family will be provided with information on a child and family assessment, complaints and information sharing and, family network meetings. At the visit, consent for information sharing will be obtained and practitioners will seek to gather details of the support network, information on the family's ethnicity, language, religion, and dates of birth.

- ❖ The child will be spoken to alone to obtain their wishes and feelings. Direct work tools will be used to support this work and understand the child's lived experience. All children regardless of age and developmental stage will have their voice captured in assessments. The voice of the unborn baby will be included in pre-birth assessments, and special attention given to make sure their needs are promoted alongside their siblings.
- ❖ Information from the referral will be discussed with parents and carers so that their views can be obtained. A suitable level of professional curiosity will be used to better understand the family circumstances and the child's world.
- ❖ Details for all persons with parental responsibility will be obtained so they can be included in the assessment. It is recognised that information gathered from fathers will improve the understanding of the needs of the child. Consideration will be given as to how to include all household members, including siblings, in the assessment and obtain their consent to further inform assessment.
- ❖ Children and families are part of wider communities and a network of professionals. As part of the assessment, biological and non-biological networks will be explored, and their support identified. Family Network Meetings/Family Group Conferences will be offered to all families.
- ❖ Professionals involved with the child and family will be contacted to gather and share information to inform our understanding of the child and family's strengths and areas of need. Information obtained from the network will be evidenced in the assessment and sources of information will clearly outline fact and professional opinion.
- ❖ Where there are behaviours or actions that place children, siblings, parents, or others in the home at risk, a robust safety plan will be discussed with the family at the first visit. It will be clearly recorded on the child's file and updated when appropriate. If it is discovered that a parent or carer is seeing another child outside of the family, and there are behaviours that would place that child at risk, action will be taken in line with Surrey Safeguarding Children policy. This will apply to all areas of practice.
- ❖ Risk assessment tools will be used to inform and enrich the assessment of the child and their family. These tools can include child exploitation assessments and chronologies.
- ❖ Due consideration will be given to the assessment framework (Framework for Assessment of Children in Need and their Families) within the assessment to ensure information relating to the child's developmental needs, family and environmental factors and parenting capacity are evidenced.
- ❖ Pre-birth assessment guidance and policy will be followed to ensure it is completed within timescales and concludes with a plan to meet the unborn baby's needs prior to birth.
- ❖ Assessments will be analytical in assessing the child's history, needs and safeguarding concerns. Analysis will inform recommendations and outcomes.
- ❖ Assessments will conclude with a plan (including contingency plan) and recommendations. Recommendations will consider the Continuum of Need document and Family Resilience Model to determine the right service to support the child and family. This may include statutory services or early help. Referrals to services take place before the child's records are closed.
- ❖ The assessment will be shared with parents and carers and the child where appropriate. There should be a record on the child's file to confirm that this has been completed. The referrer and professionals who have contributed to the assessment will also be informed of the outcome.
- ❖ Managers will read the assessments and provide an oversight to ensure that the standard of assessment is of good quality and recommendations are appropriate for the child and family.



Working with Children in Need

An assessment has been completed and recommendations made that the child and family would benefit from a child in need service to promote their safety and wellbeing. The assessment has used the Continuum of Support framework to evidence services are required and the family agree that they need more support. This is a voluntary service that requires consent from the child and parents/carers. The Family Programme will be utilised to support direct work, interventions, assessment, analysis and planning. [Family Safeguarding Model and Workbook](#)

Timescales at a glance

Child in need visits	<ul style="list-style-type: none"> • Children will be seen at point of transfer within 5 working days and or as directed by the manager depending on assessed risks and needs. This will form part of a joint handover with the previous practitioner. • Children will be seen by their allocated social worker at least once every 4 weeks (or more frequently if there is a greater need), this should include seeing the child in different environments, alone and seeing their bedroom.
Child in need meetings	<ul style="list-style-type: none"> • Within 10 working days of the completion of the assessment • Within 10 working days of being stepped down from a child protection plan • Review meetings held at least every 12 weeks (intervals agreed with the manager)
Recording	<ul style="list-style-type: none"> • Visits to children must be recorded within 48 hours of the child being seen • Child in need minutes and updated plan to be distributed to parents and professional network within 10 working days of the meeting • The Family Programme Workbook will be the recording tool utilised for all children with a Child in Need plan and shared with parents/children (age appropriate) at various intervals.

Practice expectations

- ❖ The first child in need meeting will usually be chaired by a team manager or advanced social worker.
- ❖ If a child is no longer subject to a child protection plan but would benefit from support to promote their health, safety and development they can be stepped down to a child in need plan.
- ❖ Visits to children should be frequent and based on level of need so that relationships are built with the child and family and support is provided in a timely way. Empowering them to work with practitioners and partner agencies creating meaningful help that leads to change and improved outcomes.
- ❖ Child in need meetings and plans will include family, support networks and professionals involved with the child and family. The plan will outline the roles and responsibilities of individuals with clear and measurable actions. Actions will evidence how it will help to improve outcomes for the child.



- ❖ Child in need meetings will be held in venues as agreed in partnership with the child and family, where they can easily attend, and all parties feel able to present their views and be listened to. The child will be encouraged and supported to attend where appropriate.
- ❖ The plan and minutes of the meeting will be recorded on the child's file and sent out to the child (where appropriate), family and partner agencies. There will be a record on the child's file confirming the plan has been shared. If there are disagreements about information based on facts in the minutes a discussion will be held, and amendments made where appropriate.

The child in need minutes will cover:

- Reason for the meeting
- Updates since the last meeting
- Progress of the plan
- What needs to be addressed and the impact
- Outcomes to be achieved and timescales
- Actions and person responsible
- Contingency plan
- Summary of the main points of the meeting and decisions made
- Date the next meeting is held

- ❖ Supervision will drive forward the child in need plan and it will be discussed in each supervision session. If there is drift, delay or increased concern for the child this will be prioritised, and creative solutions discussed that will support the child and family. If it is felt that progress is not being made, the team manager may chair the child in need meeting to have greater oversight and input.
- ❖ When reviewing the child in need plan, if there is evidence that sufficient and sustained progress has been made, considering will be given to stepping the child and family down to Early Help Services (including targeted support). This will be discussed with the child and family and professional network.

Motivational interviewing will be used through listening, engaging and empowering children, young people and families. Conversations will be respectful and purposeful to support lasting change.

Permanency for the child will be assessed at the earliest possible opportunity. Family network meetings and family group conferences will be organised with the child and family network to see what their plan would be if the parent or carer was unable to look after the child.



Strategy Discussion and Section 47 Investigation

A strategy meeting or discussion takes place when there are concerns a child may be suffering or likely to suffer significant harm. A multi-agency decision will be made as to whether a section 47 enquiry is needed to investigate and create an interim plan to safeguard the child.

Timescales at a glance

Strategy discussion	<ul style="list-style-type: none"> • Within 3 working days of the referral / or within 3 working days of decision being made to hold one • Within 3 hours for serious physical injury or serious neglect • Within 72 hours when the child / young person missing 3 times or more within 90 days, or more than 24 hours (if the child is looked after there could be an intervention meeting instead of the strategy meeting)
Child protection medicals take place	<ul style="list-style-type: none"> • Suspected non accidental injury within 24 hours • Chronic neglect within 7 days of referral • Sexual abuse – all to be discussed with Paediatric Consultant on call at Sexual Abuse Referral Centre (SARC)
Section 47 investigation	<ul style="list-style-type: none"> • Concluded within 5 working days of the strategy discussion

Practice expectations

- ❖ The meeting is chaired by a team manager or a senior manager who is aware of the child's history and reason for referral.
- ❖ There is engagement of partner agencies in the strategy meeting so that information is shared to safeguard the child.
- ❖ Information is evaluated and analysed. A decision is made as to whether a section 47 investigation is needed and whether there should be a joint agency investigation.
- ❖ There is a plan created in the meeting with agreed actions, who is responsible and includes timescales. This should include a consideration for gaining consent to progress a referral to Family Group Conference. The child's safety and wellbeing is paramount and considered in the plan.
- ❖ The meeting is recorded on the child's file by the chair of the meeting. There should be clear oversight and direction from the manager recorded on the child's record. The record is shared with partners. Safety plans are agreed in the meeting that are shared with parents/carers.
- ❖ The section 47 investigation is led by a qualified and experienced social worker. The voice of the child and enquiries undertaken will inform whether the child continues to be at risk of significant harm and if an initial child protection case conference is required.



- ❖ The child is seen and spoken to alone by the social worker. Each child in the household will be spoken to and considered as part of the investigation. Attempts will be made to communicate with and observe non-verbal children. An accurate record of this interview or observation will be recorded on the child's file.
- ❖ Agencies involved with the child and family will be consulted to create an assessment of what is happening for the child, focusing on risks to the child and strengths within the family. Where the child and family have not resided in Surrey for at least one year, consideration should be given (and recorded if decided against) to complete agency checks with professionals in any previous Local Authority; this extends beyond that of just Children's Services checks.
- ❖ Parents (carers) will be interviewed as part of the investigation and their interactions and relationship with the child observed.
- ❖ The section 47 investigation should be recorded on the child's file and include management oversight.
- ❖ The investigation should conclude with an evidenced based assessment and judgement about the level of risk posed to the child. A multi-agency plan is created at the end of the section 47 investigation that includes how the child is kept safe which is shared with the family and professional network.
- ❖ The outcomes from the investigation, dependent upon the threshold of harm, can be as follows: progressed to initial child protection conference, continue to be supported under a child in need or child protection plan or require a child and family assessment.



Working with children in need of protection

An initial child protection conference will be held when there are concerns a child may be suffering or likely to suffer significant harm. It will normally follow a strategy discussion and section 47 investigation. A review child protection case conference will be held to review the progress of the child protection plan and whether threshold remains to be met, within a set timescale. The Family Programme will be utilised to support direct work, interventions, assessment, analysis and planning. [Family Safeguarding Model and Workbook](#)

Timescales at a glance

Initial child protection case conference	<ul style="list-style-type: none"> • Held within 15 working days of the strategy discussion or notification by another Local Authority that a child who is subject to a child protection plan has permanently moved into the county • Pre-birth conference at 28 – 30 weeks gestation
Review child protection case conference	<ul style="list-style-type: none"> • Held within 10 weeks of the initial conference (must be held within 3 months). Further review conferences to be held at intervals of approximately 5 months (must be held within 6 months). • When a pre-birth conference is held, the first review must be within 20 working days of the child's birth or 10 weeks after the initial conference (whichever is sooner)
Core group meetings	<ul style="list-style-type: none"> • The first meeting within 10 working days of the initial conference, every 6 weeks thereafter • Minutes to be circulated within 15 working days of the meeting
Report to conference	<ul style="list-style-type: none"> • Initial conference – provided to the family and older children at least 2 working days before the conference • Initial conference – provide to the Independent Chair at least 2 working days prior to the conference • Review conference - provided to the family and older children at least 5 working days before the conference • Review conference – provided to the independent chair at least 5 working days before the conference
Visits to see children	<ul style="list-style-type: none"> • The social worker will have face to face contact with each child at least every 10 working days. This applies to each child irrespective of their age



	<ul style="list-style-type: none"> • Where a child is not seen face to face during a visit a further visit should be undertaken until the child is seen (eg. do not wait for the next visit in 10 working days) • A baby (not yet walking) must be seen awake at least every 4 weeks. • A child's bedroom should be seen, and the child seen alone, every visit where possible • During visits appropriate arrangements should be made for use of interpreters, translators and communication tools to meet specific sensory or language needs. • Children made subject to a Care Order and placed with parents should be visited the first week of the order being made and at intervals following this according to Looked after Child or Child Protection Procedures whichever is applicable). • Children in unregulated placements to be visited weekly and this can be alternated with the FSW who is familiar with the child
Recording	<ul style="list-style-type: none"> • Visits to children must be recorded within 48 hours of the child being seen • The Family Programme Workbook will be the recording tool utilised for all children with a child protection plan and shared with parents/children (age appropriate) at various intervals.

Practice expectations

- ❖ The conference (initial and review) will consider all children in the household. A report will be written by the social worker and shared with the child and family prior to the conference so that they understand what the concerns are. The individual needs of the child and family will be considered when deciding how to best to share the report, so they are supported and empowered to engage. The team manager will approve and provide oversight to the report. The report should include a suggested plan for the child.
- ❖ The purpose and process of the child protection case conference will be explained to the child and family in advance of the meeting and the leaflet 'Information for Parents/Carers & Families about Child Protection Conferences'.
- ❖ The child will be invited to contribute to the conference and an advocate offered to all children aged 12 or over. Direct participation of the child will be supported where appropriate, and their voice included within the social work report.
- ❖ Partner agencies will provide a report which they should have shared with the family prior to the conference, attend the conference and share information about the child and family.
- ❖ The conference will be chaired by an Independent Chair. At the end of the meeting a decision will be made, in discussion with the child, family and agencies involved as to whether the child is likely to or has suffered significant harm, and if so, make a child protection plan.
- ❖ For children with a child protection plan visits will be frequent. Visits will be planned, purposeful and seek to safeguard the child and meet the expectations of the child protection plan. Direct work will be completed with the child (related to the child's plan) where age appropriate and their wishes and feelings clearly recorded in their records.
- ❖ The child's family and network are valued and important to the success of any child protection plan. All attempts will be made to engage those important to the child, including fathers and family members the child may not live with. The child's



plan will provide a balance between support and protection ensuring that children and families are empowered to be part of the journey that leads to meaningful and sustained change.

- ❖ After the conference the child's plan will be recorded on the child's records. If a child protection plan is not made, either child in need or early help plan will be recorded.
- ❖ If a child becomes subject to a child protection plan, the child's plan will be reviewed frequently at core group meetings. This meeting will involve the child, (where age and developmentally appropriate) family, and partner agencies. The team manager will chair the first core group meeting where considered necessary. It is the shared responsibility of the core group members to support the family to keep the child safe. A core group that works well together is the most effective means of contributing to keep a child safe. The child's social worker will lead the core group meetings.
- ❖ Minutes of the core group meeting will be recorded on the child's file and sent out to the child (age appropriate), family and partner agencies. Good practice would ensure the child protection plan is clearly reviewed in the minutes so that progress and challenges can be assessed and addressed where needed.
- ❖ If the child protection plan is not progressing this will be communicated to the team manager and independent chair who will escalate where needed in a timely way. This could involve bringing the date of the core group meeting or review child protection case conference forward or considering other options available such as holding a legal gateway meeting or starting the public law outline.
- ❖ Supervision will drive forward the child protection plan and it will be discussed in each supervision session. Any concerns about drift, delay or increased concern for the child will be prioritised and creative solutions discussed that will support the child and family.



Children with a disability

A child will be allocated to work with the children with disability service when their needs are such that they meet the criteria of the service.

“Practice Guide: CWD Assessment Expectations.”

[CWD Assessment Practice Guide](#)

Timescales at a glance

<p>Child and Family Assessments</p>	<ul style="list-style-type: none"> • A Child & Family Assessment to be completed within 45 working days • There is no longer a requirement to update annually. Updates will be initiated when there are changes of circumstances as identified; <ul style="list-style-type: none"> ○ There is a safeguarding event. ○ There is history of safeguarding concerns and there is a need for a pre-birth assessment. ○ A significant health event occurs that will impact long term care needs. ○ A prolonged period of increased behavioural challenges are being experienced. ○ Concern there is a risk of family breakdown. ○ Placement instability. ○ Consideration of the impact of a child/young person’s progression of development, communication, or support needs is required due to significant length of time since the last updated assessment. ○ As identified within supervision in response to the circumstances of the child/young person.
<p>Disability Resource Panel (See terms of reference for more guidance)</p>	<ul style="list-style-type: none"> • When to submit requests: <ul style="list-style-type: none"> ○ New packages; increasing packages; joint funding; Residential Short Breaks; accommodation/foster placements; or OT adaptations exceeding the Disability Facilities Grant. • For continuation of support packages: <ul style="list-style-type: none"> ○ All children will be brought to DRP 2 months prior to their birthday for review. • If in receipt of support less than £75 k per annum, every 2 years for renewed financial authority.
<p>Visits Children in need</p>	<p><u>Social Work Teams</u></p> <ul style="list-style-type: none"> • Child to be seen alone, where appropriate, at every visit to provide opportunity for their voice and lived experience to be understood through suitable direct work/interactions.



<p>Children who are subject to a child protection plan or looked after</p>	<ul style="list-style-type: none"> • Visiting Frequency - every 4 weeks if there are safeguarding concerns and/or concerns about parental capacity. Otherwise, 8 or 12 weeks depending on complexity. To be agreed in supervision and clearly recorded. • Child In Need reviews held at least every 3 months as standard, but up to 6 months when held by the team for over 12 months AND support is stable, no overnight respite, and no safeguarding concerns. To be agreed in supervision, in line with the child's care plan, and clearly recorded. <p><u>Family Support / Review Team</u></p> <ul style="list-style-type: none"> • Child to be seen, alone as appropriate, every 6 months to gain their wishes, feelings, and views. • Child's plan and care package to be reviewed with the network every 6 months/annually proportionate to need • Practice Standards for children on a Child Protection Plan or Looked After to be followed. • 1 unannounced visit per year for looked after children/young people with additional needs living in a residential placement • Young people will be referred to the Care Leavers service in line with the eligibility criteria set out on page 31 of this document.
<p>Transitions</p>	<ul style="list-style-type: none"> • Children and young people's continuing care referrals made at any time from birth • Initial referral at 14 years old via the Transition referral form. From this point, the Transitions team should attend reviews for the young person. • Adult continuing health care referrals must be made at 16 years old to aid preparation and planning for adulthood. This will allow for assessments to be completed and agreements reached in principle so that the new arrangements are in place when the young person turns 18. • Transitions team take financial responsibility from 18 years old.

Practice expectations

- ❖ Work with children and young people with a disability can be completed through early help, a child in need plan, a child protection plan or a looked after child plan.
- ❖ Consideration will be given as to how best to complete direct work with the child to engage them according to their abilities ensuring their wishes, feelings and lived experiences are heard. This might be done through formal direct work tools or through informal direct work such as observations of behaviours, vocalisations, gestures, and interactions.
- ❖ Practitioners will be knowledgeable about how best to communicate with children and young people. Records will clearly explain how best to support children and young people with limited verbal communication. Intervention and support may evolve as the child grows and communicates.
- ❖ Records will be non-judgemental regarding the child's abilities, behaviours, and demeanour. They will focus on what the child is able to do, rather than what they cannot do. Consideration of past involvement and balanced reflection on the meaning of certain behaviours will inform ongoing assessment and analysis.

- ❖ Assessing children with disabilities: Formal assessments will be completed at point of first referral and updated at agreed points thereafter. It includes, but not limited to, when there are safeguarding concerns; changes in circumstances; and progression of development for the child/young person. Supervision and review processes will capture rationale for initiating updated assessments.
- ❖ All children's health care needs will be considered and referrals to continuing care made as part of a holistic approach.
- ❖ The Child in Need review/Child Looked After processes will cover current and/or changing circumstances for the child/young person, consider any aspects related to safeguarding, consider the impact and outcomes of current interventions/support, scaffold ongoing practitioner analysis, and inform Disability Resource Panel decision making.
- ❖ Where there is a Child Protection (CP) plan and/or safeguarding concerns or concerns about parental capacity, the Family Programme will be utilised to support direct work, interventions, assessment, analysis, and planning. Practice expectations for child protection interventions will be adhered to (page 22-24) and child in need (page 18-19) to promote the child's safety and wellbeing as necessary. The Family Programme Workbook will be the recording tool and shared with parents/children (age appropriate) at various intervals.
- ❖ Disability Resource Panel: For children supported within the Children with Disability Service, decisions will be recorded on the child's records and shared with the family. If there are changes to the support package, rationale will be transparent and clearly explained to parents/carers.
- ❖ For young people aged 16+ who have restrictions placed upon them that may deprive them of their liberty, a Legal Gateway Meeting (LGM) should be convened to consider an application for Deprivation of Liberty Safeguards (DOLs).



Looked after children

A child will become looked after when the child's parents or the people who have parental responsibility for the child are unable to look after them in a temporary or permanent capacity.

Timescales at a glance

<p>Looked after child review meeting</p>	<ul style="list-style-type: none"> • Social worker to notify the independent reviewing unit of child coming into care within 2 working days (irunit.duty@surreycc.gov.uk) • Independent Chair to be allocated within 5 working days • First looked after child review meeting to be held within 20 working days of the child becoming looked after • Second review meeting to be held 3 months from the first meeting. And then every 6 months or more often if needed • For unregulated and unassessed placements, reviews should be held every 3 months until the child moved to a regulated placement. • When change of home occurs, that is unplanned, review meeting to take place within 4 weeks
<p>Report to looked after child review</p>	<ul style="list-style-type: none"> • 5 working days before the looked after child review
<p>Initial Care plan</p>	<ul style="list-style-type: none"> • Either prior to the 1st placement or within 10 working days of the placement starting
<p>Updating Care Plan</p>	<ul style="list-style-type: none"> • The care plan should be updated 5 working days before the looked after child meeting • Within 10 working days, following the looked after review outcomes being recorded, the social worker should update the care plan in relation to any changes
<p>Health assessments</p>	<ul style="list-style-type: none"> • Initial health assessment before the child's first looked after child review • Review for under 5's every 6 months, over 5's every 12 months • Dental assessments to be completed annually • Eye tests to be completed every 2 years • Strength and Difficulties Questionnaires to be completed annually
<p>Personal education plan meeting (PEP)</p>	<ul style="list-style-type: none"> • Initiated as part of the care plan before the child becomes looked after or within 10 working days from a child becoming looked after (emergency placement), and be available for the first Looked After Review meeting and all subsequent Looked After Reviews. PEP'S will be held with the child's educational establishment every term.



Visits to see the child	<ul style="list-style-type: none"> • First visit to take place within 1 week of any new home • Subsequent visits at least every 6 weeks • For a child in a long-term home visits can be reduced to every 26 weeks (agreed within a child's looked after child review meeting) • Visits to the child's home should occur at least every other visit and the child's sleeping arrangements assessed
Placement planning meeting	<ul style="list-style-type: none"> • Within 5 working days of a child's placement having begun • Placement plan to be written within 10 working days

Practice expectations

- ❖ Once a child becomes looked after, the child's social worker will act on behalf of the Local Authority as a corporate parent to the child. As such, the practitioner will work in partnership with other professionals and the child's family to ensure that the child always receives appropriate care and that their needs are met.
- ❖ The child will be provided details of the Complaints Procedure and Reconstruct Advocacy Service as well as their allocated social worker's contact details as soon as possible but no later than during their first visit to the child.
- ❖ Prior to child becoming looked after, the practitioner will ensure that an up-to-date assessment of the child's needs is in place (Child & Family Assessment). This assessment will inform the process of finding the child a home, to ensure that child is placed with carers who are able to meet their needs. Keeping a child with their brothers and sisters will always be considered when finding a home for them.
- ❖ When a child moves in with a foster carer or into a residential home, the practitioner will share all the relevant information (including family history and a view on the vulnerability of the child) with the carers so that they can develop a good understanding of child's needs from the beginning. This information will be written in the placement plan.
- ❖ The child's needs in relation to race, ethnicity, language, communication, disability, gender, and sexuality will always be considered when the local authority is care planning for the child.
- ❖ Arrangements for a child to have family time with parents and other significant family members will be made at the time of the child coming into our care and regularly reviewed. Consideration will always be given to family time being in the best interest of the child.
- ❖ A review report will be written for the child before their looked after child review assessing their needs and progress in their home. Alongside this report a care plan will be written for the child that incorporates the progress and sets new targets. After the review the care plan will be updated to include any new actions agreed within the meeting. The care plan will address all areas of child's needs and identify how those needs will be met. The child will be given a paper copy of their care plan. All partner agencies will contribute so that the child has one, clear plan.
- ❖ At the point of the second review meeting there should be a plan in place for the child's permanency.
- ❖ For looked after children, it can be appropriate to have an independent visitor where the child would like to have one and it is deemed in their best interest. The Independent Visitor is a volunteer and their role is to befriend, visit and advise the child.
- ❖ A life journey letter will be written for all children and life story work will be completed with them at a time that is appropriate for them.



- ❖ Depending on the age of the child they will be encouraged to participate in their care planning, review process and planning for their review meetings. They will be given the opportunity to speak to their independent chair on their own. Parents will be encouraged to participate in the review process and their views recorded.
- ❖ Any significant changes to a child's care plan or legal status should not be made without the practitioner or manager discussing it at a review or consulting with an independent chair outside the review process. The practitioner will work closely with the independent chair if there are any changes to child's circumstances.
- ❖ If a home (placement) is at risk of breaking down a Placement Stability Meeting will be held and chaired by the team manager to either stabilise the child's living situation or consider whether the child needs to move to another home.
- ❖ When the care plan indicates that the child will remain in care until adulthood (18), then practitioners will work alongside the child's professional network to ensure independence planning is started at 14 prior to Pathway Planning starting at 16 to ensure all children can be ready for independence at 18.
- ❖ At all times, reunification should be considered as part of care-planning.



Care Leavers Service

The aim of the service is to support care leavers so that they can live successful independent lives. Each care leaver will reach that point at a different age. It is expected that support for care leavers will taper away, in recognition of their growing maturity and independence.

[Surrey Care Leavers Local Offer \(surreycc.gov.uk\)](http://surreycc.gov.uk)

Timescales at a glance

Pathway plans	<ul style="list-style-type: none"> Completed every 6 months or updated within 28 days if significant changes occur (e.g. change in accommodation, education or employment) Pathway plan to be signed off by team managers within 1 week
Visits	<ul style="list-style-type: none"> At least every 8 weeks for young people open to the care leavers service up to the age of 21 and then 12 weekly post 21 and should be face to face. Visit to be recorded on LCS within 3 working days of the visit taking place. At least 4 visits a year when the young person is 16 and 17 and attend the PEP and Looked After Child Review. Once a PA is allocated a joint visit with the social worker should be arranged within 4 weeks
Personal Education Plan	<ul style="list-style-type: none"> Until the end of the academic year following the young person's 18th birthday
Risk assessments	<ul style="list-style-type: none"> Red rag rating: Review every month Amber rag rating: Review every 3 months Green rag rating: Review every 6 months alongside Pathway Plan

Practice expectations

- ❖ When a young person meets the criteria for the Care Leavers Service (Leaving Care Act 2000), a personal advisor will be allocated from 16 years old. The personal advisor will work alongside the young person's social worker and network in preparation for when the young person turns 18 years old, at which time the personal advisor will be the allocated worker. [Looked After Children and Care Leavers Service: Social Workers and Personal Adviser Support to Care Leavers between 16 and 18, Who Does What?](#)
- ❖ Once a PA has been allocated a joint visit with the SW to be arranged. The personal advisor will attend looked after child reviews and personal education planning meetings to build a relationship and get to know the young person. They will find out how the young person would like to be contacted. There will be a flexible approach to supporting the young person.
- ❖ A transfer meeting will take place one month prior to the care leavers 18th birthday which is chaired by the care leaver's team manager or senior practitioner. This transfer meeting gives the opportunity to discuss any specific needs and the tasks to be completed between the social worker and PA. The Looked After Child team manager and social worker should also attend this meeting.



- ❖ The pathway plan will be developed with the young person, using their language (written in the 1st person) so that it is a supportive document that speaks to the young person. It will be written with the young person in mind, including the support that has been offered. The pathway plan should include the views of the professional network. It is a legal document and it is important it is completed within timescales.
- ❖ The pathway plan will be shared with the young person and recorded on their file to say that it has been shared directly with them or a copy posted to them.
- ❖ Every young person will be supported to be in some form of education, employment or training. Young people who are not, will be supported additionally by a referral to the education and employment specialist within the care leavers service to have additional support from a work coach and offer of the mentor programme.
- ❖ The young person and all participants should agree with the content in the plan and the team manager will authorise the Pathway Plan once completed by the personal advisor.
- ❖ Young people will be supported to have positive, meaningful relationships in their networks that will enable them to build and develop their independence.
- ❖ Every young person will be provided with the contact details and support service details:
 - Local Offer Website
 - Reconstruct Advocacy Service
 - Complaints and Compliment Service
 - How to access their social care files

These details are found on the last page of the Pathway Plan

'Always get feedback from young people'
(Apprentice feedback)

'My PA texts me before calls sometimes, she/he does give me the option call or a text'

'Don't take the fact that they aren't there as not engaging as I know that's a really big problem, think outside the box don't assume someone hasn't come because they aren't engaging, it might be the person isn't there as they feel they don't need support that week'



Fostering

Fostering practice is governed by various sets of regulations and Statutory Guidance:

- ✓ [The Fostering Services \(England\) Regulations 2011.](#)
- ✓ [The Care Planning, Placement and Case Review Regulations 2010.](#)
- ✓ [Children Act 1989: Fostering Guidance.](#)
- ✓ [Fostering National Minimum Standards 2011.](#)
- ✓ [Private Fostering Statutory Guidance.](#)
- ✓ [Introducing our Foster Carers' Charter \(sharepoint.com\)](#)

Timescales at a glance

<p>Visits to Foster Carers / Recording</p>	<ul style="list-style-type: none"> • Foster carers (both if joint) will be visited <i>at least 6 weekly</i> (can vary according to needs). The carers' children and the fostered children are seen at least every 3 months. Visits can reduce to 12 weekly where children or young people are settled. • Foster care supervision records should be recorded <i>within 24 hours</i> of the visit. The foster carer should be sent the record and given 1 week to feedback. • When children are seen with foster carers detail of this visit should also be recorded on the child's file. • Foster carers partners (not joint foster carer) should be seen during visits on average every 3 visits
<p>Assessments:</p> <ul style="list-style-type: none"> - Fostering (including family and friends foster carers) - Supported Lodgings - Special Guardianship (SGO) - Private Fostering 	<ul style="list-style-type: none"> • General Fostering Assessments completed <i>within 4-6 months</i> of application. • Assessments for temporary approval under Regulation 24 <i>within 48 hours of the visit</i>, with a full fostering assessment being considered by the fostering panel <i>within 16 weeks of temporary approval</i>. An 8-week extension can be granted under certain circumstances. • Special Guardianship assessments completed usually <i>within 12 weeks</i>. • Supported Lodgings assessments completed <i>within 20 weeks</i>. • Upon receipt of notification of a child or young person in a private fostering arrangement, an initial visit will take place <i>within 1 week</i> and a full assessment completed in 42 days. Support visits will take place 6 weekly for the first year and then 12 weekly thereafter until the arrangement ends.



Matching and Risk Assessment

- Risk assessment and matching forms for each child or young person placed with a general foster carer completed ***within the first 24 hours*** of placement and shared with the carers and the child or young person's social worker.

Practice expectations

- ❖ Surrey has developed a Foster Carer Charter in partnership with foster carers and will strive to ensure the fostering service and all professionals supporting the children or young people in their care fulfil the commitments and standards in the Charter. We will publish each year how we are doing against the Charter commitments.
- ❖ Prospective carers will be assessed by a qualified social worker and supported through regular home visits, support groups, training, and supervision. Assessments will be carried out in an open, thorough, and reflective way to explore their ability to meet the needs of children in care. Work with foster carers will be in partnership developing the service, policies, procedures, and training.
- ❖ The fostering service will strive to recruit and retain good quality foster carers so that there can be high quality fostering placements available to children and young people. Foster carers will receive support from an allocated supervising social worker and their skill and expertise will be valued equally to other colleagues in the network around the child or young person. They will have a Personal Development Plan and be provided with appropriate training opportunities.
- ❖ Children and young people will be given the opportunity to grow up in a safe, secure, and nurturing environment. This enables them to maintain links to their family, friends, community, and education. Siblings will be placed together wherever appropriate and possible. Children or young people with disabilities and/or complex needs will have their individual needs met via a specialist disability service offering full time foster homes and short breaks, with carers who receive specialist training and support.
- ❖ Foster carers will be given full information about each child or young person to enable them to care safely and enable children and young people to fulfil their potential. They will be enabled to make decisions about the children and young people they care for wherever possible, and any decision-making actions needed outside of the foster carers' authority will be done by the practitioner and manager within 72 hours.
- ❖ Supervising social workers will offer high quality, child or young person focussed supervision, drawing on knowledge and understanding of trauma and attachment. Meetings and reviews will take place to ensure that children and young people's needs are met, and that their carers are well-supported to provide the best possible care. Foster carers will be included in meetings where planning and decision-making affects them or the children or young people they care for (where deemed appropriate). They will be treated fairly and with respect and kept informed.
- ❖ The fostering service will work in partnership with social work teams to promote stability and provide support to prevent additional moves for children and young people. Needs will be identified at an early stage, so that additional support can be put in place to create stability. Permanency will be promoted with foster carers where possible and Special Guardianship Orders will be considered an alternative



to long-term fostering. If they wish, young people will be given the opportunity to 'Stay Put' with their foster carers once they are 18 and foster carers are supported to enable this to happen.

- ❖ The supervising social worker will arrange periodic joint visits with the child or young person's social worker and should attend the child or young person's review to enhance partnership working, stability, support, and information sharing. If the social worker cannot attend it is good practice to provide a report to the review.
- ❖ Children and young people's feedback will be recorded regularly in foster carer supervision records, foster carer's household reviews and permanency assessments. Children and young people living with Surrey fosters carers will have savings put aside for them. Welcome packs and story sacks will be provided for children and young people when moving to a new foster carer or supported lodgings carer. Children and young people will be moved in a sensitive way with appropriate bags for their belongings.
- ❖ Allegations made against people working with children or young people will be progressed in a timely and appropriate way, working with the LADO service. The progress of the investigation will be shared with the foster carer unless this impacts on the welfare of the child or young person and/or the integrity of the investigation. Foster carers will be offered independent support until the conclusion of the process.
- ❖ Surrey's fostering panels will be independently chaired and held in accordance with fostering regulations. Panel members will have a range of knowledge and experience with professional and/or personal experience of fostering.
- ❖ Foster carers' records will be kept up to date and there will be regular oversight by managers that focusses on keeping children and young people safe and supporting carers to offer good quality care.
- ❖ A private fostering service will be offered to support the needs of children and young people privately fostered. Work will take place with local communities and partners to increase the awareness of the need to refer children and young people who are living in a private fostering arrangement.



Adoption

Timescales at a glance

<p>Involvement with the child (before final Placement Order)</p>	<ul style="list-style-type: none"> • Consider whether the child or young person should or could be placed for early permanence under Regulation 25a at any stage of their journey. • Ensure triple track plan is discussed at the 1st Permanency Planning Meeting and at each subsequent review thereafter. • Discuss the possibility that adoption may become the care plan at permanency planning meetings and at the 2nd Looked After Child Review. • Ensure that the initial health assessment is presented to Adoption Medical Advisor for consideration in case adoption agreed as the care plan. This needs to happen prior to the Child Adoption Decision being requested. • Finalise the Child's Permanence Report within one week of the last expert or kinship assessment being filed. • Book adoption planning meeting once Child's Permanency Report is completed but prior to Child Adoption Decision Pack being sent to legal for their independent advice to the agency decision maker. • Agency decision maker provides their Child Adoption Decision within 7 working days of receipt of paperwork relating to the request for adoption.
<p>Involvement with the child (after Placement Order granted)</p>	<ul style="list-style-type: none"> • The child or young person's social worker will work closely with Adoption South East to identify the right family for the child or young person. • Joint reports to be prepared and presented to Adoption Panel for consideration as to whether the choice of family is right for this child or young person two weeks prior. • The child or young person will be placed with prospective adopters under adoption agency regulations. • The child or young person is seen every week for the first 4 weeks. • By the 2nd looked after child review a decision is made as to whether adopters can lodge their adoption application with the court. This can be made 10 weeks after placement. • Draft later life letters and life story books should be created and discussed with prospective adopters by the 1st review, completed versions provided by 10 days after celebration hearing.
<p>Involvement of adopters</p>	<ul style="list-style-type: none"> • Adoption South East is responsible for recruitment, assessment and identifying the right family for the child or young person. They will assess and offer support throughout the child or young person's childhood.



Practice expectations

- ❖ A good quality assessment of the child or young person's needs and their relationships with their families will be completed. This will include an assessment of the relationship with their siblings to inform potential placement with siblings, contact and post adoption support plans.
- ❖ Plans for adoption will clearly identify permanence timescales and will be reviewed. It will include the adoption plan for the child or young person, and their therapeutic needs. Plans will be timely to avoid any delay for the child or young person and ensure that permanency is considered at the earliest opportunity.
- ❖ The Child's Permanence Report should provide the rationale for the Agency Decision and Placement Order, including the rationale that adoption is in the child's best interest and that no other legal arrangement would do.
- ❖ When a Placement Order is in place, the Child's Permanence Report can be shared with possible adoptive families as part of the information sharing process. This should then inform the assessment as to whether they are the right family for the child. This should include the full summary from the medical advisor.
- ❖ Families should comment upon and add to the sections about themselves wherever possible within the Child's Permanence Record, and where there is disagreement between professionals and the first family their narrative and comments should be permitted to stand alongside the other narrative.
- ❖ The Child's Permanence Record, along with the life story book and later years letter are the tools which we entrust to adoptive families to help them raise the child with a coherent narrative of their life to date.
- ❖ The Child's Permanence Report forms part of the child's adoption file which can be requested by the child once they are 18 years old. Practitioners should be mindful that the child is the most important reader of all.
- ❖ Life story work will be completed in a timely and meaningful way to ensure that children or young people who are adopted have a clear sense of who they are and the circumstances that led to their adoption. Later life letters will begin at the earliest stage and form a working draft. Children or young people will receive letters that include contributions from the practitioners who can inform them about decisions made in court.
- ❖ It is good practice that children's or young people's records are not closed to the Looked After Child Service until the life story and later life letters are completed and provided to the adopters.



Role of the Independent Chair

- The child will be at the centre of the Independent Chair's role.
- The Independent Chair will ensure that the child or young person knows who they are and how to contact the between reviews.
- The Independent Chair will be satisfied that plans for permanency have been identified by the second looked after child review.
- The Independent Chair will ensure that the child's wishes and feelings are given full consideration.
- Reviews will have the necessary information available and right professionals and family members attending.
- The Independent Chair will decide whether a review needs to be convened when a significant event occurs in a child's life.
- The Independent Chair will be responsible for chairing child protection and looked after child reviews. Where appropriate, there will be consistency of chairperson if a child on a child protection plan becomes looked after.

- Plans will be outcome focused and have a timescale attached that meets the child's needs and a named person to implement actions.
- The outline child protection plan and child protection plan following a Review Child Protection Case Conference will be completed or updated within **1 working day / 24 hour of a conference** by the Independent Chair.
- The outcomes following a Looked After Review will be completed by the Independent Chair within **5 working days** after the completion of the review process.
- The Independent Chair will monitor and review the progress of the child's plan, including holding midway review meetings, which may include visiting the child or family as part of the midway review process.
- The Independent Chair will highlight and share good practice. They will challenge practitioners where there is a drift in care planning and use alerts as part of the escalation and resolution process. Work completed with the quality assured by the Independent Chair.
- The Independent Chair will liaise with professionals involved in working with the child, including the child's guardian in line with the Cafcass protocol.



“You want everyone's voice to be heard, without it nobody would have a say in anything! I'm so glad it exists here, and it is valued”



Recording

A good child's record should show what is happening and has happened for a child at any given time. The records should tell the story of a family and include concise summaries along the way so that the analysis, recommendations, and plan is clear. Children do become adults, and good records will help them to understand what has happened to them. Information should be written and stored in line with information sharing protocols and the principles of the Data Protection Act 2018.

1

A record is the tool to support plans and making decisions for children. Assessments and plans are shared with the child and their family and their views in response to the assessment are clearly recorded.

2

Children's records are analytical, well written and timely, so that everyone can understand significant events, what the plan is, the purpose of visits and interventions and what difference this has made for the child.

3

Records are kept up to date, with significant events recorded within one working day of the event occurring. In emergency or significant risk situations recording will be done on the same day or early next morning and include a plan to manage the risk.

4

The chronology is started for every child subject to an assessment, completed before the assessment is approved by a manager, and kept up to date by the allocated worker.

5

Reports and children's records are written simply in plain language, free from acronyms and jargon so that they can be understood by the child and their family.

6

The child's voice is clearly evidenced in all recording, including assessments, visits, direct work and plans. For young children, or those who are not verbal records will outline observations so that their voice is understood.



Management of Practice

Managers are committed to providing high quality supervision, support, and challenge to our staff to achieve and deliver best practice to the children and families we serve.

Timescales at a glance

Personal Supervision	<ul style="list-style-type: none"> Newly qualified social workers: weekly for the first 6 weeks and fortnightly until 6 months, thereafter it will be a minimum of monthly Qualified social workers and other practitioners' supervision will be a minimum of monthly. The frequency of supervision will also depend upon the complexity of the work Supervision Agreement will be agreed, signed, and reviewed annually
Management Oversight	<ul style="list-style-type: none"> At any point of allocation to a social worker or practitioner At point of significant event Following conversations that take place outside of supervision so there is a clear audit trail of decision making Following completion of key interventions: such as Child and Family Assessment, Section 47 Enquiries
Child's supervision	<ul style="list-style-type: none"> Children subject to Assessment, there will be regular management oversight during the assessment process (for assessment service; at point of allocation and at day 10 of assessment). Once a child has been open for 20 days, they will have supervision and thereafter every 4 weeks Children subject to Child In Need, Child Protection, within Care Proceedings and Looked After Children until their permanence plan is made: Minimum of every 4 weeks For Looked After Children, supervision would be recorded at a minimum every 8 weeks Children with disabilities: at least every 3 months (or every 6 months if assessed as appropriate). If there are safeguarding concerns for a plan of child in need, child protection or are looked after revert to the timescales above Care leavers service: at least every 12 weeks Fostering service: MO/Supervision at least every 3 months

Practice expectations

- ❖ **The number of children allocated to a worker is proportionate – that enable practitioners to build relationships:** we know that quality practice can be achieved when practitioners have the time, resources and capacity to connect with children and families. By ensuring that work is allocated to suitably trained and qualified staff, with the necessary skills and capacity to undertake the task.
- ❖ **Supervision – that will support and develop practitioners to perform to the best of their ability:** we will provide regular supervision, that will be held in a safe and supportive space to enable manager and practitioner to discuss their wellbeing, health and safety, professional development, reflect on practice and



quality of work. All supervision is recorded and available to both parties in respect of professional supervision, relevant sections of which are recorded on the child's file.

- ❖ **Children will be at the centre of all that we do:** children's supervision will be child centred, reflective and evidence impact of intervention and review of actions. There will be clear direction from point of allocation through to any transfers or closure. Actions will have timescales that are reviewed and measurable outcomes to ensure that children are safeguarded, and their needs are supported and progressed in a timely manner.
- ❖ **Developing and evolving our practice to ensure that it continues to meet our professional standards:** managers will invest in staff's professional development to ensure they keep up to date with best practice and can continually develop. When allocating children to practitioners managers will be aware of practitioners experience, identify any essential training and developmental needs and ensure there is access to the right training to support their work. The impact of training will be reviewed through discussions in supervision, observations of practice and annual appraisals.
- ❖ **Managers will work in partnership with agencies to safeguard and promote the welfare of Surrey children:** managers recognise that safeguarding children is everybody's responsibility. Managers will promote and ensure that staff are working in partnership with agencies to work collaboratively from assessments and planning to delivering services that effectively support children. We will share and communicate learning from our partnership to continuously improve and develop our services.



Surrey Children's Services

Practice Standards
September 2024



SURREY
COUNTY COUNCIL