

TRANSFER PROTOCOL ACROSS SWINDON CHILDREN'S SERVICES

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Contents	Page
1. Purpose	2
2. Overarching Principles	2
3. Information needed	5
4. Transfer from MASH to the Assessment and Child Protection Team	5
5. Transfer of Children in Need or Child Protection from the Assessment and Child Protection Team; Transfer in from other local authorities	6
6. Children with Disabilities	9
7. Court Proceedings Transfer	11
8. Unborn Babies	12
9. Emergency Protection Orders and Police Protection	13
10. Section 7 and Section 37 Court Reports	13
11. Relinquished Children	13
12. No Resource to Public Funds Families	13
13. Unaccompanied Asylum Seeking and Trafficked Children	14
14. Private Fostering Notifications	14
15. Children We Look After	14
16. Leaving Care	15
17. Early Help Step Up and Step Down process	16
18. Children who are closed that are re-referred	18
19. Escalation Processes	18
20. Case Transfer Standards Handover	18



1.Purpose

The purpose of this document is to set out the key expectations and principles around how we will support our children and young people to move between social work teams within Swindon.

Using strength-based practice we will work alongside children and their families when they experience challenges to support them to build strong foundations and develop resilience so that children thrive. There will be times when children need our protection to stop them being harmed. These children and their families will require support from statutory services, and we will work with partners to protect children from harm and support families.

This document is intended as a guide for Social Workers and managers. It will define the pathways for our children and young people, including decision making points, roles and responsibilities. This document will not cover every situation and in exceptional cases it is expected that managers will negotiate individual decisions based on the child's best interests.

Overall and ultimately, it will demonstrate how the transfer process supports our children and young people's journey for permanence. It sets out how we can all work together to provide support that is seamless and safe for our children and young people.

[At the time of transfer to another service area, professional respect for the decisions made must be discussed and agreed as a way forward. Decisions cannot be ignored and overridden by incoming managers](#)

This document should be read in conjunction with our Social Worker and Manager practice standards.

2. Overarching Principles

The child is at the centre

At no point should a child assessed as needing a service be unallocated. Any unallocated children must be reported to the relevant Senior Manager.

Any discussions/negotiation relating to transfers will consider the best interest of the child at all times. Swindon is committed to reducing the number of Social Workers for a child as much as possible. When a child transfers to the children we look after team, the child or young person will be encouraged to choose their new Social Worker from social work profiles provided to them.

Social Workers and other key professionals will work closely to support children and young people to remain living with their immediate family. In some situations, it is not possible for our children and young people to remain in their family home, but this is something that we will continuously revisit.

Consideration needs to be given to when a child transfers to another team and this should not occur during key events or transitions in a child or families life.

Where there is a disagreement the immediate or urgent needs of children and families must remain a priority and teams should approach this using their professional judgement to ensure the child/young person/family's immediate needs are addressed.

We are aware of the impact of transitions upon children and families

Transition refers to the movement of one situation, event or experience to another. Though our intention is always where possible to keep transitions to a minimum, the support offered to children and families by different parts of Childrens Services means that transitions inevitably occur, whether that be a transition to a different type and level of support, and/or the support the child and family are receiving moves to a different Social Worker or Family Support Worker. There is an increasing body of awareness of the impact that transition can have upon children and especially the impact of a negative transition. Negative experiences of transition have been found to have an impact upon children's emotional and behavioural wellbeing and development.

Our aim is to keep those transitions to a minimum and when they do occur to make sure they are well managed through focusing on the quality of relationship we have with the child and family and ensuring that is based on respect, by working with children and families and not at them so ensuing their voices are heard.

We will communicate with the child and families about when transition will occur, explaining the reasons why and what will happen, we will ensure children and families are able to express their feelings about the transition. We will also ensure that the movement from one team and one professional to another is done in a positive way that focuses upon the strengths of the child and family, and doesn't require the child to feel like they are starting again, but rather they are building on previous engagement. We will ensure new staff supporting a child and family explain who they are, what their role will be. We will ensure that where a child and family's relation with a professional comes to an end, that the ending is achieved positively and leaves the child and family feeling valued.

No delay

It is accepted that there should be flexibility when transferring children from one team to another and there should be no delays which impact on the child's care plan or support being provided to the family. Capacity of a team should not prevent or delay transfer; however the transferring team should be flexible during any negotiations relating to transfer. Timescales and required actions will be agreed by Managers as part of the transfer meeting.

Seamless service

Swindon is committed to ensuring that transfers of children from one team to another are smooth and seamless. Social Workers and managers will ensure that they communicate in advance of the child/family transferring to another team and that all relevant information is shared in advance. The child and family will be advised of the change of Social Worker in advance and they will have the opportunity to meet the new worker prior to the transfer. The new Social Worker will also attend the scheduled review/meeting prior to transfer to ensure they are fully up to date with the child's care plan and families plan of support. The child's file needs to meet certain standards of recording, assessment and information to allow the receiving service to see any immediate strengths, needs, assessments and plans required to keep the child safe.

The diagram below shows what information should be recorded on the child's electronic record, before they are transferred to another team



3. Information needed to transfer children between teams

Transfer of children processes

4. Transfer from MASH to the Assessment and Child Protection Team (ACP)

Contact Swindon, the Integrated Front Door, is responsible for the triage of children and making threshold decisions about the next steps in relation to a contact dependent on the level of need and risk in line with the Right Help Right Time threshold guidance. See Step up to Social Care p13 and link to guidance [The Right Help at Right Time Guidance - Swindon Safeguarding Partnership](#)

If multi-agency information gathering and sharing is required as it is not clear from the referral what is known about the child and risk of harm the contact will be passed to the MASH for further enquires to be made to determine the level of need and whether the needs identified can be best met by Early intervention of statutory services.

If the child's needs meet level 4, and they are clearly in need of an assessment to determine how best those needs may be met then the case will transfer immediately into the Assessment and Child Protection Service. From this point, the ACP assume responsibility for the child.

All strategy meetings from MASH will be chaired by an ACP Manager and they will decide if threshold is reached for a Children Act 1989 Section 47 (s47) enquiry where decision for either a joint or single enquiry. Following a strategy discussion ACP will be responsible for allocation.

Where a child has been closed to a Family Safeguarding Team for less than 13 weeks it will be allocated back to the team that were previously working with the child. On all children that are re-referred within the 13 week period it is the responsibility of the receiving manager to organise and plan the strategy discussion if required.

Where there are any disagreements in relation to threshold decisions, in the first instance the receiving ACP Assistant Team Manager should discuss with the ACP Team Manager. If the difference cannot be resolved then cases should be escalated for a discussion to take place between the ACP and MASH Managers and finally Service Managers.

The Manager from MASH will record a clear rationale on children where there has been challenge made to the original threshold decision that results in a threshold being changed.

5. Transfer of Children in Need or Child Protection from the Assessment and Child Protection Team and transfers of children from other local authorities

Children will transfer from the Assessment and Child Protection Team to the relevant Family Safeguarding Team in these instances:

- Children who become the subject of a Child Protection Plan at the Initial Child Protection Conference.
- Children who are not made the subject of a Child Protection Plan at the Initial Child Protection Conference but require services as a Child in Need

In these two instances, The Social Worker from ACP and the Team Manager to hand over (but not to allocate) the child/family to the social worker from Family Safeguarding before the ICPC. During the conference, the family to meet the new social worker. The ACP social worker will present the child/family at the conference.

- Children where a Statutory Assessment has been completed that recommends further social care intervention at Level 4 of the Swindon Threshold of Need document (The Right Help at the Right Time), as the children will be facing complex and/or multiple needs which will require an integrated and co-ordinated response.

Child in Need (Section 17) transfer process

If, as a result of a Statutory Assessment, the Assessment and Child Protection Team identifies an ongoing need for statutory social work intervention under a Child in Need (CIN) Plan (S17

Children Act) in accordance with the Swindon The Right Help at the Right Time (January 2024) this will be provided by the relevant Family Safeguarding Team or DCT.

The Assessment and Child Protection Team will include the child's details on the weekly transfer list prior to the transfer meeting; with a synopsis of the child that is considered 'Transfer Ready'. A date for the first CIN review meeting will be arranged and detailed on the transfer list. A Transfer Checklist for the child must be completed and signed off by the relevant receiving Manager.

The relevant receiving Team Manager will review the weekly transfer list and identify the receiving Social Worker who will be invited to attend the CIN review meeting.

The transfer will be undertaken at the first CIN review meeting that will be arranged and chaired by the ACP Team and attended by the newly allocated Family Safeguarding Team Social Worker. All professionals who are deemed necessary to support the transferring plan must be invited to attend the initial Child in Need Review Meeting by the Assessment and Child Protection team Social Worker.

The minutes will be taken by the Assessment and Child Protection Team and written up, along with the CIN plan, within 48 hours of the meeting.

A Transfer checklist for the child must be completed and signed off by the relevant ACP Manager and be sent to the receiving manager at least 24 hours ahead of the proposed transfer which details that all tasks are completed prior to transfer.

The child will then be transferred on the Care Director once the CIN review meeting minutes have been completed and uploaded on the system. The aim is for this to take place within 48 hours after the meeting has taken place. The receiving Social Worker and Team Manager will be alerted that the child has transferred.

Child with a Child in Need Plan Transferring to Swindon from another Local Authority

Where a child who is the subject of a Child in Need plan in another Local Authority moves to Swindon, the referral will initially go to the Multi Agency Safeguarding Hub (MASH). The referral from the other local authority should include:

- Copies of an up to date assessment of each of the children in the family which clearly identifies the assessed need and any risk / areas of concern(s) to each child
- Copies of the minutes of all of the Child in Need Meetings and Child in Need Plans relating to the period for which the children have been subject to the plan
- Chronology
- Genogram

An up-to-date case summary setting out both the current situation and all relevant background information about the children.

In the absence of any of the above paperwork, the MASH team must not accept responsibility.

If the child is considered to meet the Threshold Level 4 in accordance with the Swindon Safeguarding Partnership's Right Help Right Time threshold guidance, and is supported by all the

requested documentation, MASH will alert the Manager of the relevant Team, and have a discussion about the child and the timescale for them be transferred.

Child Protection transfer process

If, as a result of a Section 47 investigation and statutory assessment, the Assessment and Child Protection Team identifies an ongoing need for statutory social work intervention under a child protection plan this will be provided by the Family Safeguarding Team following the Initial CP Conference (ICPC)

The Assessment and Child Protection Team will include the child's details on the weekly Transfer list with a synopsis of the presenting issues and history, providing notice (Flag up) to the relevant Team that the ICPC is due and the child is being prepared for transfer at that conference.

A date for the ICPC will be arranged, in consultation with the Quality Assurance Business Support Team and detailed on the spreadsheet.

The Family Safeguarding team manager will provide the name of the new social worker via email to ACP. A transfer checklist must be completed and signed off by the relevant ACP manager which details that all tasks are completed before the day of the Conference.

The Assessment and Child Protection Team social worker will produce a report for the ICPC and ensure this is shared with the parents and conference chair at least two days in advance of the conference.

If the name of the Family Safeguarding Team social worker cannot be provided before the conference, a manager from the Family Safeguarding Team will attend the conference and accept transfer on behalf of the team.

The transferring social worker will meet with the social worker and Team manager from FST who will be working with the family going forward before the ICPC takes place.

This is not the re allocation of the child, as the ACP social worker will present the child at ICPC and a handover will be undertaken there.

The parents and child if they are present will be introduced to their new social worker at the ICPC. This meeting will be chaired by an independent child protection conference chair and minutes are taken by the Quality Assurance Business Support Team.

The child will then be transferred by ACP on the Care Director system to the Family Safeguarding Team within 24 hours of the meeting having taken place. A transfer checklist for the child must be completed and signed off by the relevant ACP manager which details that all tasks are completed and this shared with the receiving FST manager ahead of the child transferring.

If the ICPC is deferred, ACP will continue to hold case responsibility until the conference can be reconvened.

'Transfer In' Child Protection Conference

When a family with children who are the subject of a Child Protection Plan moves to Swindon, the originating Local Authority should notify the MASH at the earliest opportunity. The MASH team will put a contact on to the Care Director system and then progress to referral. The originating authority should provide MASH with the following documentation:

- Copies of an up-to-date assessment of each of the children in the family which clearly identifies the assessed need and any risk / areas of concern(s) for each child
- Copies of the minutes of all of the Child Protection Conferences relating to the period for which the children have been the subject of the Child Protection Plan
- A copy of the Child Protection Plan and the most recent Core Group minutes (if available)
- Chronology
- Genogram
- An up-to-date case summary, setting out both the current situation and all relevant background information about the children

MASH should notify the Quality Assurance Team immediately on receipt of the above information.

Within 15 working days of receiving a request for a Transfer In Child Protection Conference, and on receipt of the documentation referred to above, the Quality Assurance Business Support Officer should arrange a Transfer Child Protection Conference. Once this date is confirmed the information should be shared with the ACP Business Support Officers so that the case can be detailed on the transfer spreadsheet for the forthcoming meeting and early notification is made available to the teams (FST or DCT) to assist with the allocation of the case.

At the Transfer Child Protection Conference, Swindon Children's Services will formally accept case responsibility and the case will be allocated to a team social worker.

'Transfer Out' Child Protection Conference

Where a child on a Child Protection Plan moves out of Swindon, the above process should be followed and progressed by Swindon Children's Services as the originating authority.

6. Children with Disabilities

A referral will be received by Contact Swindon.

The Disabled Children's Team will work with disabled children as defined by the Equality Act (2010) definition of disability:

'A physical or mental impairment which has a **substantial** and **long term** adverse effect on your ability to carry out normal day to day activities'.

Substantial – means considerable or significant factors that are life changing or limiting, and might include risks associated with the disability or dependency.

Long Term - means a disability that is existing indefinitely and diagnosed, the condition is not likely to improve. However the Disabled Children's Team will ensure sufficient flexibility to take into account intermittent or episodic conditions.

Eligibility decisions are based on individual need and professional judgement, including to what extent the impairment impacts the child and the lives of those who live with and care for them, it is likely that the disabled child or young person will fit into one or more of the following definitions:

- A significant, permanent and enduring physical disability requiring a high level of care (i.e. fully dependant on carers for all elements of care or requiring a very high level of supervision and prompting to ensure basic care needs are met).
or
- A diagnosed learning disability/global development delay, affecting multiple areas of development. The Department of Health definition of learning disability/global development delay is: that an individual has a **significant impairment of intelligence** along with a **significant impairment of social functioning** and that both of these impairments were acquired **before adulthood**.
or
- A severe and enduring communication disorder, with very little communication or significantly delayed processing skills.
or
- Autism with a significant learning disability/global development delay and may also have challenging behaviour. The Department of Health definition of learning disability/global development delay is: that an individual has a **significant impairment of intelligence** along with a **significant impairment of social functioning** and that both of these impairments were acquired **before adulthood**.

Or

A significant sensory impairment with mobility significantly restricted without special provision. This can be family support under S17, safeguarding under S47 and children looked after under S20 or S31.

If considered to meet the Criteria for the then the child would pass to the Disabled Children's Team for allocation.

The Disabled Children's Team will work closely with both the Multi Agency Safeguarding Hub and Assessment and Child Protections Team, to ensure disabled children and their families are allocated the most appropriate team to meet their individual needs.

When children are referred to Contact Swindon and the Multi Agency Safeguarding Hub and it is very clear to workers in the MASH that the child's disability meets the DCT criteria, the child and their family will be given an assessment by the DCT.

However, when the decision is not straightforward a social worker from the DCT will work alongside the social worker from the Assessment and Child Protection team to complete the statutory assessment. During the assessment process a decision will be made about which social work team is best placed to work with the family following the assessment, and the DCT Social Worker will provide advice and information regarding additional (disability specific) services available to the family.

If an allocated child within the Disabled Children's Team is considered at risk of significant harm and the threshold met to convene a Strategy Discussion or start a Section 47 investigation then this will be progressed by the child's allocated social worker within the DCT and progressed in accordance with child protection procedures based on assessed risk and the priority to safeguard the child.

If a referral is received from MASH in respect of a child that meets the eligibility criteria and is unallocated then the MASH team is responsible for making threshold decisions about the next steps within one working day.

The MASH Manager will make the decision that a child meets the threshold for statutory social work intervention. The referral will be given an outcome of single assessment or strategy discussion. If a child is unknown to CSC the Disabled Children's Team would be invited to the strategy discussion and would take responsibility for the family if the child with a disability demonstrates the primary need.

If the child is already allocated within DCT the strategy meeting will be chaired by an ATM/ Team Manager in the Disabled Children's Team and they will decide if threshold is reached for a section 47 enquiry and whether or not it will be joint or single enquiry. If threshold is not reached for a section 47 enquiry, the Disabled Children's Team Manager will determine the next steps.

Where a child has been closed by the Disabled Children's Team for less than 13 weeks, then MASH will allocate the child back to the Team.

If the primary reason for allocation is the disability of one child then his / her siblings would also be worked within the Disabled Children's Team. The principle is that all children in one family wherever possible should be held by the same social worker or, if this is not possible, within the same team.

7. Court Proceedings Transfer

- **Agreed Public Law Outline - Pre-Proceedings**

If, following presentation of the child to the legal planning meeting, a decision is made that threshold has been met to escalate to Public Law Outline pre-proceedings or care proceedings the child will transfer from ACP to FST. The pre-proceedings letter to the family will be written after the legal planning meeting, and will be signed off at the legal gateway panel (LGWP) where permissions will be given around the forward planning from the legal planning meeting. It will be shared with the parents, within the agreed timescale, ensuring there is sufficient time for the parents to seek legal advice

These children will be flagged to the relevant Family Safeguarding team via the transfer weekly transfer list. The child will remain with the allocated ACP Social Worker until the Pre-Proceedings planning meeting with legal, when the child will then transfer over to the appropriate Family Safeguarding Team. Both the ACP and the Family Safeguarding team social worker/Team Manager will attend the Pre-Proceedings planning meeting to discuss and forward plan.

The relevant Manager will chair the Pre-Proceedings Planning Meeting, arranging the date for this meeting in consultation with the relevant legal and children's social care professionals. At this meeting agreements will be made in terms of timescales for assessments and referrals to be made to other services to support the family. The FST SW will start these processes from this meeting.

If the meeting does not take place for whatever circumstances then the allocated social work team will continue to hold case responsibility until the meeting can be reconvened.

The ACP social worker and their Team Manager will then attend the pre-proceedings meeting with the parent and introduce them to their new social worker from FST, who should also attend.

- **Agreement to Initiate Care Proceedings**

If the legal gateway panel agrees that care proceedings should be initiated (under EPO or urgent ICO) then if the child is being held by the Assessment and Child Protection Team the relevant receiving team will be invited to the Legal Planning meeting and the child will transfer to the team shortly after the initial court hearing providing that the child's record is up to date and is ready for transfer. Any initial statements and care plans will be completed by ACP; and any initial evidence will require ACP attendance at Court. There is an expectation that the new SW from FST should also attend any hearings.

8. Unborn Babies

This section should be read in conjunction with the pre-birth protocol.

Contact Swindon will accept referrals in respect of the unborn child as early as the first midwifery booking appointment should concerns arise. The early identification of risk factors by midwives at the maternity booking appointment will form the basis of the referral to Children's Social Care. Multi-agency working is at the heart of the Pre-Birth Assessment and the identification and management of risk.

If a professional working with the mother has concerns for the unborn child and /or the mother, a referral should be made for additional support at any point during pregnancy.

All referrals made to Contact Swindon beyond the first 12 weeks of pregnancy or those 'stepped up' from Early Intervention, where there is a risk that the unborn child's safety and welfare may be compromised upon birth, will be accepted by MASH.

The MASH will decide on and record the next steps of action within one working day. This will include making a decision on whether or not to share/ gather information with/from other agencies. MASH will undertake a risk assessment at this point.

Decisions will take account of referral information, information held in existing records, discussions with the family (where possible and appropriate) and information provided by other professionals or services as deemed necessary.

The MASH Team Manager will review the information and decide what further action is needed. If it is agreed that the likelihood of significant harm is high the unborn baby may be directly transferred to Family Safeguarding. The MASH TM should highlight the rationale behind the decision making on this. A conversation should be had between the duty manager in Mash and the FST duty manager, to inform them that an assessment is required. Interventions need to be put in place at the earliest opportunity,

MASH will accept cases at 12 weeks of pregnancy where there are concerns which identify potential risk to the unborn. In some instances unborn babies will be referred across to the Assessment and Child Protection Team for a Statutory Assessment/ Pre-birth Assessment, when further assessment is required to understand potential harm.

Unborn babies will be referred to the multi-agency pre-birth panel two weeks following their allocation to CSC – see pre-birth protocol.

The completion of the Pre-birth social work assessment will inform the ongoing level of intervention of the child in accordance with assessed threshold of need and any presenting risks.

Where there is a late notification of a pregnancy and the concerns around the unborn baby are at level four, the Family Safeguarding Teams should be notified immediately, with the unborn baby being allocated to a social worker in Family Safeguarding.

9. Emergency Protection Orders and Police Protection

The Assessment and Child Protection Team / Family Safeguarding Team Social Worker (depending on whose team the child is in at the time) will take the lead in respect of work around children who are made the subject of Police Protection powers, and those requiring Emergency Protection Orders (EPO's).

In emergency situations (EPO) the allocated social worker will complete the necessary paperwork and work with the legal team to present the child to the court and, if the child is allocated to a social worker in ACP, this must be raised at the earliest opportunity with the relevant Family Safeguarding team to enable a decision to be made as to the appropriate timing of the transfer. If the child is to be progressed to an Interim Care Order then a Social Worker from the Family Safeguarding team will be available to attend the Initial Court Hearing for the transfer to take place.

10. Section 7 and Section 37 Court Reports and Transfer of Supervision Order cases

Notifications from the Court for Section 7 assessment where the child is unknown to children's social care should be allocated into ACP. Children where a section 37 court report is needed should also be allocated to ACP. Transfer of Supervision Order children should transfer from the MASH to the relevant Family Safeguarding team.

11. Relinquished Children

All children who are being relinquished will transfer from MASH to the relevant Family Safeguarding team for an assessment to be completed and appropriate action taken to ensure that there is minimum delay for the child.

12. No Recourse to Public Funds Families

Children will initially be screened by the MASH Service and, if deemed to meet the duty of the Local Authority in accordance with the Practice Guidance for Local Authorities **Assessing and Supporting children and families who have no recourse to public funds (NRPF)** will be transferred over to the Assessment and Child Protection Team for a social worker to undertake the necessary assessment.

If the assessment identifies safeguarding concerns in respect of the care / parenting provided to the child(ren), then they will transfer to the Family Safeguarding Team, determined by the outcome of the assessment and the assessed needs.

13. Unaccompanied Asylum Seeking and Trafficked Children

Unaccompanied asylum seeking children and trafficked children will initially be screened by the MASH Team and they will process all UASC Referrals within 1 working day.

The outcome of UASC Referrals will be:

- Classified as UASC
- Social Work Assessment

All UASC will be allocated to the Positive Futures Team for a Social Work Assessment by a specialist worker.

14. Private Fostering Notifications

Notifications when the child is not open to a social work team

These children will be referred into MASH, screened and transferred across to Assessment and Child Protection Team to complete a Statutory Assessment in respect of the child and the presenting family situation.

The ACP worker will undertake a joint visit with the Private Fostering Social Worker in the Fostering team.

The ACP will complete the statutory assessment on the child's situation and the Private Fostering Social Worker will complete the Private Fostering Assessment of the Carers.

If the statutory assessment identifies safeguarding concerns which are considered to require further intervention then the Assessment and Child Protection Team will undertake the Section 47 Enquiry and present the child to the convened Initial Child Protection Conference, at which point it will transfer across to the Family Safeguarding Team.

If the assessment identifies multiple or complex needs considered to meet the threshold for Child in Need intervention the child will be transferred over to the Family Safeguarding Team at the first CIN review meeting

Notifications when a child is open to the Family Safeguarding teams

When the Family Safeguarding social worker is informed that a child is living in a private fostering arrangement they will undertake a joint visit with the Private Fostering Social Worker to assess the situation.

The Family Safeguarding social worker will need to update the statutory assessment on the child and the Private Fostering Social Worker will complete the Private Fostering Assessment of the Carers.

The child must be seen by the Family Safeguarding Social Worker as per Swindon's Child in Need visiting frequency and reviewed at Child in Need review meetings. The Private Fostering Social Worker should be invited to attend all Child in Need Reviews and Planning meetings.

15. Children Looked After

Children transferring from ACP to Family Safeguarding Teams

If a child becomes a child in care when allocated within the Assessment and Child Protection Team they should be transferred to the Family Safeguarding Team at the first Children Looked After Review.

The transfer must be supported by a completed Transfer Checklist which must be signed off by the relevant Manager and a copy placed on the child's record.

Good practice should be supported by a joint handover visit by the transferring and receiving Social Worker to support the transition plan and ensure the child is included in the planning. The receiving Family Safeguarding Manager will accept the child at the appropriate point of transfer. They will place a Manager's entry onto the child's case notes detailing that transfer has taken place.

Children transferring from Family Safeguarding Teams to the Children We Look After (CLA) Team

At the point that a child or young person's child's permanency plan is confirmed the child/young person will transfer to the Children We Look After team from the Family Safeguarding team.

The Children We Look After Team (CWLA) Social Worker and/or Team Manager must be invited to attend the child's permanency planning meetings. It is good practice for liaison to take place with the CWLA team regarding the child's final Care Plan.

If the permanence plan for long term fostering is confirmed at a Looked After Children Review the case will transfer to the CLA shortly after the Final Order.

If the care plan is long term foster care, the team manager of the CLA team should be consulted with regard to the final care plan.

At the end of Court Proceedings the case will transfer to the CLA

Good practice should be supported by a joint handover visit by the transferring and receiving Social Worker to support the transition plan and ensure the child is included in the planning. All of the points above re case transfer from ACP to Family Safeguarding team will apply and be completed.

Where the child is older and on a Section 20, the FST will keep them for 13 weeks before they transfer to the CLA team, or Positive Futures.

16. Leaving Care

Process for referral and transfer to Positive Futures Team from Family Safeguarding or Children We Look After team

As soon as it is known that a child is going to remain looked after at the time of their 16th birthday, the responsible Team Manager/ATM will notify the Positive Futures team manager of this by the age of 15½ years, on the basis there is no plan to return to their family.

Children will move into the Positive Futures service at age 14 if an unaccompanied asylum seeker.

Arrangements will be made for a Pathway Adviser to be appointed by the Positive Futures Team Manager by 16 years. The Manager will also record on Care Director who the allocated Pathway Adviser is and email the Social Worker, Pathway Adviser and Care Leavers Assistant Team Manager to inform of the allocation.

The Social Worker should meet to discuss the young person and complete their Pathway Plan. An introduction should be arranged with the young person prior to the young person becoming

16 years old. Between the ages of 16 and 17, the Social Worker will take the lead. For adults the Pathway Adviser (PA) will take the lead with the Pathway Plan.

The allocated social worker in consultation with the young person, the young person's carer and other involved parties, should draw up the young person's Needs Assessment (Leaving Care Assessment of Need) and Pathway Plan, based on the Needs Assessment, no later than three months after their 16th birthday. The Social Worker will retain responsibility for them until the young person is 18.

At the age of 18 the Pathway Adviser will assume that role as the lead professional, unless the young person has an allocated Social Worker in the Adult Social Care team.

The Pathway Adviser should attend the young person's CLA review with the consent of the young person. The Pathway Adviser should attend any other relevant meetings regarding the young person as required.

The Pathway Adviser will work alongside the allocated social worker, from the young person's 16th birthday, and will have a key role in providing support to the young person after he/she leaves care.

The support to the allocated social worker for the young person will be to assist in the development, implementation and review of services as set out in the Pathway Plan and transfer checklist, which must be in place by the 16th birthday.

17. Early Help Step Up and Step Down Process

Social Care Step Up / Step Down Process

To step up a child

1. Step-Up from Early Intervention (Intensive, Targeted and Universal) Services to Children's Social Care via Contact Swindon

A request is made to Contact Swindon;

Contact Swindon will provide a single point of access to help and support for children, or to report safeguarding concerns.

A child / young person who has been supported via a service in the community may need a service from a social care team. This could be because the child's needs have changed or there is an escalation of concern, and the child is in need of support and protection at (S17) child in need, or (S47) child protection levels.

Where it is concluded that the child should be the subject of a statutory assessment, any services provided by Early Intervention, should continue while the assessment is being completed.

The worker who knows the child/family should make the request to Contact Swindon either by phone 01793 464646 or email contactswindon@swindon.gov.uk

The professional should fill in a Request for Help and Support form with as much information as possible.

Contact Swindon are available for advice and guidance before a request is made on 01793 464646

- The Request for Help and Support is completed and sent securely to contactswindon@swindon.gov.uk
- The Request for Help and Support should be informed by the Right Help at the Right Time Threshold Guidance.
- For all Step-Up requests, the Request for Help and Support should be sent with the up-to-date Early Help Assessment and Team Around the Family (TAF) Plan, if one has been completed with the family.
- A contact form is opened on Care Director
- Where there is a clear rationale for social work intervention, the contact will proceed to a referral
- Consent should be sought by the referring agency from the family prior to a step-up request, unless seeking consent would place the child at risk of harm. Consent is not just informing the family that a referral is being made, but asking if and what with whom information can be shared and other agencies contacted. Any decision to proceed without consent should be taken in consultation with a Contact Swindon duty manager and recorded.
- A decision for no further action where there is a lack of consent should be signed off by the duty manager.

Step down from children's social care to Early Intervention

Children's social care teams should always aim to reduce their involvement as the child / family's needs are met or reduce through the completion of actions in their plan. Children, young people and their families who would benefit from Step-Down / Early Intervention support will be identified by their social worker at the earliest opportunity, with agreement from their line manager.

On completion of a statutory assessment / or Child in Need (CIN) Review, if the social worker has assessed a need for early intervention support, the assessment analysis or minutes of the review meeting and plan should set out the needs identified. The CIN review meeting should be chaired by the line manager to establish that this is the right path to progress, in partnership with the parents/carers and other involved agencies.

Social work teams (Assessment and Child Protection/Family Safeguarding/Disabled Children's Team) can step down to Early Help using the transfer meeting on **Tuesdays at 4pm**.

Social workers will need to complete the **transfer spreadsheet**: All the headings on the spreadsheet should be completed. This document is on SharePoint and should be updated by 4pm the Thursday before the Tuesday Step -down meeting.

Managers will attend the Tuesday transfer meeting, to discuss the step down. The decision will be made at this meeting that this is the right course of action for the child

A handover between the social worker and the early help service (family worker or youth engagement worker) should take place, after seeking consent from the family. Good practice would be a joint visit to the family.

If a multi-agency early intervention response is required the plan for the child/family and what services are needed to implement it will be discussed at the Early Intervention locality panel, in the area where the child lives – North, South or West Swindon. Please note, this will not be necessary for every child/family.

The social worker will ask the parents to consent to make a referral to the early intervention locality panel and to share the analysis of need and recommendations from the Statutory Assessment or Child in Need Plan.

The Early Intervention Family Coordinators will look at the transfer spreadsheet following the transfer meeting and if the plan is for panel, decide which early intervention locality panel the child/family needs to go to, and add their name to the panel agenda for the next panel meeting.

The social worker will attend the locality panel to detail the needs of the child/family, and the panel members will decide which other services should be supporting the child.

Once the child has been to the transfer meeting and the locality panel if required the closure record on Care Director should be filled in.

18. Children who are closed to CSC and are re-referred

Any child re-referred to MASH less than 13 weeks from closure (the date of closure recorded on Care Director) will be transferred to the last team that was allocated for a decision regarding future action needed. If a child is re-referred over 13 weeks from closure this will be processed by MASH and a decision made as to what further action is needed.

19. Escalation Process

In the event of disagreement between services and teams within Children's Services in relation to the transfer of cases, discussion should be informed, documented and focused on the safety, development and best interest of the child or young person. This process should be held at Assistant /Team Manager level initially but if the issue cannot be resolved it should be escalated to the relevant Service Managers.

20. Transfer Standards Handover

It is good practice for there to be a joint visit by the transferring social worker and the new social worker and a discussion prior to transfer between transferring and receiving workers and managers

To enable an effective transfer of responsibility for a child the allocated social worker and their line manager must ensure that the following actions have been undertaken: -

- A **transfer summary** should be produced setting out the updated information and highlighting the key issues and actions needed including a management analysis. This should be on Care Director at the time of transfer.
- All recording is up to date
- All basic information such as ethnicity, disability, religion recorded.
- All contact details for the family and involved professionals should be correct at time of transfer
- Supervision records are up to date and clear evidence of management oversight.
- Any financial agreements should be up to date and recorded within the transfer summary
- An updated and analytical **chronology**.
- A three generational **genogram**

- An up to date and completed **assessment** signed off by the transferring team's Manager on all relevant children in the family and feedback provided to the family and referrer as appropriate.
- A completed and relevant SMART Plan detailing what needs to happen and setting out clear desired outcomes.
- If a child protection situation a clear and SMART safety plan should be recorded
- A copy of all current **Legal Orders** should be included on the file. In the case of a looked after child a copy of their birth certificate.
- All documentation should be signed off by the transferring social worker and their line manager prior to transfer.

Looked after children

The child's file should include the following: -

- A statutory assessment
- Placement Plan
- Care Plan/Pathway Plan (where appropriate)
- Review of Arrangements
- Family Arrangements
- Medical Consent
- Health Plan
- Date of Health review
- Date of Personal Education Plan review

Personal Education Plan

- Delegated Authority information
- Court documents/Birth Certificate/Court Order/Guardian's statement

Prior to transfer on Care Director the child's record should be quality assured by the supervising manager to ensure that the record complies with the practice standards listed above.

If the receiving team consider that these transfer standards have not been met then they have the responsibility to raise with the transferring team manager to discuss and agree what further work is needed prior to transfer.

It is the responsibility of the transferring team to ensure that all actively involved agencies, professionals and family members are notified of the transfer and the name and contact details of the newly allocated worker and team.