

Management Oversight in Children's Social Care

- 1.0 In order to provide high quality social care support to children and families, practitioners need to be provided with to support and oversight from qualified and experienced managers and leaders within our service. Management oversight performs a number of key functions.
 - 1.1 It provides support and safety for practitioners, helping them make good decisions about what needs children have and how we manage and mitigate risk where this is present.
 - 1.2 It provides an opportunity to reflect on plans and decisions for children, creating a shared narrative around the child's circumstances and on decision making.
 - 1.3 It creates a record on children's files as to what decisions were made, and why they were made.
 - 1.4 It locates decision making and responsibility in the right space, in line with local authority management decision making arrangements.
- 2.0 This document sets out expectations around how management decision making will operate in Gloucestershire. It describes where you will see evidence of management oversight in the child's records, and when and at what level this oversight should be recorded. It aims to create consistency and clarity across the organisation. The document should be read in conjunction with the LA decision making matrix. There is overlap between the two documents, but this guidance is focused on ensuring that practitioners and managers are clear about when and where decisions making and management oversight should be recorded on the case file.
- 3.0 Gloucestershire's Anchor Principals provide additional guidance around how managers should record and analyse the child's situation, and set this out in a form which is clear and impactful. These are summarised at **appendix 1** below.

Key: DCS (Director of Children's Servies); SD (Service Director Safeguarding and Care); AD (Assistant Director); DCP (Director of Commissiong and Partnerships); HoS (Head of Service); GM (Group Manager); SM (Service Manager); SW (social worker); TM (team manager); Snr FSW) senior family support worker in early help)



| Decision | Level of manager | Recorded where? | Comments |
|--|------------------------------|-----------------|--|
| | | | |
| | | Front | : Door |
| | | | |
| Sign off a contact | DTM and TM FD | LL Forms | Recorded on the contact form. |
| Sign off a referral progressing to assessment. | DTM and TM FD Locality TM | LL MO casenote | Referral recommendation is made by FD TM Locality TM also signs off the referral with more detail around allocation and actions, including visiting. This TM oversight should also be added as a MO case note. |
| Call a strategy discussion | TM FD | LL Forms | If a new referral, recorded in the referral record. |



| Decision | Level of manager | Recorded where? | Comments |
|---|---------------------------|-----------------|--|
| Acceptance of contact (EH front door) | DTM and TM | LL Forms | Recorded on the contact form with outline of actions to be taken |
| Sign off a contact recommendation (EH front door) | DTM and TM | LL Forms | Rationale recorded in the contact and starting an early help episode |
| | | Targeted | Early Help |
| Allocation (following contact from FD) | ТМ | LL MO casenote | Case note added with clear next step actions. Duty action outlined if required Assessment initiated - all in TM analysis through allocation email. |
| Acceptance of step down from SC | TM | LL MO casenote | Transfer form. Allocation case note, with clear next steps (as above). |
| Risk assessment | TM/Snr FSW (line manager) | LL Forms | Initial risk indicator form and safety plan completed. Manager signs form before upload to documents Case note - risk principals when risk is escalating |



| Decision | Level of manager | Recorded where? | Comments |
|--------------------------|------------------|-----------------|---|
| | | LL MO casenote | For high risk, case note added highlighting escalation to service manager |
| High Risk discussion | Service manager | | If Initial risk indicator form returns a high score, or risks escalate throughout intervention, a high-risk discussion takes place between the TM and SM, service manager records outcome in case notes |
| Agreement for step up | TM | LL MO casenote | Case note - management oversight. Step up transfer form. SC TM adds outcome from transfer to the form. |
| | | Children and | Family Teams |
| Single Assessments | TM | LL Forms | Within the assessment – management oversight section. This is then copied into a MO case note. |
| | | LL MO casenote | |



| Decision | Level of manager | Recorded where? | Comments |
|--------------------------------------|----------------------|-----------------|--|
| Request for a Strategy Discussion | TM/GM | LL MO casenote | Added as a MO case note. For 2 nd and subsequent CP plans, the repeat plan form questions should be answered. |
| Outcome of S47 enquiry | TM | LL MO casenote | Recorded on S47 form and copied into a MO case note. |
| Decision to proceed to ICPC | TM | LL Forms | This will be recorded as an outcome from the S47 as indicated above. |
| Entry to care | TM GM AD SD | LL MO casenote | P1 form completed in advance of LGP and ATC panel – signed off by TM and GM. ATC panel decision – decision in the P1 form and copied into a case note. LGP decision – minutes recorded in documents at present. Outcome summarised in a MO case note. For out of panel decision, AD to record a case note. |



| Decision | Level of manager | Recorded where? | Comments |
|---|------------------|------------------|---|
| | (| Children in care | and care leavers |
| Agree a residential home | GM and AD | LL MO casenote | GM provides rationale for decision, recorded in MO case note. AD agree search for residential home – recorded in MO case note. Funding for agreed placement agreed at daily sign off meeting, agreed by SD and Director of Commissioning. |
| Agree an unregistered home | SD | LL MO casenote | Decision is made at daily sign off meeting – SD to add case note outlining rationale. Unregulated provision form to be completed on LL and signed off by TM, GM, AD. Ongoing monitoring of placements takes place via unregistered panel. |
| Sign off a high cost placement. | SD DCP | LL MO casenote | Agreed at daily sign off meeting. |
| Agree a child on a care order returns to live with parents. | AD | LL MO casenote | Placement with parents form completed in LL. MO case note added, |



| Decision | Level of manager | Recorded where? | Comments |
|--|------------------|---------------------------------------|--|
| Sign off a final court care plan. | GM | Word form in docs tab LL MO casenote | |
| | GM AD | | Move to the same type of placement is agreed by the GM Move to a residential, supported lodgings or supported accommodation agreed by the AD, via a P1. |
| Agree an unregistered home | SD DCS | LL MO casenote | Initial decision made by SD or DCS – MO case note outlines rationale. LL form completed outlining details of arrangements. Placement to be monitored via fortnightly unregistered panel. |
| Monitoring unregistered placements | | LL Forms | Placements to be monitored via fortnightly unregistered panel. |



| Decision | Level of manager | Recorded where? | Comments | | |
|----------------------------|---------------------------|-----------------------------|---|--|--|
| | | LL MO casenote | | | |
| Placement out of county | DCS | Word form in docs tab | | | |
| | All children | | | | |
| Sign off of assessment | TM/Snr FSW (line manager) | LL Forms | MO in the assessment | | |
| Sign off of plan | TM/Snr (line manager) | LL Forms | MO in the Plan | | |
| Step up/step down panel | TM early help TM CSC | LL Forms | Step in step out form. | | |
| Escalation | Service Manager/ HoS | LL MO casenote | Case note with rationale. Service manager records discussion with HoS. HoS adds case note of outcome. | | |



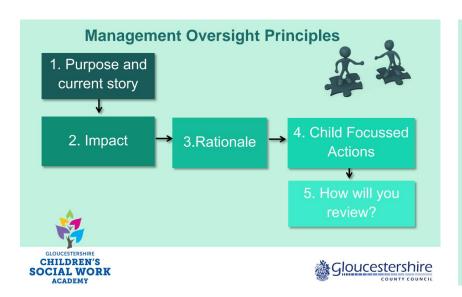
| Decision | Level of manager | Recorded where? | Comments |
|---|-----------------------|-----------------------------------|---|
| Practice Evaluation undertaken | ТМ | LL MO casenote | TM adds case note reflecting the outcome and actions to be taken. |
| Formal supervision | TM/Snr (line manager) | LL MO casenote | Case note- management oversight supervision heading. |
| Reflective conversations outside of supervision | TM/Snr (line manager) | LL MO casenote | MO case note (LL) N.B. case note reflective discussion (in EHM) |
| Significant events (e.g. child missing, | TM GM AD | LL MO casenote | Recorded in MO case note. |
| Reflective peer group supervision (monthly, led by AP) | AP | AP case direction case note | Recorded in AP case direction case note. |
| Case tracking at key points in the child's journey (e.g. 9 month CiN or CPPs; pre-proceedings, pre-birth panel) | TM GM | LL MO casenote | Case tracking form, copied into a MO case note. |



| Decision | Level of manager | Recorded where? | Comments |
|-----------------------------------|------------------|-----------------|--|
| | | LL Forms | |
| Practice Evaluation undertaken | TM | LL MO casenote | TM adds a case note reflecting on outcome and actions – reviewed weekly until actions completed. |
| Inadequate Practice Evaluation | GM AD | LL MO casenote | GM adds a MO case note reflecting on the PE, and outlining actions required. reviewed weekly until actions completed. AD also adds MO. |
| Escalations | TM GM | LL MO casenote | Progress and resolution pathway form (PRP) completed in LL forms. Case notes added to outline actions needed/completed. Level of oversight linked to level of escalation. Informal escalations recoded in MO case note. |
| Complaints | | LL MO casenote | Manager who responds to the complaint adds case note as MO. |



Appendix 1 – management oversight anchor principles



Building Quality Management Oversight

- 1. The reason for management oversight is identified and the child's current situation is clearly explained
- 2. The impact on the child of this situation is considered, including protective factors, immediate risks and long term consequences.
- 3. There is an explanation for decision making which is based on a clearly defined threshold.
 This considers the likelihood, significance and imminence of harm to the child.
- 4. This analysis leads to specific actions based on what needs to change for the child and these actions have realistic timescales.
- 5. There is evidence of how this management direction will be reviewed



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