



# Somerset County Council Children's Social Care

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Child's Journey Framework:  
Decision Making, Workflow and Case  
Management Guidance

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## 1 Introduction

The purpose of this document is to provide an overview of the case management, workflow and transfer arrangements within Children's Social Care (CSC) from the point of first contact to closure of a case, ensuring seamless transitions. It helps professionals understand expectations of one another.

It should be read in conjunction with other CSC policy documents including the relevant chapters on the Somerset Procedures Manual (Tri-x); references are provided in the body of this document. In particular, it should be used alongside the Somerset Practice Framework, which sets out the broad practice principles for working with children and families in Somerset.

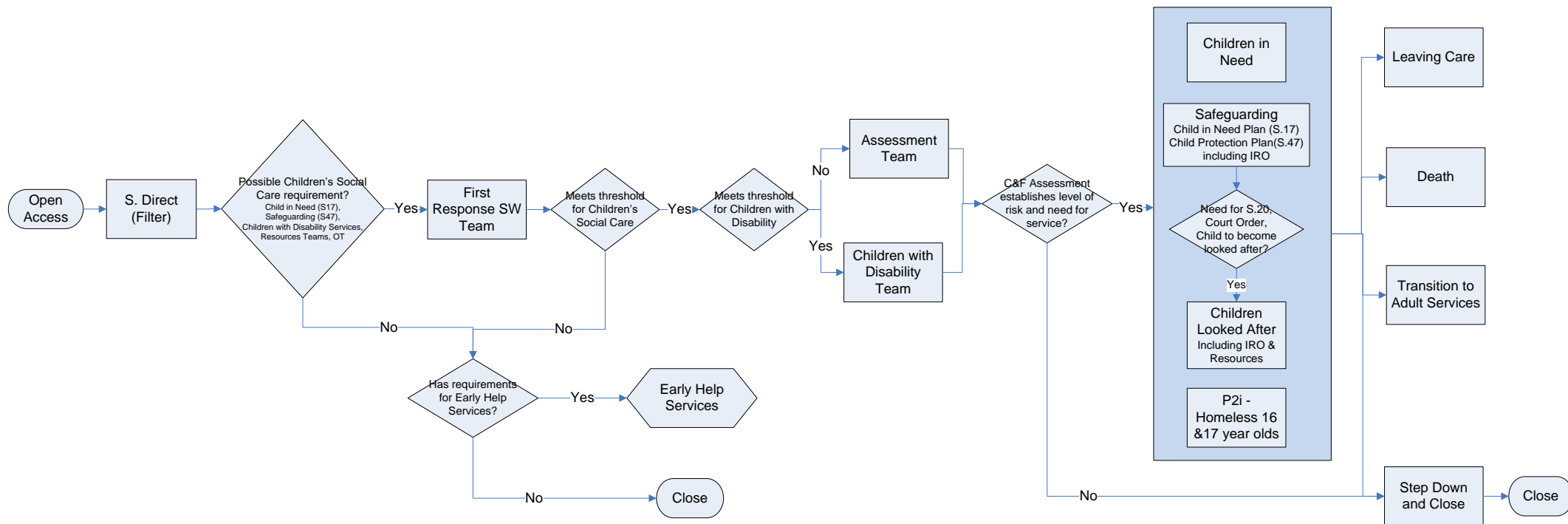
## 2 Principles

- A child focused approach should be taken to every decision. The child's views, wishes and feelings should be listened to, respected, and acted upon where possible and safe to do so.
- Understanding the child's needs, to ensure the best outcome for each child is at the centre of the Somerset CSC systems and processes.
- Interventions change in response to a child's needs with practitioners moving in and out of their lives; it is essential to ensure that all professionals work seamlessly and share information and work together in a timely manner to support and safeguard children.
- Building trusting working relationships with partner agencies, to work collaboratively so that consistent and appropriate support is provided to children and their families to meet their needs. Where there is conflict between the needs of the child and their parents/ carers, decisions should be made in the child's best interests.
- We will work to eliminate discrimination and promote equality of opportunity for all children.
- Monitoring, evaluation and improvement in service provision is based on evidence and is a continuous process.

### 3 High Level – Casework Process

#### 3.1 High Level Process Map

Children’s Social Care, Child’s Journey Framework, High Level Process Map, version 0.10



### 3.2 Service Description – related information and guidance

Detailed descriptions of the standards expected in respect of social care practice can be found in the Somerset CSC Practice Standard document via [Somerset Procedures Manual](#)

For a summary chart of 'Authorisation, Chairing and Decision Making Levels' see Appendix B.

For a 'list of Agency Decision Makers, Designated Managers and Nominated Officers' see the Somerset Document Manual, (Tri.x), section 6.1.

[List of Agency Decision Makers, Designated Managers and Nominated Officers \(proceduresonline.com\)](#)

### 3.3 Transfer Principles and Process

Cases are managed in line with the Child's Journey Framework and in a timely way that meets the statutory requirements.

Records should be updated within the timescales in the table below:

Table of Case Note recording to be completed within the following timescales:	
• Where there is any immediate safeguarding concerns	Immediately
• A Child Looked After or subject to a Child Protection Plan with no immediate safeguarding needs, including statutory visits	Within three working days <sup>1</sup>
• A Child in Need with no immediate safeguarding needs	Within three working days <sup>2</sup>
• Child Protection Conference minutes and outcomes • Child looked after review minutes and actions. • <i>Note: Team Manager (TM) to agree the actions and return to Independent Reviewing Officer (IRO) for finalised version to be completed within 20 working days.</i>	Within five working days

<sup>1</sup> Note: Where a worker is not at work on the next working day then case notes will need to be completed on the same day.

<sup>2</sup> Note: Where a worker is not at work during the next 3 working days then case notes will need to be completed on the same day.

All cases:

- Case summaries to be updated at least monthly, and more frequently if there are significant changes in the child's circumstances.
- Chronologies to be reviewed and updated at least monthly.

Process for transferring case between teams:

- Please follow the link below for detailed description of Children and families [Case Transfer Process](#)

## 4 Initial Contacts and New Referrals

### 4.1 Somerset Direct, First Response and Emergency Duty Team

- 4.1.1 Somerset Direct is the first point of contact, by phone or e-mail, for members of the public and professionals working in partner agencies who may require support or advice from Children's Services.

Somerset Direct: **0300 123 2224**

Somerset Direct Call advisors are available:

08:30 – 17:30 Monday to Friday

Closed on Saturday and Sunday

In the event that the a service is required out of these hours a telephone answering service provides the contact details of the Emergency Duty Team.

The Somerset Direct call centre works closely with the Family Front Door (comprising First Response and Early Help Hub) which is the front door team for Somerset Children's Social Care services

**4.1.2** The **First Response team** is available 08:30 to 17:00 Monday to Thursday and until 16:30 on Friday, and is co-located with the Police Safeguarding Coordination unit and the Somerset Partnership & Taunton and Somerset NHS Foundation Trusts safeguarding team at the Police centre in Bridgwater.

A Social Worker from First Response is co-located with Somerset Direct Call Advisors. Their primary role is to support Call Advisors and ensure that families and friends are offered timely advice and signposting.

#### **4.1.3 Early Help Hub**

The Early Help Hub is co-located with Somerset Direct and triage Early Help Assessments (EHA) that are submitted at level 3 for support from the Family Intervention Service.

#### **4.1.4 Emergency Duty Team**

The Emergency Duty Team (EDT) is an out-of-hours service which responds to emergency referrals to Children's Social Care when Somerset Direct is not available. These referrals should be where it has been identified that children are suffering or at risk of suffering significant harm. The EDT makes decisions and coordinates services appropriate to the safety and welfare needs of children and young people; this is regardless of whether or not the case is new or is currently open and active to Childrens Social Care.

Where there are immediate concerns with regards to a child's safety at home and it is assessed that they may need to be removed from the situation the Duty Social Worker will contact the on-call Senior Manager to establish permission for an emergency placement. See section 6.2 Child Protection.

The case information is documented on LCS as a case note by the EDT worker.

If a strategy meeting is required on a child/young person that is already open to CSC, the EDT Social Worker will complete this action and reassign the relevant actions to the allocated Social Worker and update the case notes also alerting the Team Manager.

If a child/young person is not known to CSC, the EDT Social Worker will complete the steps identified above and open a contact and complete the appropriate actions. This includes assigning a C and F assessment to the area assessment team or re-assigning a contact record to First Response for further information to be obtained in order to assess whether an assessment is required.

## 4.2 Referral Routes

### 4.2.1 Electronic Referrals

#### EHA

The EHA form is a referral form to request involvement from the appropriate Early Help services, Family Intervention Service, Young Carers and Childrens Social Care based on the identified needs.

Professionals are required to provide their assessment of the level of need when completing an EHA form referring to the [Effective Support Document](#) and EHA guidance. Referrals at Level 3 'Complex' Service will be logged on EHM by Somerset Direct and sent to the Early Help Hub for triage for the Family Intervention Service. All of these referrals are triaged by a Team Manager from First Response embedded with the Hub team.

Referrals at Level 4 'Acute' Children's Social Care will be assessed by First Response.

Once an EHA form is received the Somerset Direct call advisor will update LCS with the information obtained within the EHA form and create a contact. The contact will then be submitted into the SDC&YPT tray on LCS, which is reviewed by a First Response Team Manager and then allocated to a Social Worker.

It is important that consent is obtained from parents/carers before an EHA is submitted, other than where gaining consent would place the child at risk of harm. The rationale for bypassing consent would need to be provided.

For further information see:



- The Early Health Assessment Form and Professional Guidance documents, link: [EHA Guidance](#)
- Effective Support for Children and Families in Somerset and consent documents, link: [Effective Support Document](#)

#### Agencies who do not complete an EHA (i.e. SWAST (South West Ambulance Service) & 111):

The above agencies do not complete an EHA when making a referrals to CSC; they instead submit their own agency's reporting form outlining the concerns. These referrals are triaged by a team manager in First Response before being logged onto the databases to ensure they are entered onto the correct systems in line with level of need.

#### Police referrals:

When the police submit a request for involvement to CSC, they are required to provide a rationale as to why they are referring to CSC and provide the police incident report and DASH. A Team Manager in First Response will triage these requests to establish whether they need to be sent to the Early Help Hub, First Response or advise the police around referring to another service outside CSC.

#### Family and Friends Referrals:

When a call is received from a family member or friend and the matter being discussed is not an immediate safeguarding issue, the call advisor will continue to take the call and liaise with the Social Worker based at Somerset Direct who will offer real time advice. If the caller is requesting to speak directly to a Social Worker or the matter requires Social Worker oversight, the call will be transferred from the call advisor. The Social Worker will then determine whether this needs to be logged on LCS as a contact record due to complexity. If so, the contact record will be created by the call advisor who took the initial call and transferred to the Social Worker's LCS tray.

#### Member of the public:

If a call is received by a member of the public, whether or not they wish to remain anonymous, the call is transferred to the duty back up worker in First Response. The duty backup worker will establish more information from the caller and determine if the matter needs to be logged on LCS for further enquiries to be completed with parents/carers. If it does, the Social Worker will email the call advisor who took the initial call and request that they log a

contact. This will then be reassigned to the SDC&YPT tray in LCS to ensure that there is management oversight.

Both the Early Help Hub and First Response Team have consultation lines, where designated safeguarding leads can discuss a case on an anonymous basis to establish what further actions are required. If during this discussion it is established that the matter is immediate safeguarding, the call will be transferred to Somerset Direct to follow the safeguarding procedures and for initial checks to be completed. The consultation line worker is based within First Response and would highlight the case to the duty worker.

Within one working day of contacts being received by First Response, or within five days of receipt by the Early Help Hub, they must be logged, written up and a decision made by a Social Worker (or Early Help Coordinator for the Early Help Hub) about the type of response required and threshold.

A **contact** becomes a **referral** where:

- A further working day is required to complete enquiries to establish whether an assessment is required
- The Social Worker at First Response has assessed that it meets threshold for a social work assessment (C and F)
- A case will need be discussed in MASH
- A strategy meeting is being convened.
- An other action is being request by the local office. i.e. attend step in meeting, information request

#### 4.2.2 Where there is a possible safeguarding concern

Where the call advisor identifies a possible safeguarding concern, the call is transferred to the First Response duty Social Worker who will obtain further information and advise on what actions are required. The call advisor will complete the contact record from the information they obtained and reassign this to the SDC&YPT tray on LCS.

First Response duty Social Worker will liaise with the duty Team Manager in First Response and agree what action is required. If it is assessed that the child/young person is at risk of significant harm a strategy meeting will be convened.

The Duty Social Worker will complete the strategy request form which includes a list of attendees and liaise with the area assessment Team Manager. Business Support will invite all professionals to the strategy meeting at the agreed time which will be chaired by a Team Manager or Advanced Practitioner in First Response.

If a professional is making an immediate safeguarding referral, they will still be required to submit an EHA.

First Response may use the [Multi-Agency Safeguarding Hub \(MASH\)](#)<sup>3</sup> meeting to help inform and investigate the level of risk and determine any actions to protect the child. Where it is felt that further information is required to determine if a strategy discussion is required, and where practitioners are not able to speak directly to parents or are not able to share information without multi agency consultation due to potential safeguarding matters, a MASH discussion will be held. If through obtaining further information it is apparent that a strategy meeting is required, this will be arranged outside the MASH meeting to ensure the professionals who know that child are present including the area assessment team for planning purposes.

Such professional judgements and practise will be informed by Somerset's 'Effective Support for Children and Families in Somerset' Document and Working Together 2018. If no strategy discussion is needed the Social Worker will continue to work on the contact.

If there are immediate safeguarding concerns the objective is to have this process collated and sent to the appropriate area assessment team within a 3 hour period

#### 4.2.3 Contacts in respect of open cases

If a call adviser receives a call or an EHA on an open case LCS will be checked to establish the status. This call will be transferred to the appropriate area office or EHA sent to the allocated worker and business support. If additional information is given to the call adviser during the phone

call, this will be recorded as a case note and LCS will trigger a case note alert to the allocated Social Worker.

Once agreement has been reached the contact or referral will be authorised by a manager with one of the below outcomes:

1. No further action
2. No further action- step down to early help for consideration of service delivery
3. C and F assessment
4. Strategy discussion
5. Other action

#### 4.2.4 Step Up to Children's Social Care (CSC)

- **From Family Intervention Service:**

The Family Intervention Service (FIS) can request to 'step up' cases where they believe that threshold has been met for a statutory service. These cases will be discussed at the weekly Transfer allocations Meeting (TAM) attended by FIS and Team Managers from the local office assessment and safeguarding teams, unless imminent risk requires an immediate response in which case a manager to manager contact with the local assessment team will be made outside the TAM.

Where FIS are 'stepping up' a case, in agreement with CSC and with the consent of the family, the worker must follow the 'step up' process within EHM to LCS, update and include the most recent Early Help Assessment (EHA), including a chronology and any Risk Assessment(s) or complete an Early Help Assessment and send it to the local area CSC team.

- **From Adopt South West**

Weekly meetings take place between the Team Managers in First Response and Adopt South West. The Team Manager for Adopt South West will present children which their service has rated as RED and where the family is at risk of breakdown. Through discussions if it is felt that a Social Worker should attend a 'step in' meeting, the Team Manager at First Response will request that a contact is logged by Somerset Direct and then reassigned to the appropriate assessment team as another action task.

### 4.3 Outcomes

The First Response social work team determine the level of intervention required for a family, in conjunction with referrers, families and other professionals, as appropriate. This decision is referenced against the **Working Together 2018** and the **Effective Support for Children and Families in Somerset** document, link: [Effective Support Document](#)

If there is a requirement for Children Social Care Services intervention the referral is directed to the appropriate team to undertake an assessment of need including:

- i. Assessment Team - If there is a possible Safeguarding (Child Protection) requirement the referral is made directly to the Assessment Team. Go to page 10.
- ii. Assessment Team - Where there are no identified safeguarding concerns but there is a possible Child in Need (CiN) requirement that meets threshold for CSC, the referral is sent to the Assessment Team tray in the relevant Area Office. Go to section 5.
- iii. Referrals from other Local Authorities are logged and managed in the same way as other referrals. The referral will be sent to the Assessment Team tray in the relevant Area Office.
- iv. Other Children's Social Care Team - If a referral to another service within Children's Social Care is required these will be processed and recorded on LCS, these include:
  - Children with Disability Services, Fieldwork Services as per i and ii above
  - Children with Disability Services, (Occupational Therapy, Short Break are, Somerset Supporters) which are processed by Somerset Direct and sent directly to the responsible team
  - Pathways to Independence (P2I)
  - Resources Team including: Adoption and post adoption support, Foster Care and Special guardianship support services
  - Request for information
  - Another Local Authority requesting welfare visit
  - Legal report required e.g. Section 7 or Section 37
  - Access to records

- LADO – if an allegation is made against a member of staff or professional working with a child an Allegations Reporting Form (ARF) needs to be completed. Somerset Direct will open a contact on LCS for the adult and reassign to the LADO work tray
- v. Early Help - If there is a requirement for early help support, the First Response Social Work Team will signpost to the appropriate service and record the action on LCS. This includes referrals to the Family Intervention service, which will be stepped down on LCS to EHM for consideration of service delivery
- vi. No further action from Children’s Social Care - If the Social Worker assesses that threshold for Children’s Social Care involvement has not been met and there are no other requirements for Early Help or Universal Services the contact is then closed

The referrer must be informed of the outcome of the EHA submitted and the parent/carer.

## 5 Assessments, Child in Need and Child Protection

### 5.1 Allocation of cases:

Cases will be allocated by the Assessment Team Manager. Upon receipt of the referral the Team Manager will decide on the response time for the case based on the level of need. A management oversight case note will be added to the child’s record detailing the actions required and timescales for completion.

Team Managers will allocate new referrals within one working day (5 working days for CWD Early Support and FIS Teams); where this is not possible then managers will record a case note outlining plans for allocation and support and oversight proportionate to the risk and need.

For urgent referrals, where an initial strategy meeting is required as the child is deemed to be suffering, or is likely to suffer significant harm, the strategy meeting should be held on the same day. Where there is a need for an emergency placement outside the family the Social Worker and their Team Manager will seek the authorisation of the Deputy Director, Children and Families or a Head of Service via the relevant Operations Manager. The child

must then be presented at the next available Legal Gateway Panel or for a young person over the age of 16, the 16+ Panel.

## 5.2 Re-referrals

### 5.2.1 Assessment Teams

- Where a case has been open to the area assessment team within three months of a new contact (EHA) being submitted to Somerset Direct, it will be allocated to the relevant area assessment team to review and agree further action.
- Somerset Direct will input the contact onto LCS and re-assign to the Assessment Team tray on LCS.
- Team Manager to review the contact and assign to Social Worker.
- The contact will need to be completed and authorised within **1 working day** or progressed to referral to complete within **2 working days**.
- Once the Social Worker has made contact with the family and relevant professionals, the reason for suggested outcomes box will be completed and sent to a manager for authorisation.
- If the manager disagrees with the outcome from the Social Worker, a Management Overview will be provided in the reason for suggested outcome box and sent back to the Social Worker.
- Once agreement has been reached the contact or referral will be authorised by a manager with one of the below outcomes:
  - No further action
  - No further action- step down to early help
  - C and F assessment
  - Strategy discussion
  - Other action

### 5.2.2 Family Safeguarding and Wider Safeguarding Teams

- Full Practice Guidance for the Family Safeguarding (and Wider Safeguarding) model can be found via the following link: [\(ADD LINK\)](#)
- Where a case has been open to an area safeguarding team within three months of a new contact (EHA) being submitted to Somerset Direct, it will be allocated to the relevant Safeguarding Team to review and agree further actions.

- Somerset Direct will input the contact onto LCS and re-assign to the Team Manager on LCS.
- Team Manager will review the contact and assign to the appropriate Social Worker.
- The contact will need to be completed and authorised within **1 working day** or progressed to referral to complete within **2 working days**.
- Once the Social Worker has made contact with the family and relevant professionals, the reason for suggested outcomes box will be completed and sent to the manager for authorisation.
- If the manager disagrees with the outcome from the Social Worker, a Management Overview will be provided in the reason for suggested outcome box and sent back to the Social Worker.
- Once agreement has been reached the contact or referral will be authorised by a manager with one of the below outcomes:
  - No further action
  - No further action- step down to early help
  - C and F assessment
  - Strategy discussion
  - Other action

The area Assessment Teams will undertake a Child and Family (C&F) Assessment on all new referrals for assessment. The exception to this is when the referral is subsequently found to contain inaccurate information which suggests that there is not a need for an assessment e.g. the address of the child is inaccurate and they do not live within the county. In this circumstance, the assessment can be cancelled. A clear management oversight case note should be added to LCS indicating the reason for the cancellation.

C&F assessments should be proportionate to the child's needs and the complexity of their circumstances. The C and F assessment should be completed within a maximum of 45 days and at the point of conclusion, reach a decision on the next steps. The Social Worker and the Team Manager will agree the timescale for completion of the C& F assessment based on the initial information and analysis and the timeframe in which the child must be seen.

In the vast majority of cases, and as a default position, the initial timescale should be set at 10 working days and should be proportionate to need. The



timescale must be clearly recorded in case notes, including the rationale. The Social Worker and team manager can agree an extension beyond the initial timescale, up to a maximum of 45 days, if the Social Worker is able to evidence that more time is needed to complete the assessment.

Requirements for more a more extensive assessment may include:

- When the situation is complex and additional information gathering is required to reach a conclusion.
- Where the child has a disability and is the subject of an assessment in the Children with Disabilities Team and additional specialist assessments may be required.
- Where there is an identified risk of Child Exploitation (sexual or criminal).
- Where there are identified vulnerabilities due to factors such as missing.
- Where the child is the subject of a Section 47 enquiry and an Initial Child Protection Conference (ICPC) is convened.
- Where the child becomes looked after.
- Where there are care proceedings and placement/ permanence planning is required

Each child's assessment should reflect their level of need and their current circumstances.

Please refer to 'Local guidance - Assessments' for further information, link: [Assessments \(proceduresonline.com\)](https://proceduresonline.com/assessments)

The Social Worker should refer to Somerset's Effective Support for Children and Families guidance to ensure that the assessed need matches the level of intervention

### 5.3 Cases transferring from the Assessment Team

Upon completion of an assessment, there are a number of possible outcomes:

- i. No further action – when the case will close. It should be unusual for a case to close with no ongoing support from any agency.
- ii. Step-down – the case should transfer to a lead professional within early help services.
- iii. Case remains open:

- Short term, time-limited intervention under a Child In Need plan - case may remain with the assessment team. If one or more of the hidden harm factors is present (domestic abuse, drug and alcohol misuse or domestic violence) workers from the Family Safeguarding Team may offer advise to support the intervention.
  - Child In Need (CIN) or Child Protection (CP) plan required – the case will transfer to either the Family Safeguarding Team or the Wider Safeguarding Team at the point of initial CIN meeting or Initial CP Conference (ICPC). The reports for these meetings are completed by the assessment team worker. Both the existing and new Social Worker should attend the meeting and the receiving Team Manager.
- iv. Transfer of casework is agreed via the weekly transfer allocation meetings held by the area Management Team.
- v. Child becomes looked after – transfer to the Children Looked After Team
- If the case is before the court then it should transfer at the initial court hearing unless that hearing is an EPO, when the case transfers at the first subsequent interim care hearing. Both existing and receiving SWs should attend the court hearing at which the case is to transfer.
  - If the child is looked after under S20, the case should transfer at the first CLA review. Both existing and receiving SWs should attend the CLA review.

When Children’s Social Care end involvement the case summary must be updated to include the back up plan should the concerns re-emerge.

#### Exceptions to the rule for Children Looked After (CLA) cases

Where a child is looked after, but there is a plan and a realistic likelihood of the child returning home and/or leaving care within a short timescale (less than 3 months) then the case should remain with the Safeguarding Team.

## 6 Children in Need (CiN)

Following completion of the C&F assessment, where the needs of the child and their family meet statutory Child in Need (CiN) level, the area Assessment Team will develop a Child in Need plan with the family.

- The child should be seen at home a minimum of every 4 weeks. Visiting frequency should be agreed in supervision throughout the assessment and

intervention period and should be frequent enough to support purposeful intervention and positive change.

- The CiN plan will be reviewed at 3 months and subsequently reviewed at 3 monthly intervals.
- Plans should be updated within 5 days of the review.

The aim of the CiN plan is to support the family identify the changes they need to make and to ensure the right support is in place to enable them to meet the child's needs.. Where children are open as CiN for 6 months or more the area Operations Manager should maintain oversight of the intervention and planning alongside the team manager to ensure that the support and plan in place are effective.

When support at CiN level is no longer required a step down meeting can be arranged to ensure ongoing support from early help and/or universal services. For further information on the step-down process follow this link:

<http://sscb.safeguardingsomerset.org.uk/threshold-documents/>

For unborn CiN the [Somerset Pre-birth Protocol](#) should be followed where appropriate.

Children who are subject to a Supervision Order will be open as Children in Need.

## 6.1 Step Down

When a Social Worker has agreed with their line manger that there is no longer a role for CSC involvement and a 'step down' to FIS is appropriate the process is:

1. The case will be discussed in the weekly CSC and Early Help Transfer and Allocation meeting (TAM) and confirmed that it will step-down. There should be an up to date C and F.
2. A step down form is completed on LCS for step down either to FIS or agencies outside children's services
3. A step down meeting is then convened and the plan for the child agreed including the identification of the lead professional.
4. Team Around the Child meetings will then be arranged going forwards.

## 6.2 Child Protection

### 6.2.1 Immediate Protection

Where there is a risk to the life of a child or a likelihood of serious immediate harm, CSC Social Workers, the Police or NSPCC should use their statutory Child Protection powers to act immediately to secure the safety of the Child.' [Working Together to Safeguard Children 2018 \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/67222/Working-Together-to-Safeguard-Children-2018.pdf)

If it is necessary to remove a child from their home, a local authority must, wherever possible and unless a child's safety is otherwise at immediate risk, apply for an Emergency Protection Order (EPO). Police powers to remove a child in an emergency should be used only in exceptional circumstances where there is insufficient time to seek an EPO or for reasons relating to the immediate safety of the child. An EPO, made by the court, gives authority to remove a child and places them under the protection of the applicant.

Planned emergency action will normally take place following an immediate strategy discussion to discuss planned emergency action. Where a single agency has to act immediately a strategy discussion should take place as soon as possible after the emergency action has been taken.

### 6.2.2 In all cases where a Child Protection investigation is undertaken

A strategy discussion should be convened when there is reasonable cause to suspect that a child is suffering, or is likely to suffer significant harm.

The strategy discussion will decide whether enquiries should be made under Section 47 of the Children Act 1989 and what actions are required. Full details can be found at: [Southwest Child Protection Procedures](#)

The outcome of Section 47 enquiries will be reviewed in a follow up strategy discussion organised by CSC involving the relevant professionals to determine if the threshold for significant harm has been reached.

At this stage, consideration should be given to a case consultation with the area Child Protection Co-ordinator, for advice in relation to proposed progression to ICPC and to identify any outstanding areas for assessment or information gathering that would be required for an efficient ICPC.

If the outcome of the Section 47 enquiry is that child protection concerns are substantiated and the child is judged to be suffering, or likely to suffer significant harm, a Child Protection should be convened.

In accordance with Working Together (2018), the maximum time period for a Section 47 enquiry, from the strategy meeting to the date of the initial child protection conference is 15 working days. When a follow up strategy is required, the timescale remains and if an ICPC is to be arranged, this must take place within 15 working days from the initial strategy meeting which initiated the Section 47 Enquiries.

If an ICPC is held, the Social Worker's report should be provided to parents and the conference chair at least 2 working days in advance of the initial conference and a minimum of 5 working days before review conferences to enable any factual errors to be corrected and the family to comment on the content.

The allocated Social Worker and their Team Manager are expected to attend the ICPC. Where the ICPC is held when the case is allocated to an Assessment Team worker the Assessment Team Manager will liaise with the Safeguarding Team Manager to ensure that there is a safeguarding Social Worker identified to attend the conference in addition to the Safeguarding Team Manager. The case will transfer from the assessment team to the safeguarding team at the point of Initial CP conference (ICPC).

If an ICPC is held, the Social Worker's report should be provided to parents and the conference chair at least 2 working days in advance of the initial conference and a minimum of 5 working days before review conferences to enable any factual errors to be corrected and the family to comment on the content.

The allocated Social Worker and their Team Manager are expected to attend the ICPC. Where the ICPC is held when the case is allocated to an Assessment Team worker the Assessment Team Manager will liaise with the Safeguarding Team Manager to ensure that there is a safeguarding Social Worker identified to attend the conference in addition to the Safeguarding Team Manager. The case will transfer from the assessment team to the safeguarding team at the point of Initial CP conference (ICPC).

After the ICPC CP Coordinators will complete a record of the meeting within 5 working days of conference which is distributed by ISU to the family and all relevant agencies.

Prior to transfer of case responsibility from assessment to safeguarding Social Worker - if the newly allocated Social Worker is unable to be introduced to the family prior to or at the ICPC then the departing Social Worker will undertake a home visit with the new Social Worker to introduce them to the Child, Parent/Carer. They will then complete the record of their involvement and transfer details onto the child's file.

### 6.2.3 Decision that a child does not require a Child Protection plan

If the conference decides that a child has not suffered or is not likely to suffer significant harm, then the conference may decide that the child does not require a Child Protection plan. The child may however require services to promote their health or development. In these circumstances, the conference should consider the child's needs and make recommendations for further help and support to assist the family in responding to the child's needs. The conference should consider the provision of a child in need plan or early help services which can be provided with the consent of the family.

### 6.2.4 Decision that a child needs a Child Protection plan

The need for a child protection plan should be considered separately in respect of each child in the family or household.

Where a decision is reached that a child requires a child protection plan, the conference is responsible for recommendations on how agencies, professionals and the family should work together to ensure that the child will be safeguarded from harm in the future. This should enable both professionals and the family to understand exactly what is expected of them and what they can expect of others.

A child protection plan including detailed actions will be produced at the conference.

The initial core group meeting will be held within 10 days of the ICPC where the plan agreed at conference is developed further. The child protection plan will be reviewed at core group meetings between CP conferences, which should take place at least every six weeks. More frequent meetings may be required according to the needs of the child. The Social Worker should record the minutes of the core group onto LCS within 5 working days.

Children who have a child protection plan will have a **minimum** visiting frequency of fortnightly from their Social Worker. Children will be seen by their Social Worker at home at least once a fortnight, and on at least every other visit the Social Worker will also see their bedroom. It may be that the Social Worker will also visit children in addition to these home visits - for example at school, to support the development of their relationship with them.

The first Review CP conference (RCPC) will be held within 3 months and thereafter 6 monthly intervals unless a shorter time frame is agreed at the ICPC.

#### 6.2.5 Public Law Outline and Care Proceedings:

- Recommendations and decisions to take Legal action (including PLO) will be agreed and recorded via the Area Legal Tracking Meetings and the Legal Gateway Panel. When considering legal action it is important to consider what outcomes we are seeking to achieve. If our plan is that children should remain within their immediate or extended family we should consider carefully whether legal proceedings are necessary.
- Where legal threshold is met and where it is considered the most appropriate response, cases will be managed through the PLO process. Where it is unsafe to do so, the intervention of the Court will be sought.
- PLO should be used to provide families with an opportunity to make the required changes whilst recognising the seriousness of the concerns. It should not be viewed as an escalation route into care proceedings but rather an opportunity to avoid care proceedings.
- The first PLO meeting should be completed within 10 working days of the decision.

- It is expected that the PLO process will be a focused intervention which will be completed within twelve weeks; any extension to be agreed by Operations Manager and the Legal Gateway Panel.
- It is the expectation that within PLO any outstanding assessments will be completed, all family and friends options for the child will be assessed and explored and a permanence plan identified.

### 6.3 Somerset children subject to a CP plan temporarily / permanently residing outside of Somerset

**Temporarily, e.g. on holiday or where there are interim arrangements:** The Social Worker must notify the Child Protection Coordinator (CPC), core group members and the relevant local authority in which the child is staying. The relevant local authority should be notified of the child's temporary address in their area as soon as this is known and should also be provided with an up to date CP plan and any additional actions that that Local Authority are being requested to take on behalf of Somerset.

**Permanent change of address:** Social Worker must notify the CPC, core group members, the local authority and request a transfer case conference to the area where the child is permanently resident via the Central CP unit.

### 6.4 Cases transferring to Somerset from another Local Authority

#### 6.4.1 Transfer in' Child Protection Conferences - where another local authority requests a transfer of a child who is subject to a child protection plan in their area to the Somerset CSC Service.

The referring Authority contacts Somerset Direct who will inform First Response.

The relevant documentation should be available from the referring local authority before Somerset can accept the transfer in:

- Up to date Chronology
- Latest Children and Family assessment
- Copy of current CP plan
- Copies of all previous Child Protection Case Conference minutes



- A copy of the last Core Group meeting minutes
- A current risk assessment reflecting the impact of the family's move

The referral is sent to the area Assessment Team tray where the TM checks that the case meets the transfer criteria. The area assessment team alert the area ISU team to organise a transfer in child protection conference. The case should be discussed at the local area allocations meeting, a Social Worker allocated and then transferred to the Somerset Local Area Safeguarding Team.

In some instances where the transfer-in criteria are not met it may be agreed to undertake some statutory duties on behalf of a referring Authority by agreement of the Area Operations Manager.

**6.4.2** Where a case is before the family court in another local authority and the court makes a Supervision order to Somerset County Council, the case should be discussed at the local area allocations meeting and allocated within the safeguarding teams, unless agreed otherwise between Team Managers.

## 7 Child Looked After

When a Child becomes looked after the case generally transfers to the Children Looked After Team. If the case is before the court then it should transfer at the initial court hearing unless that hearing is an EPO, when the case transfers at the first subsequent interim care hearing. Both existing and new SWs should attend the court hearing at which the case is to transfer.

If the child is looked after under S20, the case should transfer at the first CLA review. Both existing and new Social Workers should attend the CLA review.

### Exceptions to the rule for Children Looked After (CLA) cases

Where a child is looked after, but there is a plan and a realistic likelihood of the child returning home and/or leaving care within a short timescale (less than 3 months) then the case should remain with the safeguarding team.

Disabled Children who live at home may require respite or short break care which may be provided under the following legislation:

- **Situation 1** - Under Section 17 Children Act 1989, in which case they are not Looked After Children, the 2010 Regulations do not apply and there is no requirement to appoint an independent reviewing officer (IRO). A child in need plan is required. Reviews should be carried out at least every 6 months and more often if required; or
- **Situation 2** - Under Section 20 Children Act 1989, with short breaks of not more than 17 days each in the same setting (where the total number of placement days does not exceed 75 in any 12-month period) and/or families have limited resources to support a child whilst the child is away and may not be able to fully exercise their Parental Responsibility. In these circumstances, the child is looked after, an IRO must be appointed, and a Short Break Care Plan drawn up. The 2010 Regulations are modified [regulation 48] so that Looked After Reviews and Social Work Visits are less frequent and the short breaks are treated as a single placement; or
- **Situation 3** - Under Section 20 Children Act 1989, where the short breaks exceed a total of 17 days per placement/75 days per 12-month period and/or take place in more than one setting. In these circumstances, the child is looked after, an IRO must be appointed and a Care Plan drawn up. The 2010 Regulations apply in full, including the provisions on frequency of Looked After Reviews and Social Work Visits.

In situations 1 and 2, the requirements which usually apply to looked after children in respect of health assessments and reports, and notification of placements, do not apply.

Please see full details on Somerset Children's Services Procedures Manual 3.1.4 [Short Breaks \(proceduresonline.com\)](http://proceduresonline.com)

## 7.1 Planning for a Child to become looked after

**7.1.1** The allocated Social Worker and Team Manager must discuss the need for a child to become looked after in supervision. This discussion should include consideration of how the child can be supported to remain at home, including Family Group Conferencing or an equivalent Family Meeting. The Team Manager requests a legal threshold discussion chaired by the Operations Manager. If the legal threshold meeting upholds the recommendation the case goes to the Legal Gateway Panel for consideration. A decision outside of panel requires a discussion with the Deputy Director.

Consideration must be given to making arrangements with other extended family members or friends who might be prepared to care for the child without the need for the child to come into care. If no arrangement is possible or it is agreed such an arrangement would not meet the child's needs then careful placement planning is required to include the child's immediate placement needs, timescales for the placement and review date and an ongoing commitment to looking for the child to return home wherever possible. In all cases where a child becomes Looked After, the Social Worker will write a draft care plan.

Placement planning is critical to the success of the placement and wherever possible a placement planning meeting should take place prior to commencement of the placement (unless it is an emergency placement). If this is not possible, it should happen at the earliest opportunity. This ensures everyone understands the plan, expectations and arrangements.

**7.1.2** From the point that a child becomes looked after there is a requirement for an initial CLA review to be held within 20 days. The Child's Social Worker informs central CLA Business Support Team – Business Support for ChAIRS ([CentralCLABS@somerset.gov.uk](mailto:CentralCLABS@somerset.gov.uk)) and an IRO is allocated. There is a tight timescale so this notification by the Social Worker is important to ensure the best preparation for the meeting. The IRO will contact the Social Worker to agree a date for the Child's Meeting and for the Pre-review consultation. The pre review consultation should take place 15 days before the Child's Meeting. The IRO and Social Worker will discuss the child's views about the arrangements for the meeting and the proposed Care Plan during this consultation. The following paperwork completed by the Social Worker will be considered as part of the initial review:

- The Placement Plan

- The initial Care Plan
- The most recent C&F assessment if completed

The CLA review, in consultation with the child and their family, will consider how to support the child to return home if it is safe to do so and ensure the proposed arrangements for the child are appropriately assessed and the support required identified. The Social Worker needs to consult with the child about arrangements for their meeting before the pre review consultation. All children over the age of 4 should be encouraged to participate in their review meetings and can be supported to lead their own meeting and to access independent advocacy if the child disagrees with any aspect of their Care Plan. A referral form to Route 1 Advocacy is available on LCS. The CLA review is wider than the child's meeting and it may be necessary for the IRO to gather information in person from some key participants separately to the Child's meeting if the child chooses not to invite them.

The next CLA review takes place at 3 months by which point a permanence planning meeting should have been held and a C&F assessment completed if this was not available for the initial review. Every looked after child should have an annual C&F and this should be updated more frequently if there are significant changes in the child or families' circumstances, including detailed assessment of scope for reunification. CLA reviews are then held 6 monthly. The IRO may call an early review if changes to the Care Plan are required.

Following the child's meeting – the IRO will complete the recommendations within 2 working days. The Team Manager has a further 5 days in which to question any recommendation they are not in agreement with before the recommendations become decisions.

Outcomes are recorded and circulated by the IRO (these are in the form of a letter for the child) 10 days after the review; and by the Social Worker, (in the form of the updated Care Plan). The Social Worker should update the Care Plan within 10 days of the child's meeting and shared with key participants including the child, parents and carers. Prior to each review (not including the 20 day review) the Social Worker prepares and shares a pre meeting report. This is a proposed Care Plan update and can be copied through into the next Care Plan and the agreed decisions from the review added. For the initial 20 day review the Social Worker prepares the first Care Plan.

There is also a requirement for a Health Care Assessment to be undertaken when a child becomes looked after. This should (where practicable) take place before the first placement and the Health Care plan should be available for the first CLA review.

## 7.2 Permanence Planning

Permanence means making a plan for a child which supports them in to adulthood and beyond. It is important that the child's Social Worker in conjunction with the child and their parents discussed options to achieve permanence and formulates the permanence plan.

By the time of the second Looked After Review, the child must have a Permanence Plan (incorporated into the care plan), to be presented for consideration at the review.

Where the Permanence Plan includes a Parallel Plan / twin tracking, the Social Worker must ensure that the parents are informed of the reasons why two plans are being made to meet the child's needs and prevent unnecessary delay.

## 7.3 Where a child has been looked after but returns to family or friends (including parents)

**7.3.1** There may be circumstances where a child is no longer looked after but requires on-going support and services to the family following reunification. This includes on a Special Guardianship Order (SGO).

In this instance, whether a child's return to their family is planned or unplanned, there should be a clear plan that reflects current and previous assessments, focuses on outcomes and includes details of services and support required. These plans should follow the process for review as with any Child in Need and / or Child Protection Plan.

### 7.3.2 Following reunification:

- Practitioners should make the timeline and decision making process for providing on-going services and support clear to the Child and Family.

- Children should be seen alone as well as with their family. Practitioners have a duty to ascertain their wishes and feelings regarding the provision of services being delivered.
- The impact of services and support should be monitored and recorded, and help being delivered should be reviewed.

### 7.3.3 Cases transferring from the Children Looked After team

The case should transfer to the Safeguarding Team, if the family continue to require services, once the success of the return home has been established (usually 3 to 6 months). The request to transfer the case must go via the area allocations meeting. Where a child is placed at home on a care order then the case will remain with the CLA team until the order is revoked, when the process above is invoked. Revoking of care orders must be discussed at CLA tracking where legal advice will be sought.

Relevant Care Leavers stay open as CiN up until the age of 18 years in safeguarding teams.

### 7.3.4 End Section 20 Child Looked After for 16/17 year olds:

Where it is proposed to end the CLA status of a young person who is 16 or 17 and placed S20, the approval of the Director of Children's Services must be sought in advance of the placement ending using the appropriate LCS form.

## 7.4 Transfer of cases to the Leaving Care Teams

Where a child has been looked after for 13 weeks and has been in care on or after their 16th birthday they are entitled to support as a care leaver from the Leaving Care (LC) service. Leaving Care have full responsibility for a young person from the age of 18 or if their Children Looked After (CLA) status has been ended post 16 but before their 18th birthday. Eligibility is from the point at which a care leaver becomes Relevant, Former Relevant or Qualifying.

A Leaving Care Worker (LCW) must be allocated to a young person by the age of 17 ½ but is often earlier depending on need and this is agreed at an allocations meeting between the CLA Team Manager and the LC Team Leader.

The transfer of the case should be discussed and agreed by the Social Worker, CLA Team Manager, LC Team leader and LCW in a transitions meeting held before the point of transfer and recorded on LCS. Where cases transfer to the Leaving Care team the Social Worker ensures that the CLA status has been ended and the following documents are up to date and completed to a high standard, Pathway Plan, Chronology, Risk Assessment, Case summary and Case notes. A case transfer form needs to be completed on LCS which outlines what is expected to be in place before transfer. It is then reviewed, signed off and transfer authorised by the Team Manager. The LC Team Leader then authorises the change of the allocated worker role by accepting the case transfer on LCS if happy the file is suitable for transfer.

Where the young person requires specialist adult services on transfer from either CLA or Children with Disabilities (CWD) teams to Leaving Care, in addition to above, a meeting should be held between the CLA CWD team, the LC team and the Adult Service provider and the notes of the meeting recorded in LCS.

## 7.5 Out of area CLA placements – placements outside Somerset

- Where placement proposed is outside Somerset and not in a neighbouring authority, approval for the placement must be sought from the Deputy Director of Children's Services (by the Placements Team).
- Local authority in which child is placed should be notified of placement at time of placement, with a reminder sent every six months and a further notification when child moves back to Somerset or to another local authority. It is the Social Worker's responsibility to ensure that this happens.

## 7.6 Missing Children

A strategy meeting should be held within 48hrs of a child/young person going missing and a review strategy meeting convened every 72hrs until return:

- To review progress of attempts locate child/young person
- Consider escalation of decision for media involvement, including parental consent

For more information see the SSCB website for the local guidance and Missing Children Protocol, link: [Children Missing from Care, Home and Education \(proceduresonline.com\)](http://proceduresonline.com).

Tracking panels include missing young person and oversight of CSE concerns.

## 8 Children with Disability

Children with Disability services encompass:

- i. The Fieldwork Team for Children with Disability
- ii. Disabilities Early Support
- iii. Children with Disability Resource Team
  - a. Community Inclusion and Activity Team
  - b. Somerset Supporters

Children with Disability Short Break Homes are also part of the offer to Children with Disabilities within Somerset. The Occupational Therapy service and the Children's Autism Outreach Team provide a service to children with a disability but are now based within Education Services.

The service responds to all levels of the continuum of need, see thresholds document, 1.2.2. 'Effective Support for Children and Families in Somerset' and Effective Support for Children and Young People with Special Educational Needs and Disabilities [SEND] and their Families in Somerset. [Effective Support Document](#)

Information about the Children with Disabilities Service can be found on the Local Offer [Somerset's Local Offer for 0 - 25](#).

Referrals to the Children with Disability Teams are received from Somerset Direct via the First Response team. On receipt of a contact which meets the threshold for Children's Social Care and the child is disabled First Response refers to the relevant area CwD work tray.

### 8.1 Referrals to the Children with Disability Early Support Team and the Children with Disabilities Resource Team



These are received from Somerset Direct. On receipt of a contact that meets the threshold for services from the CWD Early Support Team or the CWD Resource Team [level 3 or 2 of the Effective Support for Children]; Somerset Direct will refer to the relevant Early Support or Resource Team work tray.

## 8.2 Referrals for the Social Work Team for Children with Disability

The process for the Children with Disability social work teams is the same as for the general fieldwork teams, described above. Where child protection concerns are identified an investigation will be carried out under s47 of the Children Act 1989 followed by a Child and Family Assessment. Please note: if at the point of referral the disabled child is part of a family group who all require an assessment due to child protection concerns, then this assessment would be led by Children's Social Care Assessment Team supported by a Social Worker from the Children with Disabilities Team who will provide specific expertise and knowledge in respect of the disabled child's assessment.

Supervised Family Time will be undertaken by a Family Time worker in the area Family Time team unless they are not available when area-based alternative arrangements will be agreed.

## 8.3 Cases transferring between Children with Disability Teams

If a case needs to step down from the CWD fieldwork team to the CWD Early Support Team or step up from the CWD Early Support Team to the CWD Fieldwork Team this is managed through weekly allocation meetings.

## 8.4 Cases transferring in to and out of Children with Disability (CWD) Teams

CWD teams hold cases requiring all forms of statutory social work - assessment, CIN, CP, CLA and Adoption. On rare occasions, there is a need for cases to transfer in to CWD teams from another specialist social work team, or out of CWD teams, where a child no longer meets the eligibility criteria for the CWD team.

Where the CWD team assess that a case needs to transfer out of their service to another frontline social work team, then the CwD Team Manager should first have a discussion with the assessment team managers for the correct

geographical area to clarify if it meets their eligibility criteria. If this is the case then the case should then be added to the area allocations spreadsheet. The CWD Team Manager should then attend the area allocations meeting at which the case transfer will be discussed.

If an area SW team assess that a case needs to transfer to the CWD team, then the area TM should first have a discussion with the CWD TM to clarify if the case meets the CWD service eligibility criteria. If this is the case then the case should be added to the weekly CWD allocations meeting and the Social Worker requesting the transfer invited to attend to agree transfer process.

**8.5 Occupational Therapy services (based in Education Services)** work across the continuum of need. They may receive referrals directly from other agencies as well from First Response. They may hold their own cases or joint work them with Social Workers.

**8.6** Transition to Adult Services is initiated by a social work referral to the new team at 14 years; the case is then managed by the relevant Children's Social Care team until transfer is agreed. The transition date is agreed on a case by case basis dependant on the Young Person's needs. The Children's Social Care team will liaise with the Adult Services and leaving care services as required.

## 9 Transfer of cases between area teams

Where cases transfer between Area Teams the Social Worker ensures that:

- The paperwork is prepared and completed including a transfer summary on LCS.
- It is then reviewed, signed off and the transfer is authorised by Team Managers.
- The recipient Team Manager will undertake an audit prior to the case being accepted and plan for handover is then discussed and agreed between Team Managers.

Where issues arise cases are escalated for resolution to the Operation Managers.

### 9.1 Professional Disagreements Procedure

If there is an internal professional disagreement in relation to the actions or outcome for the contact or referral this will be resolved between Team Managers.

If there is a professional disagreement in relation to the actions or outcome for the contact or referral this will be resolved in discussion with the First Response Team Manager. If a resolution is not possible then the matter should be escalated to the First Response Operational Manager. The SSCB escalation process (Resolving Professional Differences) will be followed, link: [Resolving Professional Differences](#).

## 10 Appendices

### 10.1 Appendix A: Authorisation, Chairing and Decision-making levels

#### [Management Decision Matrix](#)