

# CASE TRANSFER PROTOCOL ACROSS SWINDON CHILDREN'S SERVICES

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## **1. Purpose**

The purpose of this protocol is to ensure the effective and efficient transfer of case responsibility between Swindon Children's Services Teams. Transfers should be timely; ensuring that children / families receive support with no gap in service provision, supported by the principle of 'no delay'.

Its purpose is also to ensure that:

1. There are no delays for families in receiving services
2. There are no unallocated cases across services
3. Appropriate decision-making and plans are in place to support the transfer of case responsibility to ensure children and families receive the appropriate level of service delivery, based on threshold and the level of identified need
4. Services / Partner Agencies are clear about where and when cases are transferred in accordance with consistent levels of threshold

## **2. Aims**

The main drive is to ensure that children and families have the right plan and are transferred to the right service to progress care planning and achieve improved outcomes for children. This will also reduce delays in planning for children at risk of significant harm or in need of permanency. This is a whole service protocol to ensure that services are provided at the right level; from early help to planning for permanency.

## **3. Transfer from MASH to the Assessment and Child Protection Team (ACP)**

The MASH team is responsible for the triage of cases 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.

The MASH Manager can make the decision that the contact meets the threshold for statutory social work intervention.

The case will be transferred to the Assessment and Child Protection Team (ACP) by the MASH manager. The ACP manager is responsible for the management oversight and allocation of the case. From this point, the ACP assume responsibility for the case.

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 were decision for either a joint or single enquiry. Following a strategy discussion ACP will be responsible for allocation.

Where a case has been closed to a Locality Safeguarding Team for less than 13 weeks it will be allocated back to the team that closed the case. On all cases 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 cases where there has been challenge made to the original threshold decision that results in a threshold being changed.

#### **4. Transfer of Children in Need or Child Protection from the Assessment and Child Protection Team**

Cases appropriate to transfer from the Assessment and Child Protection Team to the relevant Locality Safeguarding Team will be as follows:

- 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
- Children where a Statutory Assessment has been completed that recommends further social care intervention at Level 3 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) Cases**

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 Plan (S17 Children Act) in accordance with the Swindon Threshold Document (2018), this will be provided by the relevant Locality Teams.

The Assessment and Child Protection Team will include the case details on the weekly transfer list prior to the transfer meeting; with a synopsis of the case 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 case must be completed and signed off by the relevant Manager. The relevant Locality 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 case 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 Locality 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 case must be completed and signed off by the relevant ACP Manager which details that all tasks are completed prior to transfer.

The case will then be transferred on the ICS system 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.

### **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 case responsibility.

If the case is considered to meet the Threshold Level 3 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 Locality Team for the identified geographical area.

### **Child Protection Cases**

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 Locality Teams following the Initial CP Conference.

The Assessment and Child Protection Team will include the case details on the Weekly Transfer list with a synopsis of the case, providing notice (Flag up) to the relevant Locality Team that the Initial Child Protection Case Conference (ICPC) is due and the case 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 Locality Team will consider allocation of the case and the Locality Team Manager will provide the name of the new Social Worker via email to ACP. A Transfer Checklist for the case 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 Initial Conference and ensure this is shared with the parents and Chair of the Conference at least two days in advance of the Conference.

If the name of the Locality Team Social Worker cannot be provided before the Conference, a Manager from the Locality Team will attend the Conference and accept transfer of the case on behalf of the Locality Team.

The case transfer will be undertaken at the Initial Child Protection Case Conference organised by the Assessment and Child Protection Team. This meeting will be chaired by an Independent Child Protection Conference Chair and minutes are taken by the Quality Assurance Business Support Team.

The case will then be transferred by ACP on the ICS system to the Locality Team within 24 hours of the meeting having taken place. A Transfer Checklist for the case must be completed and signed off by the relevant ACP Manager which details that all tasks are completed. If the Initial Conference is deferred, the Assessment and Child Protection Team will continue to hold case responsibility until the Conference can be reconvened. If the decision from the Initial Child Protection Conference is that the child is not made the subject of a child protection plan then a SMART Child in Need Plan will be agreed at that point in the meeting. The Child Protection Conference Chair will ensure that an initial Child in Need Plan is made at the meeting. It is also expected that a date for the Child In Need Review Meeting will also be arranged within 10 days of the meeting and recorded in the plan and minutes.

#### **'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 ICS 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 Locality teams 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 Locality 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.

### **5. Court Proceedings Transfer**

If, following presentation of the case to the Care Panel, a decision is made that threshold has been met to escalate to Public Law Outline pre-proceedings or care proceedings the following needs to take place:

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

The case will remain with the allocated ACP Social Worker until the Pre-Proceedings meeting, when the case will then transfer over to the appropriate Locality Team. These cases will be flagged to the relevant Locality team via the transfer weekly transfer list. Both the ACP and the Locality team Social Worker/Team Manager will attend the Pre-Proceedings meeting.

The relevant Manager will chair the Pre-Proceedings Meeting, arranging the date for this meeting in consultation with the relevant legal and children's social care professionals.

The allocated Social Worker will complete the pre-Proceedings letter and ensure, overseen by the relevant Manager, that it is shared with the parent(s) within the agreed timescale; providing sufficient notice for parent(s) to seek legal advice.

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.

- **Agreement to Initiate Care Proceedings**

If the Care Panel agrees that care proceedings should be initiated then if the case is being held by the Assessment and Child Protection Team the relevant locality team will be invited to the Legal Planning meeting and the case will transfer to the Locality team shortly after the initial court hearing providing that the case is ready for transfer.

Social Workers from the transferring and receiving teams will need to attend court. Team Managers will attend as appropriate;

### **6. Unborn children**

The MASH will accept referrals in respect of the unborn child as early as the first booking appointment should concerns arise. 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 MASH beyond the first 12 weeks of pregnancy or those 'stepped up' from Early Help Intervention, where there is a risk that the unborn child's safety and welfare may be compromised upon arrival, will be accepted by MASH.

Upon receipt of a referral, 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. MASH will accept cases at 12 weeks of pregnancy where there are concerns which identify potential risk to the unborn. These cases will be referred across to the Assessment and Child Protection Team for a Statutory Assessment/ Pre-birth Assessment.

On completion of the Pre-birth Social Work Assessment one of the following options can be applied:

- No further action
- Step down to the Early Help Services
- Provision of Child in Need Services
- Convening of an Initial Child Protection Conference
- Recommendation to present to the Care Panel with a view to initiate PLO or Care Proceedings. This may warrant seeking removal from the birth parent(s)

The completion of the Pre-birth Social Work Assessment will inform the ongoing level of intervention of the case in accordance with assessed threshold of need and any presenting risks.

## **7. Emergency Protection Orders and Police Protection**

The Assessment and Child Protection Team / Locality Team Social Worker 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 case to the Court. The case must be raised at the earliest opportunity with the relevant Locality team to enable a decision to be made as to the appropriate timing of the case transfer. If the case is to progress to an Interim Care Order then a Social Worker from the Locality Team will be available to attend the Initial Court Hearing for the transfer to take place.

## **8. Section 7 and Section 37 Court Reports and Transfer of Supervision Order cases**

Notifications from the Court for Section 7 and 37 Reports should be transferred from the MASH to the relevant Locality Team for allocation of a Social Worker to complete the report. Transfer of Supervision Order cases should transfer from the MASH to the relevant Locality team

## 9. Alleged Relinquished Children

All cases involving the alleged relinquishing of a child will transfer from MASH to the relevant Locality team for an assessment to be completed and appropriate action taken to ensure that there is minimum delay for the child.

## 10. No Recourse to Public Funds Families

Cases 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 no safeguarding concerns are raised regarding the child(ren) then the specialist worker in ACP will hold the case.

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

## 11. Unaccompanied Asylum Seeking and Trafficked Children

Cases will initially be screened by the MASH Team and will process all UASC Referrals within 1 working day.

The outcome of UASC Referrals will be:

- Classified as UASC
- Social Work Assessment

If UASC is **under** 18 years old the case will be allocated to the Assessment and Child protection Team for a Social Work Assessment. The case will be progressed and transferred via the weekly transfer list in accordance with the outcome of the assessment; (*Children Looked After; Leaving Care Team*).

## 12. Private Fostering Notifications

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

These cases 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 Child Protection Team will undertake the Section 47 Enquiry and present the case to the convened Initial Child Protection Conference, at which point it will transfer across to the appropriate Locality Team.



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

**Notifications when a child is an open case to the Locality teams**

When the Locality 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 Locality 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 Locality 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.

**13. Children Looked After**

**Children transferring from ACP to Locality Teams**

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

The case transfer must be supported by a completed Transfer Checklist to ensure the case is 'Ready for Transfer'. This 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 Locality Manager will accept the case at the appropriate point of transfer and take responsibility to remove the transferring team involvement on the child's file. They will place a Manager's entry onto the case notes detailing that transfer has taken place.

**Children transferring from Locality Teams to the Children Looked After (CLA) Team**

At the point that a child or young person's permanency plan is confirmed the child/young person will transfer to the CLA from the locality team.

If the permanency 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. The manager of the CLA team should be also informed of the dates of IRHs and FHs following the CMH where they're booked so that they will be aware of cases transferring into the team

At the end of Court Proceedings the case will transfer to the CLA. It is good practice for liaison to take place with the CLA team regarding the child's final Care Plan.

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 locality team will apply and be completed.

## **14. Early Help Step Up and Step Down Process**

### **Social Care Step Up / Step Down Process**

**'STEP UP':** A service request is made to Children Social Care via the MASH (RF1) for a child currently supported under an Early Help Assessment Plan (EHA).

A child / young person who has been assessed via an EHA may need a service from a Social Care Team. This could be because the child's needs have changed or increased in complexity, or because risks have increased in relation to them.

The RF1 should be clear about thresholds and refer to the SSP Right Help at the Right Time.

Consent should be sought by referring agencies from the family prior to a step up request, unless it is not possible to obtain consent and delay would be detrimental, or unless seeking consent would place the child at increased risk of significant harm. Any decision to proceed without consent should be taken in consultation with the MASH Manager.

For all Step Up requests, the MASH referral form RF1 should be completed and sent with an up-to-date EHA action plan, and any relevant TAC minutes to the MASH team.

If the case is allocated for a Statutory Assessment in the Assessment and Child Protection Team, a Social Worker will contact the family and partner agencies already involved with the child. Any services provided by Early Help professionals should continue while the Assessment is carried out.

If the outcome of the assessment is that a S47 Enquiry should be conducted the outcome of this will determine future action which could be:-

- Threshold for an Initial Child Protection Conference is met from the 'Step Up' then Assessment and Child Protection Team will invite the relevant Early Help professionals to the Conference.
- The child is assessed to be 'in need' and statutory services need to be provided, the allocated Social Worker in the Assessment and Child Protection Team will record this on the Transfer list.

### **STEP DOWN from ACP to EH:**

A service request is made following statutory assessment for a child or family where the social worker has identified unmet Early Help needs.

The child is assessed to require Early Help and the allocated Social Worker in the Assessment and Child Protection Team will record this on the Transfer list.

Once a decision to step down a family, child or young person has been made, consent of the family to work with Early Help Hub must be sought by the allocated Social Worker

**STEP DOWN to Early Help from other teams:** A service request is made to wider Early Help for a child currently supported by Children's Social Care (an open case).

Children's social care should always aim to reduce their involvement as the children / family's needs become met. Families, children and young people identified by Children Social Care for

potential step down to early help will be identified at the earliest opportunity as part of ongoing case reviews.

Social Workers will consider all options for step down, including to universal service providers. Step downs will only be accepted into early help where the level of need has been reduced to meet the criteria as set out in the Swindon Safeguarding Partnership Right Help at the Right Time document.

Once a decision to step down a family, child or young person has been made, consent of the family to work with Early Help Service must be sought by the allocated Social Worker.

***Cases must not be stepped down so that children's cases can be 'monitored' or in order to make an onward referral to another agency.***

The allocated Social Worker will ensure the case is 'Transfer Ready' and provide the Early Help Lead professional with information that describes the family's needs. This should include:

- A recent or updated assessment
- CIN plan
- Decision & Chair's report from final CP review (if appropriate)
- Specialist assessment or other relevant supporting information

Where a case is being stepped down from an existing Child in Need Plan, the Social Worker will convene a final Child in Need Review Meeting which will also serve as the step down meeting.

The Social Worker will inform the family and other professionals. This meeting should identify a new lead professional and produce the basis of an Early Help Plan.

## **15. Children with Disabilities**

A referral will be received by the MASH.

The Children with Disabilities 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 Children with Disabilities 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 Children with Disabilities Team then the child would pass to the Children with Disabilities 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 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 Children with Disabilities 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 an unallocated case 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 case meets the threshold for statutory social work intervention.

The case is transferred to the Children with Disabilities Team at the point that the MASH Manager progresses the case from contact to referral. The referral will be given an outcome of Single Assessment or strategy discussion. From this point, the Children with Disabilities Team will assume responsibility for the case.

Any strategy meetings will be chaired by an ATM/ Team Manager in the Children with Disabilities 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 Children with Disabilities Team Manager will determine the next steps.

Where a case has been closed by the Children with Disabilities team for less than 13 weeks, then MASH will allocate the case 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 Children with Disabilities 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.

## 16. Leaving Care

### Process for referral and transfer to Care leavers Team from Locality Teams

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 Care Leavers Team Manager of this by the age of 15½ years, on the basis there is no plan to return to their family.

Commented [CL1]: No plan to return to family

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

From the young person's 16th birthday the Social Worker will also be deemed the young person's Personal Adviser.

Arrangements will be made for a Pathway Adviser to be appointed by the Positive Futures Team Manager by 17 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 usually take the lead with the Pathway Plan, unless they have particularly complex needs, which determine that a Social Worker takes the lead.

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. The Social Worker will retain case responsibility 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 17-year 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 17<sup>th</sup> 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 16<sup>th</sup> birthday.

## **17. Opal Team**

### **Process for referral and transfer to Opal Team from Locality Teams**

#### **Exploitation and Risk Outside The Home (ROTH)**

Children and young people who are risk of exploitation due to risks outside of the home, will transfer to Opal from ACP or FST at:

CP/ROTH 1st core group

Care Proceedings at 1st court hearing

#### **Southwark Judgement**

Children and young people who require an assessment due to them being homeless (Southwark Judgement) will be assessed by ACP or if already open, by the respective team. If the child or young person requires ongoing support, the child's case will transfer to Opal at:

CIN 1st Review

CLA at 1st CLA Review

## **18. Closed Cases that are re-referred**

Any case re-referred to MASH less than 13 weeks from closure (the date of closure recorded on ICS) will be transferred to the last team that was allocated for a decision regarding future action needed. If a case 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. Case 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 case discussion prior to transfer between transferring and receiving workers and managers**

To enable an effective transfer of case responsibility, 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 case information and highlighting the key issues and actions needed including a management analysis. This should be on Care Director at the time of case transfer.
- All case 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 case 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 the ICS case records should be quality assured by the supervising manager to ensure that the case 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 case transfer and the name and contact details of the newly allocated worker and team.