



Children in Need

Practice Guidance

This document introduces Slough Children's Services Trust approach to Children in Need and their families. This should be read in conjunction with the Trust's Child in Need Standards.

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Introduction

This document introduces the Slough Children's Services Trust (The Trust) approach to Children in Need (CIN) and their families.

It sets the context in which we practice social work, setting out our assessment, planning and review processes.

The final section relates to the process for step-up and step-down of cases and case transfer to other teams.

Overview

The Trust's Model of Social Work

The Trust has implemented a theoretical approach to Social Work practice using strengths-based, solution focused, systemic and relationship-based interventions, and tools. Our social work practice and approach is shaped from a position that families should have the opportunity to take responsibility for change where there is a need; they should be supported to build resilience and identify their own strengths and solutions in order to step down statutory involvement at the earliest possible opportunity.

Child In Need (CIN) or Section 17 social work interventions should always be informed by a determination to actively promote and create the conditions for families to change. Social Workers should position themselves as 'agents of change' and demonstrate a reflective approach to their intervention with families. In this context Social Workers should be seeking to draw on the families own resources.

Definition of Child in Need: Section 17, Children Act 1989

Section 17 of the Children Act 1989 imposes a general duty on Children's Social Care (CSC) to safeguard and promote the welfare of children in Slough who are 'in need' and to promote the upbringing of children in need by their families by providing a range and level of services to meet those children's needs.

Section 17 of the Children Act defines a Child In Need (CIN) as a child:

- who is unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision for him of services.
- or a child whose health or development is likely to be significantly impaired, or further impaired, without the provision of services.
- or a child who is disabled.

Our partner agencies have a duty to co-operate with CSC in carrying out this duty to assess the needs of children and to provide services as necessary.

In order to determine the needs of a child and the support that they and their family may require, CSC will carry out a child and family assessment by a qualified Social Worker.

Working in Partnership with Families

Working with consent underpins our CIN work with children and families. From the point of referral, individuals with Parental Responsibility (PR) should be informed of the nature of the referral and asked for consent to undertake a child and family assessment; including consent to contact agencies that know and work with the family, other significant adults living with the child should be consulted.

There are occasions when obtaining consent may require additional negotiation to enable the family to have a shared understanding of the work that is required.

Where parents are unable to give consent (due to lack of mental capacity or where absent) we may continue our involvement without reverting to s47.

Where parents are unwilling to give consent, the Social Worker will need to consider the risk factors and if threshold is met for s47 under the Children Act 1989. If threshold is met for s47, in accordance with the LSCB safeguarding procedures, consent is then not required, but parents should be informed of the change of approach and the reasons for the concerns.

Young people of an age and understanding, particularly those aged 16 or over, should be asked for their consent and should be consulted about decisions affecting their lives, applying the Gillick competence and Fraser guideline's test. The wishes and feelings of children should be considered in all CIN Plans and it should be clear how these were ascertained – usually this should be through direct work with the child.

The Child and Family Assessment

The purpose of the Child and Family Assessment is to establish whether or not a child meets the criteria for intervention and support under Section 17. The assessment will enable the family and the social worker to understand the circumstances and what intervention or services are required to support the family to resolve any difficulties. It is undertaken in partnership with the family and any involved professionals, with a focus on building relationships.

The assessment involves building an understanding of the family's circumstances and the child's lived experience, whilst giving due regard to the child's wishes and feelings regarding the provision of those services (appropriate to their age and level of understanding).

In most circumstances, the child and family assessment should be completed, written up and signed off by a CSW within 20 working days. In more complex family circumstances or exceptional circumstances, with the authorisation of the CSW further time may be taken to complete the assessment with a clear plan of ongoing work, up to a maximum of 45 working days.

All child and family assessments should be updated at 6 monthly intervals.

Social Work Visits

When children are referred to Children & Families Service, the first visit to the family should be undertaken as soon as possible, but within a maximum timeframe of five working days.

When a case is being reviewed through CIN reviews, the CSW should be clear about the agreed frequency of social work visits which should be at intervals of no more than 4 weeks (different arrangements apply for disabled children with stable packages of care).

Visits should be more frequent where necessary and agreed by the Social Worker and Manager.

Children with Disabilities

Children and young people with a disability, aged under 18, should have an assessment to determine their level of need and should have an up-to-date Child in Need (CIN) Plan if they are receiving a service such as a direct payment or overnight short-break or a social work intervention. All cases are reviewed regularly. The CSW will determine the frequency of reviews depending on complexity, with a minimum frequency of 6 monthly reviews.

Cultural Genograms and Ecomaps

Cultural Genograms and ecomaps are essential tools for use with children and their families. They help us to explore and develop an understanding of their relationships including professional relationships, their history, strengths, risks and patterns in the family history and how these could be used or changed to resolve difficulties. Supportive family networks can be identified and mobilised to support families. In this context consideration may be given to organising a family meeting or making arrangements to convene a Family Group Conference. Where possible genograms should show three generations of the family providing a clear understanding of immediate and extended family members and identify issues regarding domestic abuse, mental health, drugs, alcohol, etc.

Family Timelines

A family timeline can be used with children and families to explore key events and their impact on the child and the family's functioning. They can help the Social Worker and the family to understand points of change, patterns and cycles in family functioning, parenting and the child's needs.

Working together with families to co-produce cultural genograms and timelines as part of the child and family assessment is good practice.

The Child in Need Meeting

In order to affect change the professional network needs to come together. An Initial Child in Need Meeting (CIN Meeting) with the family, relevant professionals and the Social Worker should be convened at the earliest possible stage, and within 10 working days after the assessment has been completed, (this will be chaired by the Social Worker). Where there are difficult or complex issues, they can ask for support from a CSW or more senior Hub member to chair the meeting.

The participants of the CIN Meeting will share information, coordinate and progress work with the family. Following the Initial CIN Meeting and formulation of a CIN Plan, CIN meetings will be convened; the first Review CiN Planning Meeting should take place within three months of the Initial CIN Meeting and thereafter at least every six months until:

- the child is no longer unlikely to achieve or maintain a reasonable standard of health or development
- the child's health or development is no longer likely to be significantly impaired

- other procedures are followed (e.g. the child becomes looked after or subject to Child Protection Procedures)

The purpose of the CIN Meeting is to provide an opportunity for the family and the professional network to come together to explore:

- What people are worried about?
- What is going well?
- What are the complicating factors?
- What needs to happen?

The focus of the CIN Meeting is to explore the progress of the CIN Plan actions, and how the family and professionals can be empowered to overcome barriers to achieve actions required of them. CIN meetings and plans should never be used simply as a way of monitoring without intervention.

The meeting provides an opportunity for the family and for professionals to openly discuss concerns and to develop an understanding of their responsibilities collectively to effect positive change and outcomes for the child or young person.

The child/children and family should be encouraged and supported to share their views in respect of the impact of the intervention and this should be recorded in the CIN Meeting minutes.

The CIN Plan should be updated at each CIN Meeting, unless it is decided that the plan can be concluded and closed or stepped down to universal services. In all CIN cases, the CIN Plan should set out what the contingency plan will be in the event the family circumstances change, risks escalate or the family decline continued voluntary engagement.

The Child in Need Plan

The purpose of the CIN meeting is to develop a CIN Plan, this is completed in partnership with parents, young adults and involved professionals. The CIN Plan should be SMART (Specific, Measurable, Achievable, Realistic and Timely), using a strengths-based approach.

Outcomes are identified which result in a positive outcome for the child/young person/family. The plan should be no more than 6-8 points in length so that they are focused and less overwhelming to families; the language used should be clear

Children who are old enough (dependent on their age and understanding, but usually children aged over 10 years) and their parents, have the right to decide what is in the plan and whether they want to accept the targets and the services proposed.

A CIN plan should be produced following the initial CIN meeting, and will be reviewed every three months. The plan should be clear, to ensure the child/ren and family have a clear understanding of the plan and what is required of them.

Social work interventions and services should be provided as soon as a need is identified, without waiting for the assessment to be completed. This should include direct work undertaken with the children/young adults and parents.

The CIN Plan should be in place for at least three months and should be reviewed before it is closed or stepped down. In exceptional circumstances, the CIN Plan may be in place for a shorter period. In these situations a management decision needs to be recorded providing a clear rationale for this outcome.

Where a CP Plan is ended with a recommendation to step down to CIN a draft CIN Plan should be formulated at the outcome of the conference and reviewed at the first CIN meeting within 10 working days.

When the CIN Plan ends and the case is closed to CSC, the case summary and chronology of significant events, and all case recording, must be completed and up to date. The rationale for why the case has been closed should be recorded. The case summary should set out the contingency plan for the child, which may include details of an agreed family plan or Team Around the Family/Child plan.

The closure record should evaluate the progress and impact of the CIN Plan, including the views of the child and parents or carers on how helpful the social work intervention was to them. Child and parent views should be recorded as a case note and referenced in the closure summary.

Sometimes whilst on a CIN Plan, concerns escalate and s47 enquiries arise resulting in a Child Protection Conference and in these cases or if children come into care, then the CIN Plan would be ended and the case reviewed under child protection or children in care procedures.

The scope of the Child in Need plan

The Trust will work with Children in Need and their families who currently have an allocated Social Worker and fulfil the following criteria:

- Children on a Supervision Order.
- Children who have been subject to a CIN Plan for 12 months or more.
- Children being de-escalated from a Child Protection Plan.
- Children who have been reunified with their family after a period of time in care.
- Children who are at risk of Child Sexual Exploitation and / or are regularly Missing Children.
- Complex Cases.

The allocated CSW is required to provide scrutiny and challenge to social work undertaken with Children in Need and their families with the aims of:

- Keeping children and young people's experiences at the centre of all Child in Need work.
- Improving the quality and approach of service offered to Children in Need and their families in Slough.
- Modelling good and outstanding Social Work Practice.
- Ensuring plans are outcome focused and effective.
- Contributing to the overall effective management of thresholds and risk.

CIN Plans open 9 months plus

If a case is open for nine months a Reflective Case Supervision will be held between the Group Manager, Social Worker and CSW to review case management and approach.

It is good practice for all Reviews to be chaired by a CSW or Senior Social Worker to ensure good management oversight and enable the Social Worker to actively participate, listen and provide their professional contribution to the discussion.

The purpose of the Review is to give space for all present to voice their views and be listened to. Families should be asked where they would like the review meeting to take place.

Where a parent or carer or young person has been identified as having specific learning difficulties or mental health needs, they should be asked if they would like to be supported by an advocate. Where English is not the first language of one or more of the family members attending the use of an interpreter should be routinely considered. Similarly where parents or children have communication difficulties, thought should be given to enable their participation in the review.

The core principles of the Trust's approach to working with children/young people and their families:

- Working with the consent and participation of the family.
- Making sure that the views, wishes and lived experience of the child or young person are central to the creation of CIN Plans and the evaluation of the impact of the CIN Plan.
- Using best practice and evidence based approaches within our work: Strengths Based Approach, Solution Focused, Motivational Interviewing and Systemic Approach.
- The use of Chronologies and Cultural Genograms to support the understanding of family history, their timeline, patterns and themes emerging within the generations as well as being aware of what interventions have been tried and/or offered.

Case Transfers

Cases should transfer between Hubs in a planned and coordinated manner. A Case Transfer Meeting should be convened to discuss case transfer date, work completed and work required in order to progress the plan.

The transferring Hub will ensure that the case is ready for transfer. It is essential that both Hubs are mindful to promote continuity of work with the family so that the family experience a "seamless transition" during the transfer process.

The transfer process should be timely and will usually involve both Social Workers attending a handover meeting with the family.

Procedural Fairness

All adults in the family and all children of sufficient age and understanding will be given details of how to contact the Compliments and Complaints service and the allocated social worker's line manager.

Our work with children and families under CIN Plans must evidence our commitment to treating all children and families fairly; working in an anti-oppressive way that values their strengths and uniqueness.