

Signs of Safety Practice Framework and Expectations



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Forward by Director, Children's Social Care

Signs of Safety has been the Practice Model in Bexley for nearly six years. We have already seen the positive advantages of this relational strengths-based / risk organised model in our work with children and their families.

At Bexley we believe in relational, collaborative practice, that has a framework that supports families and practitioners alike.

In response to this belief we thought hard with practitioners and managers at all levels about what child-centred, strengths based, rigorous practice, driven by compassion and the belief that children belong in their natural networks, actually looks like in practice.

The result is this document which is the result of many rich and thoughtful

The result is this document which is the result of many rich and thoughtful conversations with practitioners and managers.

This is a living, working document that has been updated as we move forward in the embedding of our model. It is a continued privilege to be part of a process where practitioners give their view in what works for them and the families they work with.

Stephen Kitchman DCS

Introduction and how to use this document

Bexley has adopted Signs of Safety as its practice framework. The purpose of this document is to set out the practice expectations for each part of the service so that everyone is clear about what good Signs of Safety practice looks like in Bexley and so that everyone knows what is expected of them as they carry out their work with children, young people and families.

This document has been developed collaboratively with practitioners and managers, with the underlying philosophy that those closest to the front line are in the most unique position to inform the organisation about what works. Every front-line team in the organisation has had the opportunity to use Bexley's 'Practice Framework Reflective Tool' (Page 54) to discuss and reflect on what good Signs of Safety looks like in their particular team.

The discussions and thinking from these conversations have been drawn together to inform this document. Front line managers have also had the opportunity to use the tool to reflect on their expectations and senior managers have been engaged in the process of setting clear, non-negotiable 'bottom lines' for their service areas. The result is a process that has involved many rich and engaging discussions about practice and a document that has been informed by practitioners and managers at every level and across all service areas.

Discussions with practitioners and managers throughout this process highlighted some specific areas of confusion. As a result, particular attention has been paid to terminology, plans and meetings in pages 5-9. Pages 10-51 go on to set out the expectations for practitioners working within the Signs of Safety practice framework by service area. It is anticipated that this section will be used by social workers and managers as a working document to guide them in their day to day practice. Pages 54-69 contains the reflective tool that was used to develop the expectations. This tool brings together the values and principles that underpin the work in Bexley, with questions that 'prompt' thinking and reflection on practice and tools that enable practitioners to carry out the work. It is anticipated that social workers and their managers will use this tool to reflect on case work individually or in individual or group supervision.

Whatever practice framework is in place, practitioners and their managers also work within the framework of The Children Act 1989 and must adhere to any associated statutory guidance. Pages 70-77 contain the flow charts from Working Together to Safeguard Children 2018 which have been annotated to provide clarity about how we can use Signs of Safety whilst we follow the statutory process required of us.

For further information, training and support on Signs of Safety in Bexley, please contact the Signs of Safety team at signsofsafety@bexley.gov.uk



Glossary

Appreciative Inquiry: A line of questioning that purposefully focuses on what has gone well and brings about an understanding about how this has been achieved through reflective questioning in order to support learning and development for the future.

Bottom line: A minimum set of conditions set by the social worker and their manager about how the safety goal should be achieved.

Complicating Factors: Actions, events, circumstances in and around the family and parent's adverse experiences in childhood that make it more difficult to deal with the problem e.g. parent not taking mental health medication, separated parents, impact of disability, poverty, overcrowding etc.

Contextual Safeguarding: An approach to understanding, and responding to, children and young people's experiences of significant harm beyond their families. It recognises that the different relationships that children and young people form in their neighbourhoods, schools and online can feature violence and abuse.

Cultural Genogram: A genogram developed with the family that explores family relationships, history, values and beliefs.

Danger Statement: A clear, jargon free statement setting out what we are worried about and what will be the likely impact on the child/young person if nothing changes, where there are worries about the child/young person's safety.

Direct Work: Activity based sessions completed with the child/young person and family to hear the child/young person's voice, increase understanding and achieve end goals.

Existing Safety: Actions taken by parents and others in the child/young person's life to make sure the child/young person is safe when the danger or worry is present.

Existing Strengths: These are the positives; what is going well, what helps, what people, plans and actions are around the child/young person and family that help.

Family Finding: A set of strategies and tools, values and beliefs developed by Kevin A Campbell. The approach is mandated by United States Federal Law for all children and young people in foster care or at imminent risk of placement in the care system and has been recognised as best practice when using the Signs of Safety approach.

Family Network Meeting: A meeting attended by the family's naturally connected network whereby the social worker facilitates the family and their network to develop a safety plan for the child/young person.

Family Support Meeting: A meeting in the Family Wellbeing Service that brings together the family and their network and professionals, in order to review the impact of the plan.

Group Supervision: A facilitator, supported by an advisor, leads a case holder and a number of observer/participants through the process of developing a genogram, sharing information about the case

and developing danger statements, safety goals and best questions. The purpose of this is to reflect, practice skills and develop next steps.

Harm Analysis Matrix: A matrix to identify the harmful behaviour, its severity, frequency and impact on the child/young person.

Harm: An incident or behaviour of a parent/carer that has occurred that creates worry for this child/young person or family.

Internal Case Mapping: A process involving the case holding social worker, whereby information is considered and analysed across the seven Signs of Safety analysis domains (harm, danger, complicating factors, strengths, safety, safety goals and next steps).

Mapping with a Family: The assessment process whereby the social worker engages the family by asking questions in order to gather information and consider and analyse this with the family, across the seven analysis domains.

No Order Principle: Section 1 of the Children Act 1989 states (5) where the Court is considering whether or not to make one or more orders under this Act with respect to the child/young person, it shall not make the order or any of the orders unless it considers that doing so would be better for the child/young person than making no order at all.

Picture Exchange Communication System' (PECS): A tool that enables people with little or no verbal communication to communicate using pictures. It enables people to communicate a thought, request or anything that can reasonably displayed or symbolised on a picture card.

Plan Rules: A plan detailing who will do what from the family/network when danger arises.

Safety Goal: A clear, behaviourally specific, jargon free description developed collaboratively with the family of what we need to see to know the child/young person is safe enough to close the case. What will the members of the family be doing that will tell us that the child/young person is safe.

Restorative Practice: Restorative practice is a term used to describe a way of being, an underpinning ethos, which enables us to build and maintain healthy relationships, resolve difficulties and repair harm when relationships breakdown.

Safety Journal: Can be used by the family network to demonstrate what they are doing to keep the child/young person safe, every time the safety plan has worked they record this in the safety journal. It need not be a written pen and paper record, but can be recorded as a voice memo on a phone, a text sent to the Network Lead or typed and saved as a note or document on a phone, tablet or computer.

Safety Object: The Safety Object is for the child/young person and should form part of the child's safety plan. The family and the network need to be involved in the Safety Object plan. It is essential that there is a practice (just like in a fire drill) of the plan. If the child's safety object is a My Little Pony and the plan is that they will move this from its normally agreed place in their bedroom to the front window if they are feeling worried or seen daddy hit mummy, drink or not had any breakfast, then this must be tested out first. Whoever is responsible for acting on the object, would then act.

Safety Plan: The plan that the family develops setting out what everyone in the family will do on a day to day basis to keep the child/young person safe, even when things become difficult.

Safety Planning: The process of engaging the family and their wider network through a series of questions in order to support them to develop a safety plan for the child/young person. The safety plan must address each danger statement.

Scaling Question: A question that asks someone to rate something on a scale of 0 to 10, where the 0 and 10 are clearly defined.

Solution Focused Questions: A range of questions that enable conversations about problems/difficulties to be discussed in a way that opens up possibilities for change by identifying the things that are working and the things that would need to be different for the problem to be resolved.

Success Goal: A clear, behaviourally specific, jargon free description of what we want to see to know that everything is on track where the child/young person is living and in the child/young person's life to enable them grow up well and be successful.

Three Houses: A tool for working with children and young people to help them identify their worries, the things they feel are going well and the things they would like to be different.

Timeline: A clear agreed trajectory of what will happen between 'now' and case closure.

Wellbeing Goal: A clear, behaviourally specific, jargon free description of what we need to see to know the child/young person is healthy and well so that the case can close. Includes what the members of the family be doing that will tell us that the child/young person is healthy and well.

Words & Pictures: A specific piece of work that helps children and young people understand what the adults involved are worried about and what everyone is doing to sort out those worries, in the form of a story board for the child. The Words & Pictures story board is developed with the parents and the parent shares this with the child.

Worry Statement: A clear, jargon free statement setting what we are worried about and what will be the likely impact on the child if nothing changes, where there are worries about a child's wellbeing.

Terminology

Munro, Turnell and Murphy (2016) note that one of the most important developments in the Signs of Safety innovations protect has been to expand the approach to fit across the whole service from early help through child protection and looked after children. Below shows the 'Signs of' for each service and the table shows the terminology for the analysis categories in the different services.

Status Signs of...

Family wellbeing Signs of Wellbeing

Child in need Signs of Safety

Child protection Signs of Safety

Children in our care* (children looked after) and adoption Signs of Success

*where there are safeguarding concerns about a looked after child, there will also be some Signs of Safety within the overall Signs of Success care plan

Fostering Signs of Stability

Young people / young adults leaving care Signs of Success

Children with Disabilities

review only
 child in need
 child protection
 children in our care (children looked after)
 Signs of Safety
 Signs of Success

	What are we worried about?			What's working well?		What needs to happen?	
Assessment Type	Past	Future	Complicating Factors	Existing Strengths	Existing Solutions	Goals	Next Steps
Signs of Safety	Harm	Danger	Complicating Factors	Existing Strengths	Existing Safety	Safety Goals	Next Steps
Signs of Wellbeing	Wellbeing Concerns	Critical Worries	Complicating Factors	Existing Strengths	Existing Wellbeing	Wellbeing Goals	Next Steps
Signs of Success	Worrying Behaviour	Critical Worries	Complicating Factors	Existing Strengths	Existing Success	Success Goals	Next Steps

Types of meetings

'Nothing about us without us'

The Signs of Safety approach emphasises the need to foster open, honest and respectful relationships with families. This means social workers and other professionals have to have difficult conversations with families in a compassionate and respectful way. In Bexley, when we convene meetings to discuss worries about a child, we will always involve family members in these meetings.

The only exceptions to this would be in relation to strategy meetings/discussions or legal planning meetings. There may be a need for a meeting to take place without the family when there are strong disagreements within the professional network that are impacting on interagency relationships and a meeting is needed to develop a more shared understanding of the worries and an improvement of working relationships. In these instances, the family should be aware that a meeting is taking place, unless this would place the child at further risk. The outcome of the meeting should be discussed with the family as soon as possible after it has taken place

Thought should be given to the timing of meetings to minimise the number of meetings that family members and social workers are attending. For example, a review family network meeting may take place at the start of a child in need or core group meeting, with the professionals joining at a later time.



Practice expectations and bottom lines



Multi-Agency Safeguarding Hub (MASH) Practice Expectations and Bottom Lines

Signs of Safety principles	Bexley values	MASH
Working relationships at the heart of practice	Child centred Family led	 We look carefully through the history and consider what life is like for the child. We check it is convenient to speak with family members when they call. We always speak with family members respectfully. We don't leave voicemail messages on a Friday for parents to worry about over the weekend. We carefully go through each part of the concern with parents, seek to understand their view about this and record their response. We always ask for consent to speak with other professionals about the child/family, unless to do so would place the child at risk of harm. We always consider carefully the implications to the child and to the parents if we are considering overriding parental consent to talk to other professionals. When a decision has been made to allocate to the R&A team for an assessment, practitioners in the MASH explain to parents that in Bexley we will work with them and their wider network and will support them and their network to identify solutions to the difficulties. The MASH practitioner will encourage the parents to start thinking about who in their network they would like to involve.
Adopt a stance of critical inquiry	Evidence based Risk sensible	 We always check the basic details to make sure they are correct and make sure we are aware of any previous addresses that the family have lived. We map referral information into what's working well and what we are worried about. We ensure that when we are speaking with professionals that we ask questions that help us to be clear about the specific, observable behaviours of the parents/children/ others that we are worried about. We ensure that we are clear about what is fact and what is judgement and that any fact is accurate. We always ask questions to find out about the strengths and safety that exists within the family. We always speak to the people/professionals that know the child/family best. We always share with the referrer our next steps.

Signs of Safety principles	Bexley values	MASH
Support practice to	Solution focused	We ensure we are clear about what information we need to get before we make contact with a parent or professional.
be as good as it can be	Focused and purposeful	

- Social Workers ask referrers questions that help us to understand the past and current harm; i.e. 'what specifically are the parents doing', 'how often' 'how severe', 'when was the last time' 'what was the worst time' 'what is the impact on the child?'
- Social Workers deliberately ask questions to the referrer and parents that enable us to understand the strengths and the safety that exists in the family.
- We always feedback the outcome of the referral to the family and to the referrer.

Family Wellbeing Practice Expectations and Bottom Lines

Signs of Safety principles	Bexley values	Family Wellbeing Service
Working relationships at the heart of practice	Child centred Family led	 We share the service leaflet when we first visit a family to enable families to understand and be clear about what the service offers and how we can provide help and support. We are always respectful towards children and their families. At the initial visit, the family are supported to complete a genogram, enabling careful exploration of the family's wider family/support network. The family are encouraged to involve their wider network in developing the family support plan through a family network meeting and in reviewing it in ongoing family network meetings and/or family support meetings. We use the three houses (or equivalent) during the initial visit with the child to develop an understanding of the child's worries, the things the child feels are going well and the things they would like to be different. We use a variety of direct work tools from the direct work kit in our ongoing work with children and their families as part of the support to enable the family to move towards their wellbeing goals. Words & Pictures explanations are developed with parents and used to help children understand what the adults are worried about and how everyone is working together to help sort out these worries. Family Network Meetings 'Family finding' tools and techniques are used to help the family develop their naturally connected support network.
		 When the family wellbeing assessment confirms that there are worries about a child, a family network meeting is arranged at the earliest point and is attended by the people who are naturally connected to the child and their family. At the family network meeting, the draft worry statements and wellbeing goals are shared and refined with the family and their network. Members of the family's network are asked to scale the situation from 0-10 in relation to each worry statement/ wellbeing goal. Bottom lines are kept to a minimum and shared clearly with the family. Family members and their informal network are invited to develop a plan that will address each worry.

Signs of Safety principles	Bexley values	Family Wellbeing Service
		 We facilitate the process by asking questions that help to test out the wellbeing plan. Everyone in the network gets a copy of the plan developed.
Adopt a stance of critical inquiry	Evidence based Risk sensible	 We triangulate what children, parents and professionals are telling us, in addition to what we observe the child and parents doing. At family support meetings the progress and impact of the family plan is mapped with the family and professionals.
Support practice to be as good as it can be	Solution focused Focused and purposeful	 We use scaling questions with the child and their family members to consider and understand the children's wellbeing and each person's view of the family situation/the impact the family plan is having. We carefully prepare our sessions with children and families. The visits and family plans are clear about the next steps, the work that will be completed with the family, how and why.

- In all assessments the analysis will include reflection on the complicating factors, a clear worry statement with a paired wellbeing goal and clear next steps.
- Words & Pictures explanations will be developed with all families to help children understand the worries and what the adults are doing to sort out the worries.
- A case mapping will take place for all cases being considered for transfer to children's social care.
- A brief case mapping will take place with the family during the family support meeting.
- Family support meetings will use scaling questions to understand the views and experiences of children and their families to help understand how the support offered is helping to make a difference.
- Group Supervision is undertaken as a minimum of once per month.

Children with Disabilities Practice Expectations and Bottom Lines

Signs of Safety principles	Bexley values	Children with Disabilities
Working relationships at the heart of practice	Child centred Family led	 When we first visit a family, we will always spend time explaining clearly to the family what our role is and what can be expected from us. We make use of observations of children in different settings; i.e. school and home, paying attention to what they are telling us through their behaviours and interactions. We observe children's interactions with their parents, peers and other significant people in their lives. We use communication aid tools such as 'Picture Exchange Communication System' (PECS) for children with limited speech. We use team iPads with picture aids to help children communicate. When there are worries about the safety of a child, a family network meeting is convened. For any new referral, a family network meeting is convened.
		Family Network Meetings
		 'Family finding' tools and techniques are used to help the family develop their naturally connected support network. The family network meeting is attended by the people who are naturally connected to the child and their family. At the network meeting, the draft danger statements and safety goals are shared and refined with the family. The family is invited to scale the situation from 0-10 in relation to each danger statement/safety goal. Bottom lines are kept to a minimum and shared clearly with the family. Family members are invited to develop a plan that will address each worry. The social worker facilitates the meeting by asking questions to help test out the safety plan. Everyone in the network gets a copy of the safety plan. The safety plan is incorporated into the overall plan for the child. We continue to work with the whole family network; the effectiveness of the safety/wellbeing plan is reviewed through regular family network meetings. In review family network meetings, questions are used to explore what the family have done well in order to keep the children safe/well and how they managed to do this.

Signs of Safety principles	Bexley values	Children with Disabilities
Adopt a stance of critical inquiry	Evidence based Risk sensible	 Every case has a chronology that sets out the significant events and the impact on the child and highlights the patterns. When a decision needs to be made on a complex case, a case mapping takes place, including the family. We triangulate what professionals say, what parents say and what the child is saying (either verbally or through their behaviours and interactions). We consider whether the child is enjoying and achieving and succeeding in line with their potential. We use research to review and make decisions about whether packages should be amended. We use the Munro decision making tree to help consider the options available to us when making decisions. We will always consider when making decisions; what is the risk, how can this risk be managed, what support is available and what will be the impact if we do or don't put this support in.
Support practice to be as good as it can be	Solution focused Focused and purposeful	 We use scaling questions to measure progress/confidence in the care package. Appreciative inquiry takes place regularly in team meetings in order to learn from good practice. Before visiting a family, we always consider what we want to achieve from this visit, what we need to know and how we will know we have achieved the goal for the visit.

- Family network meetings take place for all new cases coming into the children with disabilities service, within 15 working days of allocation.
- We are always clear about the actual support being provided, the outcome we are aiming to achieve in providing this support and who will be providing the support. This is recorded clearly in the assessment.
- All active child in need cases have danger statements and safety goals that have been shared with parents and these will be incorporated into the case summary.
- Every child should have a version of their plan that they can understand, in line with their age and level of understanding. For those children who are more able, a Words & Pictures version of the plan is developed with the parents and shared with the child.
- Group supervision takes place at a minimum of once per month.

No Recourse to Public Funds Practice Expectations and Bottom Lines

Signs of Safety principles	Bexley values	No Recourse to Public Funds
Working relationships at the heart of practice	Child centred Family led	 We look carefully through the history and consider what life is like for the child. We always ask for consent to speak with other professionals about the child/family, unless to do so would place the child at risk of harm. On the first visit to a family, we introduce ourselves and the way that we work with families in Bexley and what they can expect from us. We inform families of their rights and entitlements. From the first visit to a family, we complete a genogram/ecomap with the family and explore their support network to prevent isolation. We carefully plan and undertake three houses (or equivalent) with the children as part of the assessment in order to understand their worries, the things they feel are going well, and the things they want to be different, and visit children and young people at a minimum of once every six weeks. We spend time understanding the child and members of their family's' beliefs, values, religion, family history and culture and what these mean to them personally. We work to alleviate fears and actively 'myth-bust' with families around access to support and services where they have no status in the UK. We are honest and open with families and manage expectations, for example that accommodation may not be offered locally and could be much further away. The work we do with the children is captured in the assessment and shared with the parents. When children are very young, we observe how they look, behave and interact with others in order to understand what they are telling us. When parents say they have no one in their naturally connected network, we sensitively but persistently ask questions to explore this further, use the 'family finding' tools and work with parents to help develop the informal network of support around the family. Where there are concerns for the child's safety, we collaboratively develop an immediate safety plan with the family from the first vis
Adopt a stance of	Evidence based	The first thing we do when we are allocated a case is to make time to read the file and understand the history and the likely impact of this on the child. A chronology is developed to support this understanding.

Signs of Safety principles	Bexley values	No Recourse to Public Funds
critical inquiry	Risk sensible	 We seek to gain a detailed understanding of the family's immigration history and journey to the UK and identify any indicators of exploitation, modern slavery and female genital mutilation, particularly when children and young people have been brought to the country separately from their caregivers. We always check the basic details to make sure they are correct and make sure we are aware of any previous addresses that the family have lived. We work in partnership with other agencies and organisations such as housing, police, immigration, probation and the courts to provide a robust assessment of need, and support with any active investigations. We use information from the mapping with the family, with the information about harm/strengths and safety from the professionals that best know the child, what the child is saying and what we observe the family doing to assess the safety of the child. We always map information across the seven analysis domains (harm, complicating factors, danger statement(s), existing strengths, existing safety, safety goal(s), and next steps). Our work is informed by research about what increases or mitigates the risks (e.g. in relation to domestic violence, mental health, attachment, drug and alcohol misuse, CSE, sexual abuse) to help understand the impact on the child and to provide evidence to support our thinking about how worried we should be. We utilise evidence-based tools such as the harm analysis matrix, SafeLives Dash, NSPCC Neglect Toolkit, Modern Slavery Assessment Tool, Research in Practice, and other tools to aide our analysis. We complete a financial assessment to help determine if the family are destitute. We create danger statements that are clear, specific and jargon free and these are shared with families so they are clear about why we are involved. Every danger statement has a linked safety goal that is clear and specific and describes what we need to see in order to close the
Support practice to	Solution focused	We ensure we are clear about what information we need to get before we make contact with a parent or professional.

Signs of Safety principles	Bexley values	No Recourse to Public Funds
be as good as it can be	Focused and purposeful	 Before a visit or meeting, we have made time to think through and be clear about what we are trying to achieve, how we will achieve it and how we will know we have been successful. We conduct a holistic assessment to identify other areas of need and/or complicating factors in addition to presenting needs around housing and finance. We prepare solution focused questions before mapping with families or facilitating family network meetings. We use a strengthening and narrative approach to understand the family's story and support families to identify and build on their strengths. We support families with their Home Office application and provide additional advice and support, including letters to support fee waivers and free healthcare, monthly subsistence, temporary accommodation, and signposting to other services.

- Safety plans are clear and created collaboratively with the family from the first visit.
- Social Workers always use the seven analysis domains as the basis of their assessment.
- Social Workers always use the three houses or equivalent to carefully explore children's worries, the things they feel are going well and the things they want to be different.
- If safeguarding issues are identified, the case is transferred to Family Support & child protection, however we will continue to support the family with their immigration status.
- Group supervision takes place at a minimum of once per month.

Referral & Assessment Practice Expectations and Bottom Lines

Signs of Safety principles	Bexley values	Referral & Assessment
Working relationships at the heart of practice	Child centred Family led	 On the first visit to a family, we introduce ourselves and the way that we work with families in Bexley and what they can expect from us. On this visit we use the draft danger and safety statements from MASH, or those we have refined to explain why we are starting an assessment. From the first visit to a family, we begin a cultural genogram with the family and start to map out the worries/strengths and safety together with the family. We carefully plan and undertake age appropriate direct work i.e. three houses (or equivalent) with the children as part of the assessment in order to understand their worries, the things they feel are going well, and the things they want to be different. We spend time understanding the child and members of their family's' beliefs, values, religion, family history and culture and what these mean to them personally. The work we do with the children is captured in the assessment and shared with the parents. When children are very young, we observe how they look, behave and interact with others in order to understand what they are telling us. When parents say they have no one in their naturally connected network, we sensitively but persistently ask questions to explore this further, use the 'family finding' tools and work with parents to help develop the informal network of support around the family. Where there are concerns for the child's safety, we collaboratively develop an immediate safety plan with the family from the first visit. Family Network Meetings
		 'Family finding' tools and techniques are used to help the family develop their naturally connected support network. When the initial visit to the family confirms that there are worries about a child's safety, a family network meeting (FNM) is convened and is attended by the people who are naturally connected to the child and their family. Before the family network meeting, we collaboratively refine the danger statement(s), safety goal(s) and bottom lines with the family as part of our preparation.

Signs of Safety principles	Bexley values	Referral & Assessment
		 Consideration is given to the child/young person participating in their family network meeting. At a family network meeting, we share and refine the draft danger statements and safety goals with the family and invite family members to scale the situation from 0-10 in relation to each danger statement/safety goal. Bottom lines about how the safety goal(s) can be achieved are kept to a minimum and shared clearly with the family. Family members are invited to develop a day to day safety plan that will address each worry or are supported collaboratively to a write the plan using the family's words. We facilitate the process by asking questions to help test out the safety plan. Everyone in the network gets a copy of the safety plan. The safety plan is incorporated into the child in need or child protection plan.
		Rapid Family Network Meetings
		 In an emergency situation where the child's immediate safety is a worry, a strategy discussion takes place. Once the strategy discussion has taken place, the social worker and their manager do their upmost to convene a rapid family network meeting on the same day (which could be in the office, at a hospital or by phone). The Rapid Family Network Meeting focuses on what needs to happen to keep the child safe for the nextdays. Contingency planning takes place to identify a foster placement in the event that the network is unable to identify a satisfactory safety plan.
Adopt a	Evidence	The first thing we do when we are allocated a case is to make time to
stance of critical inquiry	based Risk sensible	 read the file and understand the history and the likely impact of this on the child. A chronology is developed to support this understanding. To assess the safety of the child we use information from our mapping with the family, the information about harm/strengths and safety from the professionals that best know the child, what the child is saying and what we observe the family doing. When other professionals are worried, we help them to be clear and specific about their observations, clarifying how often, over what period and how serious these worries are.

Signs of Safety principles	Bexley values	Referral & Assessment
		 We purposefully ask family members and professionals questions to find the things that are going well and the things the family are doing that keep the child safe, even when things are difficult. We always map the information across the seven analysis domains (harm, complicating factors, danger statement(s), existing strengths, existing safety, safety goal(s), and next steps). Our work is informed by theory and research about what increases or mitigates the risks (e.g. in relation to domestic violence, mental health, attachment, drug and alcohol misuse, CSE, sexual abuse) to help understand the impact on the child and to provide evidence to support our thinking about how worried we should be. We utilise evidence-based tools such as the Safe Lives, Dash, NSPCC, Neglect Toolkit, Modern Slavery Assessment Tool, and other tools to aide our analysis. In strategy meetings/discussions and legal planning meetings, information is considered across the seven analysis domains. We create danger statements that are clear, specific and jargon free and these are shared with families so they are clear about why we are involved. Every danger statement has a linked safety goal that is clear and specific and describes what we need to see in order to close the case (or return the children to the parents care) and these are shared with families so they are clear shared with
Support practice to be as good as it can be	Solution focused Focused and purposeful	 Before a visit or meeting, we make time to think through and be clear about what we are trying to achieve, how we will achieve it and how we will know we have been successful. We prepare solution focused questions before mapping with families or facilitating family network meetings.

- Safety plans are clear and created collaboratively with the family from the first visit.
- Social Workers always use the seven analysis domains as the basis of their assessment.
- Family network meetings take place when there are worries about the child's safety. If this does not happen by the point of transfer, there is a clear record of the family finding work that has been undertaken so the next worker can pursue this with the family.

- Social Workers always use the three houses or equivalent age appropriate direct work to carefully
 explore children's worries, the things they feel are going well and the things they want to be
 different.
- We never use written agreements in any of our work to dictate to a family what needs to happen, if there is anything that we can't compromise on we will set this out in our bottom-lines.
- Group supervision takes place at a minimum of once per month.

Staying Together Practice Expectations and Bottom Lines

Signs of Safety principles	Bexley values	Staying Together
Working relationships at the heart of practice	Child centred Family led	 We are upfront and tell families about our service providing them with a leaflet to refer back to. We spend time building a relationship with families towards their best hopes and preferred future. We talk separately with both parents and young people to hear parents' views and the voice of the child before getting them involved in family led plans. We help families in crisis to slow down, consider options and plan for the next day. We use family finding tools and techniques to enable children to remain in their family network where appropriate. We work collaboratively with the child/young person's allocated social worker and understand their best hopes before agreeing what goals Staying Together can achieve.
Adopt a stance of critical inquiry	Evidence based Risk sensible	 We facilitate direct work sessions with families according to their needs and carefully prepare for sessions. We use scaling questions with families and professionals to review progress and consider next steps. We have fortnightly group supervision and use supervision to reflect through a questioning approach, decisions / strategies used by parents / social workers. We feedback concerns to the child/young person's social worker and attend meetings to feedback our work and views.
Support practice to be as good as it can be	Solution focused Focused and purposeful	 We run groups, drop-ins and booster sessions for families, children and young people. We aim to always use solution focused questions and scaling. We have no waiting lists and our intervention can begin within 24 hours. We provide an intensive service, which can be as regularly as daily if required, including weekends and evenings. We provide a daily duty service where we can support immediately if a family is in crisis.

Signs of Safety principles	Bexley values	Staying Together
		When we no longer work with families and young people we create exit strategies and signpost to other services.

- We offer a minimum of four sessions and then we review the success with families.
- We always prioritise safety and do not support staying at home if it is not safe to do so.
- Our visits are purposeful and planned in advance to support the family moving towards their preferred future.
- We strive to be persistent and consistent and provide continuity to the families we support by always allocating a primary and secondary worker.
- To prevent children and young people coming into care unless it is the best thing for them.
- We complete direct work with young people and their family to develop relationships and learn new coping strategies to prevent breakdown of relationships and children not being able to remain at home.
- Group supervision takes place at a minimum of once per month.

Transfer of Cases Practice Expectations and Bottom Lines

Signs of Safety principles	Bexley values	Transfer of Cases
Working relationships at the heart of practice	Child centred Family led	 When we are handing a family over to another team or worker, we will always explain to the child and the family why this is happening. When we are handing a family over to another team or worker we introduce the new worker to the child and family, go through the danger statement and safety goals with the family and new worker and invite the family to talk through the safety plan.
Adopt a stance of critical inquiry	Evidence based Risk sensible	 The danger/worry statements, existing strengths and safety, safety/wellbeing goals and the safety/wellbeing plan will be shared at transfer panel. The first thing we do when we are allocated a new child and family before making contact with the family is to book in some time in our diary to read the file and understand the family history. This includes reading chronologies and previous assessments.
Support practice to be as good as it can be	Solution focused Focused and purposeful	When we are allocated a new family, we ensure that we are clear about the safety goal and how the plan aims to achieve this goal.

- When families transfer between services there will always be a safety plan that has been developed with the family and their wider network via a family network meeting.
- When families transfer between services, there will always be a clear timeline of work that has been developed and shared with the family.

Preparing for a Child Protection Conference Practice Expectations and Bottom Lines

Signs of Safety principles	Bexley values	Preparing for a Child Protection Conference
Working relationships at the heart of practice	Child centred Family led	 The mapping we have completed with the family for the assessment / s47 enquiry is brought to the Initial child protection Conference (ICPC). Three houses (or equivalent) that we have completed with the child(ren) for the assessment is brought to the ICPC. A family network meeting takes place prior to the ICPC and a safety plan is developed. The safety plan is brought to the ICPC. We explain to the child and the family what a child protection conference is and what will happen in this meeting. The child protection Chair has a pre-meeting with the family before the conference starts in order to check their understanding of what is happening, why the conference is taking place and to understand their views. When children or young people attend the initial or review conference, the child protection Chair meets with them before the conference starts to find out what has been happening from their perspective and to understand their views.
Adopt a stance of critical inquiry	Evidence based Risk sensible	Social workers and their managers are not obliged to have a consultation with a child protection chair, prior to convening a child protection conference. The social work team could decide to request a date for an Initial Conference and this will be made available from the day a strategy meeting/discussion is held. Where consultation is required, the child protection chairs will always check that danger statements have been developed with the family; that the assessment (mapping) has been developed and shared with the family and that the social worker has engaged the network to develop a safety plan. A consultation with a child protection chair is an opportunity for a social work manager and social worker to spend time with an experienced practitioner (CP Chair) to discuss complicating factors; that may be affecting our ability to understand the experiences of children and their families. The consultation is an opportunity to explore the information the social work team have, understand the gaps and help them to think about what the best next steps may be to work with the children and their family.

Signs of Safety principles	Bexley values	Preparing for a Child Protection Conference
		As such, the CP Chair will make recommendation based on the information shared in the consultation.
Support practice to be as good as it can be	Solution focused Focused and purposeful	The child protection Chair develops questions for the conference based on the case mapping (assessment), the family safety plan and the discussions with the social worker and their manager.

- A family network meeting will have always taken place prior to conference and a safety plan developed with the parents and wider network.
- Prior to an initial child protection conference, time will have always been spent with the child exploring what they are worried about, what is going well and what they want to change via the three houses worksheet, or equivalent. And this will have been shared with the parents.

Child Protection Conference Practice Expectations and Bottom Lines

Signs of Safety principles	Bexley values	Child Protection Conference
Working relationships at the heart of practice	Child centred Family led	 A safe, accessible, confidential setting is provided for the Conference to take place. We always speak respectfully with family members throughout the conference. We (child protection chairs) ensure that the child's voice is clear in the conference, either through encouraging their attendance or through sharing the direct work that has been done with the child (3 Houses or other). child protection chairs ask questions that encourage the family to identify what they currently do to protect and look after their child. Parents are invited to show their understanding of professional worries. Next steps always include the social worker working with the family to develop a Words & Pictures version of the safety plan for the child (if this has not been completed already).
Adopt a stance of critical inquiry	Evidence based Risk sensible	 The case is mapped, building on the previous/existing mapping with the family. The Social Worker presents the harm statements and the existing strengths and safety, the current danger statements and safety goals. The child protection Chair checks the facts with the family. child protection chairs use a questioning approach to probe for concrete evidence of the impact of events on the child in order to test that the assessment is proportionate and risk-sensible. Where families do not agree there is a problem, child protection chairs use their authority skilfully to ask families to provide evidence that things are not as they seem e.g. by using a "same but different" approach: e.g. would you be worried if you were me? What can you do to reassure people/so other people are not worried? child protection chairs use questions to explore the current safety plan and people's confidence in the plan in keeping the child safe in relation to the dangers.
Support practice to be as good as it can be	Solution focused	The Signs of Safety framework is used to keep focused within the Conference; using the danger statement and safety goals to inform the process: moving from where we are now to where we all want to get to for the child.

Signs of Safety principles	Bexley values	Child Protection Conference
	Focused and purposeful	 The time in Conference is used primarily to test out the robustness of the safety plan; questioning is used to help everyone to feel satisfied that it will work, especially at trigger times/ stress points. A focus on the safety goals is maintained.

- Child protection chairs use scaling questions to understand the views of the family and to decide the level of help and support needed.
- The child protection chairs summary report will use the seven domains to demonstrate the decisions made at conference.
- There will be a clear safety plan reviewed at every child protection conference to help us understand how the children are being kept safe.

Child Protection Conference Chairs & Independent Reviewing Officers Practice Expectations and Bottom Lines

Signs of Safety principles	Bexley values	Child Protection Conference Chairs & Independent Reviewing Officers
Working relationships at the heart of practice	Child centred Family led	 We will provide independent rigor on behalf of the child to ensure that their safety is kept paramount. We support social workers to create opportunities for collaboration with families through supporting them to create day to day safety plans. We will set collaborative plans with children, families, carers and their social workers so that the use Family Network Meetings to create safety plans for children and young people.
Adopt a stance of critical inquiry	Evidence based Risk sensible	 We will provide oversight between conferences by reviewing case records prior to a mid-way review meeting. We work to ensure practice expectations are being aspired to by teams and services so that they can evidence their use of Signs of Safety.
Support practice to be as good as it can be	Solution focused Focused and purposeful	 All of our conferences and reviews will be mapped using the 3 columns and seven analysis domains. We will help to ensure that children have a copy of their safety plan in a format that helps them to understand what everyone will do to help them to feel safe. We will support social workers to create plans for children that where appropriate include the use of Words & Pictures to help them make sense of why children services are involved in the lives.

- If we need to make escalations we will use the practice framework & expectations document to support our reasons for doing so and provide examples
- We expect all service managers or head of service who make decisions that change a child's care plan to keep clear records of these decisions so that we can ensure that the child's safety is of paramount consideration
- Where Words & Pictures or child's safety plan work has not been undertaken we will set plans that include this work

Family Support & Child Protection Practice Expectations and Bottom Lines

Signs of Safety principles	Bexley values	Family Support & Child Protection
Working relationships at the heart of practice	Child centred Family led	 We always speak with children and family members respectfully. We continue to listen and understand the situation from each individual family member's point of view. We spend time understanding the child and their family's beliefs, values, religion, family history and culture and what these mean to each of them personally. We spend time with children and seek to understand the things they feel are going well, the things they are worried about and the things they want to be different. We complete Words & Pictures work with families so that all children have a clear explanation of why we are involved and what the adults are doing to keep them safe/sort out the worries. When new assessments are started, we use case mapping with families as the basis of this assessment.
		 'Family finding' tools and techniques are used to help the family develop their naturally connected support network. We continue to work with the whole family network; the effectiveness of the safety plan is reviewed through regular family network meetings. Where possible, review family network meetings are arranged to fit in with core groups and child in need meetings (i.e. first half is family and their network with professionals to join) to minimise the number of meetings that families have to attend. In review family network meetings, questions are prepared and used to explore what the family have done well in order to keep the children safe and to dig into the detail of how they managed to do this. In review family network meetings, we explore any worries (family or professional) about the safety plan and what needs to happen to address these worries.
Adopt a stance of critical inquiry	Evidence based Risk sensible	 The first thing that we do when a child and family is allocated to us is to make time to read the file and understand the family history, including reading previous assessments. We continue to triangulate information from family members with information about harm/strengths and safety from professionals, with what the child is saying and what we observe the family doing.

Signs of Safety principles	Bexley values	Family Support & Child Protection
		 When other professionals are worried, we help them to be clear and specific about their observations, clarifying how often, over what period and how serious these worries are. We purposefully ask family members and professionals questions to find the things that are going well and the things the family are doing that keep the child safe, even when things are difficult. In child in need meetings and core groups, we use scaling questions to measure the progress towards the safety goal and the impact of the safety plan. In strategy meetings/discussions and legal planning meetings, information is considered across the seven analysis domains. Danger statements are clear, specific and jargon free, and are shared with families so they are clear about why we are involved. Danger statements are reviewed as the case progresses.
Support practice to be as good as it can be	Solution focused Focused and purposeful	 We work with the family and professionals to develop a timeline so everyone knows what will happen and when, up to the point of case closure. Before a visit or meeting, we have made time to think through and be clear about what we are trying to achieve, how we will achieve it and how we will know we have been successful. We check with the effectiveness of the safety plan when visiting children and their families. Scaling questions are used in all meetings to check our progress towards the safety goal. We always make sure there is a clear contingency plan in place detailing what will happen if the family are not able to carry out or sustain the safety plan.

- For each case there is a clear timeline recorded, setting out the end point (case closure) and detailing work (including the direct work plan) that will be undertaken with the child and parents and the points at which the safety plan will be reviewed within family network meetings.
- All safety plans should be developed with the family taking the lead and the social worker facilitating the process.
- All plans should be clear, jargon free, connected to the danger statements and safety goals and should define what the family will do on a day to day basis to keep the children safe as well as what professionals will do.

- For every family we work with the parents to develop Words & Pictures explanations of why we are involved and what the safety plan is, and these are shared with the child or young person and the wider network.
- Group supervision takes place at a minimum of monthly.

Looked After Children's Teams Practice Expectations and Bottom Lines

Satety	xley lues	ed After Children's Teams
at the heart	mily led mily led Note that the second of	We always speak with children, young people and their families espectfully. We spend time with children, getting to know them and ensure that the onversations we have with them help us to understand the things that are going well for them, the worries they have and the things they want to happen/change. We spend time understanding the child or young person's beliefs, alues, religion, family history and culture and what these means to hem personally. When we tell a child we will do something, we always ensure we follow through and do so in a timely way. We always ask questions that help understand the things that are going well. Where a child's immigration status is unclear, we are pro-active in ontacting the home office to clarify this. We ensure that each child has a version of their care plan that they understand and that this is an active, living document that is regularly used and updated. When there are worries about contact, family network meetings are used to enable the family to find solutions to these worries. When there are worries about kinship placements, family network meetings are used to enable the family to return a child or young person home, family network meetings are used to enable the network to develop a safety plan. When we are planning to return a child or young person home, family network meetings enable the network to develop a safety plan. When there are worries about children/young people who are going missing, family network meetings are used to enable the child/young nerson's network to develop a safety plan. When there are worries about children/young people who are going missing, family network meetings are used to help the family levelop their naturally connected support network. It the family network meeting, the social worker shares and refines the larget danger statements and safety goals with the family/carers and

Signs of Safety principles	Bexley values	Looked After Children's Teams
Adopt a stance of critical inquiry	Evidence based Risk sensible	 their network and invites everyone to scale the situation from 0-10 in relation to each danger statement/safety goal. Bottom lines are kept to a minimum and shared clearly with the network. Members of the network are invited to develop a plan that will address each worry. The social worker facilitates the process by asking questions to help test out the safety plan. Everyone in the network gets a copy of the safety plan. The safety plan is incorporated into the overall signs of success plan for the child. The safety plan is reviewed and refined through review family network meetings. When making any decision about a change in a child's care arrangements, we will map and analyse information across the seven analysis domains. We continue to triangulate information from carers/family members with information from professionals and with what the child is telling is (verbally and through their behaviours).
		 Court statements always spell out harm and danger statements, complicating factors and the existing strengths and safety. When other professionals are worried, we help them to be clear and specific about their observations, clarifying how often, over what period and how serious these worries are.
Support practice to be as good as it can be	Solution focused Focused and purposeful	 We spend time preparing our visits to children and young people and are clear about what we want to achieve from this visit, how we will achieve this and how we will know we have achieved this outcome. We have a clear timeline of the direct work we are completing with the child that is linked to their individual care plan. Scaling questions are used with children and young people to monitor change and to explore their perspectives. When a decision has been made to return a child home, there is a clear timeline setting out what will happen, up to the point of case closure. For children who are looked after long term, there is a clear timeline for them through adolescence and into adulthood.

- We always work on the basis that children are best living with their families, so long as it is safe for them to do so. If we are thinking about applying to the courts for an order, we always consider the 'no order principle' (see glossary) and carefully ask ourselves and each other, 'what would be better for this child if an order was in place?'
- For all children for whom care proceedings are issued, we will work with the family to create a Words & Pictures explanation of why we are worried and what is happening to sort out these worries and will share this with the children. The Words & Pictures work will be filed with social workers statement.
- A permanence plan is developed for every child by the child's second looked after children's review.
 The child is clear about this plan and it is reviewed at every review with every option being carefully considered, including the child returning home/or to someone within their naturally connected network.
- A safety plan will always be developed through a family network meeting when there is a plan for reunification. If a child returns themselves home unplanned, a family network meeting will always take place at the earliest opportunity to support the family and their network to develop a safety plan.
- A safety plan will always be developed through a family network meeting when there is a plan for a supervision order along with a clear, agreed timeline setting out what will happen from the point the order is granted to the point of case closure.
- When there is a plan for a reunification, there will always be a clear, agreed timeline so everyone knows what will happen and when until the point of case closure.
- All children must have a version of their plan that they understand.
- Group supervision takes place in every team at least one per month.
- Children and young people are encouraged to Chair their reviews.
- Independent Reviewing Officers check that family finding work is being done for all children and young people who are looked after so that we can be re-assured that we are prioritising children's right to be connected with their natural networks.

Looked After Children's Reviews Practice Expectations and Bottom Lines

Signs of Safety principles	Bexley values	Looked After Children's Reviews
Working relationships at the heart of practice	Child centred Family led	 We talk with the child about their review ahead of the review and go through their care plan with them. We ask the child who they would like to attend their review and encourage them to Chair their own review. The Independent Reviewing Officer meets with the child ahead of their review. Any family member that the child has contact with has input into the review, if they are not able to attend we will contact them to obtain their views.
Adopt a stance of critical inquiry	Evidence based Risk sensible	 The looked after review considers how well we are working towards the success goal; scaling questions are used to measure progress and gain differing views. Changes to the care plan are based on information/observations from the carer, the family, the child, other professionals who know the child and the social worker.
Support practice to be as good as it can be	Solution focused Focused and purposeful	Independent Reviewing Officers ask solution focused questions to explore how the care plan is helping.

- The pre-meeting report for the review is written primarily for the child/young person and is written in a way that they can understand.
- The looked after review is the child's meeting; they are the most important person at the meeting and hearing what they have to say is central to the review.
- Group supervision takes place at a minimum of monthly.

Transfer between Looked After Children and Leaving Care Practice Expectations and Bottom Lines

Signs of Safety principles	Bexley values	Transfer between Looked After Children and Leaving Care				
Working relationships at the heart of practice	Child centred Family led	 From the age of 14 years old (at the latest) we start to talk with the young person and their carer about developing independence skills i.e. through learning how to cook basic recipes, managing money, helping with the shopping, using the washing machine and cleaning their bedrooms. Between the age of 14 and 16 years old, we talk with the young person to understand their aspirations for their education, career and housing. We think carefully with them about what would need to happen for them to achieve these aspirations and plan for this in their care plan and then pathway plan. We pay particular attention to building and strengthening the young person's informal networks from the age of 16 years old. The pathway plan is in the young person's own words. 				
Adopt a stance of critical inquiry	Evidence based Risk sensible	 Pathway plans are unique and specific to each particular young person and are based on their individual needs, strengths, areas of development and aspirations. We have high aspirations for our young people and put everything possible in place during this transition period to support our young people to achieve in all areas of their life. We discuss, agree and develop contingency plans with young people in the event that they don't quite manage to achieve what they were hoping in relation to their hopes and aspirations. 				
Support practice to be as good as it can be	Solution focused Focused and purposeful	 We use scaling questions to help the young person identify the areas of independence they feel confident in and the things they feel they need more help with. We facilitate the pathway planning process through a questioning approach but let the young person take the lead in developing their pathway plan. We develop a clear timeline of what will happen throughout this transition period in order to support our young people to flourish and develop into a confident, independent, young adult. 				

- Young people take the lead in developing their pathway plans and the pathway plan is written in the young person's own words.
- Safeguarding is at the heart of everything we do. We try to help young people make the right choices and when they make a mistake we are there to help them.
- We never give up on someone.

Leaving Care Teams Practice Expectations and Bottom Lines

Signs of Safety principles	Bexley values	Leaving Care Teams
Working relationships at the heart of practice	Child centred Family led	 We see the young person/young adult on a regular basis and have an open line of communication through text/email and WhatsApp. We talk to the young person about their relationships and the people in their lives who are important to them. We spend time understanding the young person/young adult that we are supporting's beliefs, values, religion, family history and culture and what they mean to them personally. Where a young person/young adult's immigration status is unclear, we are pro-active in contacting the home office to clarify this. We support young people/young adults to link into local community groups to help them to develop their networks. When young people/young adults are reluctant to accept our help and support, we keep persisting and trying different ways to build a relationship with them and offer support. We help care experienced young adults support each other by linking them in with 'positive journeys'. Where there are worries about a young person/young adult, advisors work hard to engage the network around the young person/young adult in a network meeting with the young person/young adult's consent. We use family finding tools to explore and build the young person/young adults connection to their natural network. Network Meeting At the network meeting, we share and refine the draft danger / worry statements and safety / wellbeing /success and invite members of the young adult's network to scale the situation from 0-10 in relation to each statement and goal. Network members are invited to develop a plan that will address each
		worry.

Signs of Safety principles	Bexley values	Leaving Care Teams
		 The personal advisor facilitates the process by asking questions to help test out the safety plan. Everyone in the network gets a copy of the safety plan. The safety plan is incorporated into the overall plan.
Adopt a stance of critical inquiry	Evidence based Risk sensible	 We always ask questions that help us understand the things that are going well. When there are worries about a care leaver, personal advisors map these out with the young person/young adult. When there are worries about a care leaver, a case mapping takes place and we map the information across the seven analysis domains. When there are worries about a care leaver clear, jargon free danger statements and paired safety goals are created and shared with them. When there are worries about a young person/young adult about their safety or wellbeing, we will always consider a referral to adults safeguarding and make a referral if required. We use our danger statements to explain to the young person/young adult why we are worried and why we are referring to adult safeguarding.
Support practice to be as good as it can be	Solution focused Focused and purposeful	 We help care leavers identify their own goals in the pathway planning process. We help care leavers develop clear timelines for achieving their goals. We use scaling questions to help care leavers assess their progress towards their goals. We ensure pathway plans are clear and jargon free and are written by/in the words of the young person/young adult. We prepare for our visits so that we are clear about what we want to achieve before we meet the young person/young adult and how we will know that we have achieved what we hoped.

- When there are critical worries about young people/young adults in relation to mental health, substance misuse or domestic abuse, personal advisors and their managers will always work hard to support the young adult/young person and their naturally connected network to attend a network meeting and develop a safety plan.
- If a care leaver loses their accommodation unexpectedly, personal advisors and their managers will always work hard to get their naturally connected network together to help them to develop a plan.

- When a young person/young adult that we are working with makes a mistake; we are there for them.
- Group supervision takes place at a minimum of monthly.

Fostering Recruitment & Assessment Team Practice Expectations and Bottom Lines

Signs of Safety principles	Bexley values	Fostering Recruitment & Assessment Team
Working relationships at the heart of practice	Child centred Family led	 Fostering assessments are clear, straight forward and jargon free. Abbreviations are not used in our fostering assessments or literature. We carefully explore the potential carers support network. When we have worries about a potential foster carer/special guardian, we are honest and clear about these from the start so that people have as much chance as possible to make changes. When vulnerabilities or worries about a potential special guardian arise during an assessment, we arrange a family network meeting with the potential carer and their network to support the network to develop a plan that addresses these worries. In family network meetings we share danger statements, safety goals and scaling questions, invite the network to scale and support the network to develop a plan. Bottom lines are kept to a minimum.
Adopt a stance of critical inquiry	Evidence based Risk sensible	 We explore how family members have parented their own children. We always observe the carers with the child when completing SGO assessments. We obtain references for potential foster carers and special guardians. We observe potential foster carers interactions with each other within the training group work to inform their assessment.
Support practice to be as good as it can be	Solution focused Focused and purposeful	 We carefully prepare questions before we meet with the potential carers we are assessing. We explore and draw out strengths with potential cares and these are reflected in the foster carer's assessment. We explore how potential carers have used strengths and resources to get through different situations. There is a clear timeline from first visit to panel and carers know about this process. In the skills to foster training, we check in with the group regularly about any worries and seek feedback at the end.

- Assessment of potential foster carers and special guardians always uses the seven domains to analyse the information.
- Special Guardian support plans are developed using the principles of safety planning.
- Group supervision takes place fortnightly.

Fostering Support & Supervision Team Practice Expectations and Bottom Lines

Signs of Safety principles	Bexley values	Fostering Support & Supervision Team			
Working relationships at the heart of practice	Child centred Family led	 We provide a welcome book to the child's social worker to give to the child. This provides information, mainly in picture form about the carers and their home. In all planned moves, we will speak to the child's social worker and foster carer to arrange a visit to the placement. We visit carers on a monthly basis. Whenever difficulties arise that might impact on stability, a placement stability meeting is arranged as soon as possible to ensure that these difficulties don't escalate. Within permanency planning meetings, the option of returning home will always be considered. Foster carer's birth children are appreciated through an annual event and have regular group activities to talk about fostering and how it is affecting them. Birth children have opportunities to participate in developing forms such as the annual review feedback form. The team arranges an annual appreciation event for foster carers and provides regular coffee mornings. Foster carers are spoken with as part of the collaborative audit. 			
Adopt a stance of critical inquiry	Evidence based Risk sensible	 All foster carers will have a chronology on their file that includes any allegations, placement breakdowns, significant events and changes of approval in order to notice patterns. Within the placement stability meetings, information is mapped and analysed across the seven domains with the carers, the child and the birth family whenever possible. Once the child is placed in a new placement, we develop a 'safe care' plan with the child's social worker, foster carer and the child. We work through the individual safe care plan document, identifying any safety concerns and developing a plan with the foster carer about how these will be managed in the child's day to day care. Whenever there is a stability meeting, we update the safe care plan to reflect this. Group supervision takes place fortnightly in the team. 			

Signs of Safety principles	Bexley values	Fostering Support & Supervision Team			
Support practice to be as good as it can be	Solution focused Focused and purposeful	 We ensure that regular permanency planning meetings take place for all looked after children 11 years plus from eight weeks after they become looked after. Visits are planned and have a clear purpose, linked to the safe care plan. We use scaling questions with foster carers in their visits to scale stability/specific issues. We ask solution focused questions to identify what's working well and what we are worried about. 			

- All placement disruption/maintenance meetings use the Signs of Safety framework and map across the seven domains.
- Supervisory visits to foster carers use a scaling question to scale the stability and explore the reasons for the number scaled at/what needs to happen to move up the scale. These visits explore what's working well and what everyone is worried about against the 5 outcomes.
- Words & Pictures work is used to explain transitions or disruptions.
- Words & Pictures work is always used to provide an explanation to the child of a change in their care arrangements.
- Group supervision takes place at a minimum of fortnightly.

Adoption Partnership South East Regional Adoption Agency - Practice Expectations and Bottom Lines

A shared adoption service working on behalf of the London Borough of Bexley, Kent County Council and Medway Council.

Signs of Safety principles	Bexley values	Adoption Partnership South East Regional Adoption Agency			
Working relationships at the heart of practice	Child centred Family led	 We quality assure child permanence records and offer support to social workers to ensure the children's views and wishes are sought in respect of their birth family, contact and understanding of the care plan and these are included in the Child Permanence Report. When placing a child in an Early Permanence (foster to adopt placement), birth families are given a clear understanding of what this means; they are provided with the Early Permanence birth family leaflet and given the opportunity to ask questions and meet the carers. The Permanence planning Lead will attend all Permanency planning meetings for children aged 7 and under, to participate in the care planning for children, ensuring that wherever necessary adoption plans are progressed. When assessing prospective adopters, we work alongside the family to build a relationship and create an experience that enables learning and sharing. We work with openness, honesty, respect and empathy, drawing together strengths and vulnerabilities in a safe setting. At the start of the assessment a plan is agreed between the family and the worker around areas for discussion and timescales. We support applicants to think about who in their network can support them and in what way. We also encourage applicants to consider who in the event of serious illness or death would take on the role of guardian for their adopted child the same as if it was a birth child. Family members will be seen and interviewed as part of the assessment process. When a plan for adoption has been agreed for a child, we will ensure the birth family receive the Barnardo's CAFIS leaflet designed for birth parents telling them about the independent counselling service available to them. We complete Life Story Books for children who are placed for adoption and do so in conjunction with a child's social worker and prospective adoptive parents, so the book is clear and user friendly. Adopted adults seeki			

Signs of Safety principles	Bexley values	Adoption Partnership South East Regional Adoption Agency
Adopt a stance of critical inquiry	Evidence based Risk sensible	 When assessing prospective adopters, we use a range of tools to enable the family to share their personal experiences, reflect and gain an understanding of the impact of this experience on them and others. When assessing prospective adopters, information is gathered from several sources to ensure the assessor gains a holistic view of the family's strengths and vulnerabilities. Prospective adopter reports will include information from a range of sources, applicants, family, friends, employers, health and other professionals. Tools used to gain this information will include Coram BAAF Prospective adopter report, genograms, eco maps and attachment style interview questioning. We will analyse information gathered and give a clear recommendation that will include strengths and vulnerabilities as part of the summary. When there are complicating factors with adopter assessments or where issues have arisen during assessment, we explore this further through case mapping and group supervision. This helps to identify strengths and vulnerabilities and highlight the area of concern which can then be shared with the family. When working with prospective adopters we work in an open, honest and transparent way. If concerns arise before or through assessment, applicants are made aware of the concerns and discussions held on how the issues can be resolved. We do not look for perfect parents but adopters who are resilient, committed and open to learning. Assessing social workers will explore fully with adopters any negative experiences and the impact this has had upon them and others, how they managed this experience and how this will playout in their role as adoptive parents. We are part of a pilot group of Regional Adoption Agencies looking to use evidence-based measurement tools in relation to families receiving therapeutic interventions.
Support practice to be as good as it can be	Solution focused Focused and purposeful	 We complete a stage 2 agreement with families before starting the assessment; this will include a predicted date for panel. This provides the applicants with a clear understanding of dates/times and what each session will entail. We ensure that we are being open and transparent with the family and explain the reason for any deviation from the existing plan or need for further exploration of a certain area. We are clear with prospective adopters from the very beginning around bottom line requirements, these can be found in our recruitment literature and stated again at open evenings. If these cannot be met then families will be informed immediately and given clear reasons why we are unable to proceed with their applications. We undertake post adoption support assessments with parents to identify issues and develop a plan to support them.

- We strive to ensure we provide a high-quality adoption service which guarantees the best possible standards of care, safety and protection for children or young people who are looked after and who need adoptive placements.
- We strive to ensure that all those whose lives have been affected by adoption are helped to identify and receive appropriate services.
- We strive to ensure we work in partnership with adoptive families and other agencies ensuring
 the service is based on statutory requirements and good practice within the principles of value for
 money for the agency.

Professional Standards & Quality Assurance Practice Expectations and Bottom Lines

Signs of Safety principles	Bexley values	Professional Standards & Quality Assurance
Working relationships at the heart of practice	Child centred Family led	 PSQA will manage the Social Work Academy for newly qualified social workers. PSQA actively encourage feedback from the Children's Social Care workforce; to learn from and celebrate staffs' successes alongside learning from and seeking to resolve the difficulties and challenges they face in practice. We provide a reflective and thinking space to facilitate workers/teams to identify their strengths/talents/resources/aspirations and develop their own plans and steps towards achieving these. We facilitate conversations to open up possibilities and create hope and opportunities for the workforce. We work in collaboration with partners and others to provide learning and development opportunities e.g. Community Care, Elia (Signs of Safety) Bexley's Safeguarding Partnership for Children and Young People - SHIELD and universities. We bring the latest research, news and updates to staff through monthly newsletters.
Adopt a stance of critical inquiry	Evidence based Risk sensible	 PSQA will ensure all children's social care policies and procedures are up to date, understandable and accessible to staff and the general public, via the tri.x website. Policies and procedures are regularly reviewed to ensure they reflect national legislation and guidance for staff working within Children's Social Care. PSQA will provide and support staff to access a wide variety of training, learning and development opportunities. PSQA lead on the delivery of the practice model within the borough; Signs of Safety. PSQA ensure there is a framework for the quality assurance of social work practice by Children's Social Care practitioners. Workers' safety and well-being is our priority and we support the service to achieve a culture where staff feel valued and protected. To utilise the training and support provided by the LiquidLogic Product Team which ensures social care staff recordings are of a good quality.

Signs of Safety principles	Bexley values	Professional Standards & Quality Assurance			
		Data submitted to the Department for Education is of a high standard and accurately reflects the child's journey through Children's social care.			
Support practice to be as good as it can be	Solution focused Focused and purposeful	 We have high aspirations for our newly qualified Social Workers and provide a clear timeline of support, learning and assessment to support them through their Assessed and Supported Year in Employment (ASYE). Learning & Development opportunities are based on feedback from staff and identified areas of development. 			

- We take part in group supervision every month to problem solve and build strong habits of analysis and judgement.
- New starters and returning staff will not be given access to the LiquidLogic Children's Systems, LCS and EHM, until they have attended an introduction session of training.
- We will support and champion solution focused relationship-based practice.
- We will work collaboratively and use Appreciative Inquiry or Problem-Solving Circles to understand difficulties and help you find solutions.
- We will apply a whole systems approach for our practice framework of Signs of Safety.

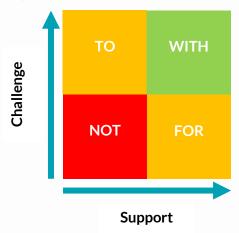
Signs of Safety and Restorative Practice

Signs of Safety is the practice model used in Children's Services. The underlying philosophy of this model is a solution focused approach. It is participative and relational by nature and fits well with Restorative Practice.

Restorative Practice is a term used to describe a way of being, an underpinning ethos, which enables us to build and maintain healthy relationships, resolve difficulties and repair harm when relationships breakdown.

Together, Restorative Practice and Signs of Safety enhance our focus on respectful practice where families are supported to identify the best solutions to their difficulties. The concept of 'doing WITH' is a shared value across Signs of Safety and Restorative Practice. 'Doing WITH' is built on high challenge and high support. High challenge being - asking tough questions, sharing responsibility, giving honest feedback and agreeing shared goals. High support being - showing an interest, really listening, suspending judgement, asking reflective questions, creating trust, and recognising and expressing feelings. In this way, we aim to provide motivation, accountability and the energy to act.





The balance of high challenge and high support is what we strive to achieve through skilful use of authority, searching for detail, maintaining a focus on safety and wellbeing, offering choice, and learning what the child/young person and family want.

The practice principles in Signs of Safety support us to build partnership with families by honouring families, seeing families as experts, focusing on creating small change, and recognising that all families have some Signs of Safety.



1. TEACH THEM 2. Believe in them 3. Humour 4. Know their names 5. Know something about them b. Show white interested in them is people 7. Smile ALOT 8. Be warm 9. BE FIRM BUT FAIR 10. Unconditional positive regard 11. 'Play' regularly 12. PESPECT 8. SUPPORT MITERISTIS 13. Do Show and Tell (It's not just for schools!) 14. Be seel 15. BE INTERESTED IN THEM AS PEOPLE 16. Consistently kind 17. Say good morning 18. Take a genuine interest in them 19. Be consistent 20. Let them know a little about you 21. Chat with them 22. Greet them whenbever you meet them 23. HIGHFIVETHEM24. End every day on a good note (no grudges) 25. Care about them 26. Banter (as long as you have trust) 27. Show interest in their interests 28. Have a sense of humour 29. Mutual respect 30. Open communication 31. Know their likes 32. Be approachable 33. Tease them gently 34. Smile from your heart 35. Pinch the occasional crisp (not the whole bag) 36. CATCI TIEM AT TIEM BEST 37. Positive phone calls home 38. Have high expectations 39. Show empathy (not sympathy) 40. LOOK OUT FOR THEIR SPORTS TEAMS RESULTS 41. Remember their birthday 42. Make cakes and share them 43. LAUGH WITH THEM 44. Listen and then listen some more 45. DON'T JUDGE 46. Separate the behaviour from the person 47. TREAT THEM FAIRLY 48. Have lunch with them

99 THINGS TO BUILD RELATIONSHIPS WITH CHILDREN AND FAMILIES

49. KICK A FOOLBALL AROUND with them 50. Jump rope with them 51. SEEK TO UNDERSTAND RATHER THAN TO BLAME 52. Listen with the intent to understand rather than the intent to reply (S Covey) 53. Learn to apologise \$4. Share the power 55. Aim to learn something new about them each and every day 56. Don't take yourself too seriously 57. Create a safe environment 58. Develop and cultivate compassion 59. Swy the "hard things" 60. The small tings are the big stuff 61, Ask questions 62. Set boundaries 63. STEP IN WITHOUT BEING ASKED 64. Know when to dial it back 65. GIVE CONSISTENTLY, RECEIVE OCCASIONALLY 66. Build Goodwill on Good Days 67. Mutual Respect 68. Welcome diversity 69. Be supportive 70. Initiate conversations 71. HONESTY IS KEY 72. Follow through and do what you say you'll do 73. Compliment 74. Say thanks 75. Laugh 76. Be present 77. Be their biggest cheerleader 78. Let go of the past 79. Check in regularly 80. Be willing to learn form each other of. Botherdness 32, 37/17/17/17 প্রসায় প্রায়ের 83. Each day is a new day 84. Earn respect rather than expect it 85. Be authentic 86. Don't take yourself seriously 87. CARE ABOUT THEIR WELFARE \$\tilde{X}\$. Share your farmite film or band 89. Make time or you'll make excuses 90. BRAG ABOUT THEM OUTRAGEOUSLY TO OTHERS 91. Everyone needs a champion 92. Never use SOJCOSM 93. There is glwgys more than one perspective 94. Intention and attention is key 95. TONE OF VOICE IS IMPORTANT 96. Tell them your first name 97. Talk about your own kids 98. Share with them 99. Say goodbye at the end of the day









Bexley Signs of Safety Practice Framework Reflective Tool

The practice framework reflective tool is based on Marie Connolly's (2007) 'Practice Frameworks: Conceptual Maps to Guide Interventions in Child Welfare'. The tool was developed in Bexley and brings together the principles that underpin our work in Bexley with clusters of reflective questions that aim to support reflection on the quality of practice relating to each principle. Linked to each section are the tools that practitioners can use to support work that is underpinned by the relevant principles. The tool is in two parts; the first is a table that summarises the tool, the second is a more detailed outline that links the principles, reflective questions and tools/techniques in more depth.

It is anticipated that practitioners use this section to guide them to access the tools they need and reflect on the quality of their practice. It is expected that managers will use it to support reflection in individual or group supervision and to reflect on the quality of practice and decision making in their teams and services.

Connolly, M. (2007) Practice Frameworks: Conceptual Maps to Guide Interventions in Child Welfare. *British Journal of Social Work*, 37, 825–837.

Our principles	Engagement and assessment	Seeking solutions	Securing safety and belonging	Becoming an adult	For staff: Looking after myself
Child/young person centred	Are we building a relationship with the child within which we are clear about their views and experiences?	Is the child clear why we're involved and have they been actively involved in identifying solutions?	Do we continue to obtain the child's views and understand their experiences as the case evolves?	Is the young person fully informed and making their own choices about their future?	Am I thinking about what I need from supervision?
Family led	Is all contact with the family respectful and do we understand the views of everyone in the family?	Is the family taking the lead in identifying the plan?	Do the plans recognise and make use of all the people who are naturally connected to the child?	Are we supporting the young person to develop their independent network of support?	Am I accessing work and professional networks to improve my practice?
Solution focused	Are we carefully crafting questions to enable us to be clear about the strengths and resources within the family?	Are we using solution focused questioning to help families reflect and build on existing safety?	Are we using solution focused questions to review safety, wellbeing and success and to reinforce positive change?	Are we using solution focused questions to help the young person identify their aspirations and how they will reach these?	Am I clear about my own strengths, goals and what I need in order to achieve my goals?
Evidence based	Are our judgements based on specific, observable behaviours and is the weight given to the worries and strengths	Are the safety plans rigorously tested out in relation to trigger points/signs of relapse etc?	Are judgements about safety, wellbeing and success based on specific observable behaviours and	Are the young person's aspirations grounded?	Am I continuing to learn from research, from my own successes and mistakes and from others?

Our principles	Engagement and assessment	Seeking solutions	Securing safety and belonging	Becoming an adult	For staff: Looking after myself
	supported by research?		on the child's voice?		
Risk sensible	Do we have a clear and rigorous understanding of past harm, likely future danger, strengths and safety within the family?	Does the safety plan ensure safety for the child in those moments when parents make mistakes / relapse / get things wrong?	Are we managing the tension between giving the family every opportunity vs the child's timeframe?	Are we managing the balance between independence and support?	Am I taking steps to maintain a healthy work / life balance?
Focused and purposeful	Are we clear about what we are trying to achieve each time we have contact with the family?	Is there a clear, understood timeline setting out what will happen at every stage until case closure?	Are we continuing to ensure that all our activity is helping to drive things towards the child's safety, wellbeing or success goal?	Do we have a clear, agreed timeline for each young person's transition into independence and adulthood?	Am I clear about my personal work objectives and priorities?

Engagement and assessment

Principles	Reflective questions	Tools
Child / young person centred	 How are we building a relationship with the child? How are we clear about the child's views and experiences? How have we understood how the child is making sense of their experiences? How have we considered the vulnerability of a very young child or a child with additional needs? Who has the child said are the important people in their lives and how do they help them? How do our recordings demonstrate that we have we kept the child as the primary audience? 	 Three houses Fairy/wizard Safety house NSPCC solution-focused practice toolkit
Family led	 What are we doing to ensure we are respectful towards family members? How are we being clear with families the reasons we have become involved, what our role is and how we want to work with them? What have we done to encourage the family to involve their natural network of support? How are we seeking to explore and understand the experiences, views and perspectives of all family members? How have the family decision-making processes been utilised early? What are we doing to ensure we speak and write using language that the family speak and understand? How are we actively seeking to understand the family's cultural or religious beliefs and values and what these mean to individual family members? 	 Family leaflet Completing genograms with the family Case mapping with the family and their network Family network meeting
Solution focused	 What are we doing to rigorously explore strengths and existing safety with referrers? How are we making sure we are clear about how everyone in the family views the worries? How are we making sure we are we clear about how professionals view the worries? What have we done to help us be clear about the strengths, resources and existing safety within the family? How are we helping the family to reflect and look at the worries from different perspectives? 	 Scaling questions Alternative perspective questions Exception questions Appreciative inquiry

Principles	Reflective questions	Tools
	 What are we doing to ensure we are 'enquiring' more than 'requiring'? What are we doing to enable our conversations to open up possibilities and create hope and opportunities? How do we know? 	
Evidence based	 How are we sure that our judgements are based on specific, observable behaviours? How do we know that the judgements of other professionals are based on specific, observable behaviours? How are we triangulating what the child is saying, what professionals are saying and what we are observing? How are we ensuring that the weight given to the worries and strengths is supported by what research says about what elevates and mitigates the risk in this child's situation? 	 Clear, behaviourally specific danger statements Research in Practice Using specific assessment tools wherever relevant: e.g. Bexley's neglect toolkit, Bexley's substance misuse tool kit, Barnardo's domestic violence risk matrix Child exploitation disruption toolkit NSPCC Reunification Framework
Risk sensible	 How are we ensuing that strengths and existing safety as well as past harm and future danger inform decision making at the point of referral? How are we clear about the existing safety in the family; the times where the problems have been dealt with safely or when the children have been kept safe despite problems occurring? How is this informing our risk assessment? How is this being considered carefully in multi-agency meetings / strategy discussions? How is this reflected in our assessments / s47 enquiries? Where past harm has occurred, how have we gleaned a clear and rigorous understanding of the adult behaviour that has caused the harm to the child; its severity, frequency, duration and impact on the child? How is this informing our risk assessment? How is this being considered in multi-agency meetings / strategy discussions? How is this reflected in our assessments / s47 enquiries? What have we done to carefully think through the likely future impact on the child both immediately and 	 Signs of Safety assessment and planning framework Seven analysis domains Harm analysis matrix Group supervision

Principles	Reflective questions	Tools
	 in the longer term if there is no change? How have we engaged other professionals in this thinking process? How is this reflected in our assessments / s47 enquiries? How do our bottom lines equally reflect the seriousness of the harm and the resources and existing safety within the family network? What have we done to help the family to be clear about our best hopes (safety goals) and worst fears (danger statement) for the child? How do we know they are clear? 	
Focused and purposeful	 How are we ensuring we are clear about what we are trying to achieve each time we have contact with the family? What are we doing to ensure we spend time preparing questions / preparing the time we spend with families? What are we doing to carefully plan our direct work with children? How are we ensuring that the work we are doing with children is feeding into the work we are doing with the parents? Where there are other professionals involved; how do we know that everyone is clear about each other's role? 	 Signs of Safety assessment and planning framework Group supervision to help the worker plan their next steps Coaching from individual supervision Direct work pack (flip chart paper, pens etc.)

Seeking solutions

Principles	Reflective questions	Tools
Child/young person centred	 How are we helping the child to be clear about why we are worried and why we are involved? How do we know they are clear? How has the child or young person been actively involved in identifying solutions? Does the child / young person have an advocate or someone they can talk to? How are we helping the child's relationships with their key attachment figures to be maintained? How are the things that are important to the child being understood and recognised? How do our recordings demonstrate that we have we kept the child as the primary audience? 	 Safety house Words & Pictures
Family led	 What are we doing to attempt to work with all the people who are naturally connected to the child, right from the second visit to the family? Where parents are reluctant to involve family members, how are we respectfully but persistently exploring why, and helping parents to reflect on this and consider this from different perspectives? How are we sharing danger statements and safety goals with family members so they are clear about our worries? How are we spelling out bottom lines and then letting the family identify the 'rules' of the safety plan? How are we ensuring that the family and their network is considered as the most important people at the child protection conference? 	 Family network meeting Safety planning
Solution focused	 How do we know that the family is clear about what we need to see in order to be able to return the child home / end the child protection plan / close the case? How are we reviewing our progress towards the safety / wellbeing / success goal? How are we continuing to notice and reinforce positive change / success? How do we know that the worker has a relationship with the family that fosters change? How do our conversations open up possibilities and create hope and opportunities? 	 Safety goals linked to each danger statement shared with the family Scaling questions and Appreciative inquiry

Principles	Reflective questions	Tools
Evidence based	 What have we done to help the safety network think through what will happen if key safety people are unwell or unavailable? How have we helped the safety network to identify key trigger points (i.e. Significant anniversaries / family occasions / stressful points of the day / other stressors) and account for these in the safety plan? How have we helped the safety network identify signs / red flags that the problem may be about to occur, how this will be noticed and who will do what? How have we helped the safety network identify that the problem is already happening, how this will be noticed and who will do what? How are we continuing to triangulate what the child is saying, what professionals are saying and what we are observing? How are we continuing to ensure that our judgements are based on specific, observable behaviours? How are we continuing to ensure that the weight given to the worries and strengths is supported by what research says about what elevates and mitigates the risk in this child's situation? 	 Family network meetings/safety planning Safety object Safety journal Three houses/safety house
Risk sensible	 How are we ensuring we perceive mistakes / 'failures' by the parents as opportunities for reflection and learning? How do we know that mechanisms are in place in the safety plan to ensure that when parents make mistakes / 'fail', the children are not harmed? How does the safety plan equally reflect the seriousness of professional concerns and the strengths and resources within the family network? How do we know that the child is clear about the safety plan? How does our recording help us with our thinking and reflection? How are we ensuing that new information about strengths and existing safety as well as harm and future danger as the case progresses informs our most current risk assessment / decision making? 	 Safety plan Safety journal Safety object Family network meeting Words & Pictures Mapping across the seven domains Harm analysis matrix
Focused and purposeful	 How are we clear about what we need to see in order for the child to return home / for the child protection plan to be ended or for case closure? 	Safety goalsFamily network meeting

Principles	Reflective questions	Tools
	 How do we know that the family is clear about what we need to see in order for the child to return home / the child protection plan to be ended / or for case closure? How are we being clear about our bottom line requirements? How do we know that the family are clear about our bottom line requirements? How do we know that everyone is clear about how the safety plan will be monitored? What have we done to set out / agree a clear timeline setting out what will happen at every stage until either the child(ren) has returned home / the child protection plan can end / the case can close? How has this been shared / agreed with other professionals? How has this been shared with the family? How does this feed into our multi-agency / child in need meetings / core groups? 	 Timeline Safety Planning - Plan Rules

Securing safety and belonging

Principles	Reflective questions	Tools
Child/young person centred	 How are we continuing to obtain the child / young person's views as the case evolves? How are the child's views informing our decision making? How have the full implications for the child / young person been carefully considered in relation to their current and future care arrangements? How have we helped the child to understand the decisions about their care and what is happening? How do we know they have understood? How are transitions in care arrangements being carefully planned and supported? How do we know whether this child has a sense of belonging in their care arrangement? How does the plan address this child's care, safety, wellbeing and sense of belonging? How is the child actively involved in their care planning / the reviewing of their care plans? How do we know they feel an ownership of their care plan? What are we doing in order to keep the child as the primary audience for all of our recording? 	 Three houses Safety house Words & Pictures Scaling questions in care planning work with children
Family led	 What have we done to make every effort to keep the child safely within their naturally connected network? How have we made reunification a practice priority? How are we continuing to be respectful towards the family and how are we carefully working through resistance / challenges with them? Where a safety plan is in place for a child living at home; how are we enabling the family members to become the main people monitoring the plan? How are we viewing difficulties / challenges / resistance as opportunities to engage the family network in thinking more deeply about the worries? If the child / young person is in care; how are we enabling family members and key people in the network to have regular contact with the child / young person? 	 Clear safety / wellbeing / success goals Solution focused questions Family network meeting Safety journal Safety object

Principles	Reflective questions	Tools
	 How are the family's views continuing to be sought and influencing decision making? What have we done to ensure the child has family mementos such as photographs / letters? 	
Solution focused	 How are we reviewing our progress towards the safety / wellbeing / success goal? How are we continuing to notice and reinforce positive change / success? What are we doing to ensure that the way we engage with the family gives them the best opportunity to learn and change? How do our conversations open up possibilities and create hope and opportunities? 	 Scaling questions Appreciative Inquiry Safety journal Family network meetings
Evidence based	 How are we ensuring judgements about changes in safety, wellbeing and success are based on specific observable behaviours? How are these observations triangulated with what the child is saying and with what other professionals are saying? 	Case mappingHarm analysis matrixScaling questions
Risk sensible	 How have we made every effort to involve the child's naturally connected network and give them every opportunity to identify and implement a safety plan? Is the timeline for this work within this child's timeframe? Is there clear contingency planning in the event the family are unable to demonstrate safety for the child; is this transparent and clear to the family? Is placement stability being closely monitored? Where there are plans for transitions in care, has the impact on this child's wellbeing been fully considered, understood and accounted for? 	 Family network meeting Timeline Scaling questions Case mapping Safety Planning Family Network Meetings
Focused and purposeful	 If the plan is for reunification, how are we being clear about what we need to see in order to know the child can return home? How do we know that the family are clear about this? If the plan is for the child to remain in care, what do we need to see that will tell us that the child feels settled and secure and has a sense of belonging? How are we ensuring that each visit we make to the child or family has a clear purpose that is directly tied to the safety, wellbeing or success goal? 	 Safety / wellbeing / success goals Scaling questions Timeline Safety Planning

Principles	Reflective questions	Tools
	How are we reviewing and monitoring activity on the case against the planned timeline?	

Becoming an adult

Principles	Reflective questions	Tools
Child/young person centred	 How are we building a relationship with this young person / young adult? How do we know this young person / young adult's interests, aspirations, hopes and dreams? What are we doing to inform this young person / young adult of their rights and opportunities? How is this young person / young adult being supported to make their own choices about their future? How are we helping this young person / young adult have a sense of ownership of their pathway plan? How do we know that they do have a sense of ownership of their pathway plan? 	 NSPCC solution- focused practice toolkit Scaling questions Solution focused conversations Appreciative inquiry
Family led	 What are we doing to support this young person / young adult to develop their own independent network of peer support? What are we doing to reconnect this young person / young adult with their wider family? What are we doing to support this young person / young adult to develop their own independent support through relevant cultural / community groups? Does this young person / young adult understand what healthy relationships look like? What are we doing to support this person / young adult to foster healthy relationships in their life? 	Solution focused conversation / questions
Solution focused	 What are this young person's strengths / talents / resources? How are we helping this young person identify their strengths and resources? How are we helping this young person to identify their aspirations? How are we helping this young person to identify what they will do and what they need in order to reach these aspirations? How do our conversations open up possibilities and create hope and opportunities? 	 Mapping with the young person Solution focused conversations Appreciative inquiry
Evidence based	 How do we know that the plans this young person / young adult has are helping him / her to reach their potential? How do we know whether the young person's aspirations are grounded in his / her strengths / talents / abilities? 	Mapping with the young personSolution focused questions

Principles	Reflective questions	Tools
	How are the plans for this young person grounded in what research tells us assists good outcomes for care leavers?	
Risk sensible	 How are we managing the balance between independence and support? If there are worries about a young person / young adult; how are we clear about any harm that has been caused, the behaviour that has caused this harm, the severity, frequency, duration and the impact on the young person / young adult both immediately and in the longer term if there is no change? How are we clear about the strengths and resources of the young person / young adult? How are we clear about the strengths and resources within the young person / young adult's naturally connected network, including times where the young person has dealt with / been supported by people in their naturally connected network to deal effectively with difficulties? 	 Case mapping Danger statements / safety goals Safety Planning (plan rules) Family Network Meetings
Focused and purposeful	 What have we done to ensure there is a clear timeline, created with the young person for their transition into independence? How are we ensuring moves / transitions are carefully planned with the young person / young adult? How are young people / young adults being prepared for these transitions? How are we ensuring that each time we spend time with a young person, we are clear what we want to get out of this time and we are clear what the young person / young adult wants to get out of the time? 	• Timeline

For staff: Looking after myself

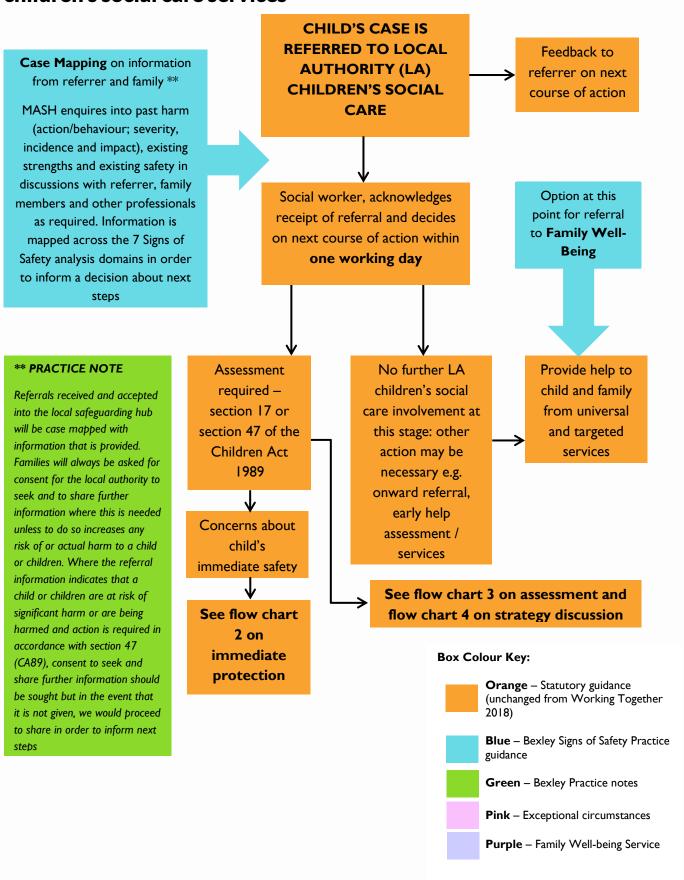
Principles	Reflective questions	Tools
Child/young person centred	 Am I thinking about what I need from supervision? How do you use supervision to identify your learning needs? How do your learning activities impact on the quality of your practice? 	 Reflective Supervision Tool Group Supervision Guide Ask for feedback from the people who experience your practice
Family led	 Am I accessing work and professional networks to improve my practice? How do you reflect on your own ethics and values, and how do they impact on your practice? How does continuing professional development (CPD) help you develop good subject knowledge, or help you develop your knowledge of current issues in society? How does your CPD contribute to an open learning culture? 	 Attend conferences, seminars, webinars, lectures and forums Evolve e-learning Join the Workplace Wellbeing group Join an Action Learning Set Try a 'randomised coffee trial' Social Work England British Association of Social Workers (BASW) International Federation of Social Work
Solution focused	 Am I clear about my own strengths, goals and what I need in order to achieve my goals? Thinking about your work what's the piece of work you feel proudest of in the past month? Who was involved in this with you? What happened that makes you most proud of this work? Who knows about this work that you respect? What would that person say was most important about this piece of work? What are the most important things you did to make this happen? What was the hardest thing you had to do to achieve this success? Who helped you do this? How did they help? The other people involved when did you know that what you were doing was working for them too? What would they say was most important about what you did? 	 Bexley Coaching and Mentoring Academy Signs of Safety folder Appreciative inquiry

Principles	Reflective questions	Tools
Evidence	 What was the most important difference that happened because of this piece of work? When you think about this piece of work that you are proud of what is the biggest learning for you? When you think about what you have achieved what have you learned about yourself as a professional doing this work? Am I continuing to learn from research, from my 	The Resource Library
based	 Ann continuing to lear month esearch, from your successes and mistakes and from others? How do you use research/theories/frameworks to inform your practice? How do you know the changes that you have made to your practice because of feedback, have had a positive impact? 	 Bexley Safeguarding Partnership (SHIELD) Research in Practice NSPCC National case review repository Community Care CoramBAAF Bexley Children's Services Procedures Manual London child protection Procedures Department for Education Reading journals, books or articles Listening to podcasts Watching documentaries or Ted Talks
Risk sensible	 Am I taking steps to maintain a healthy work / life balance? What is worrying you the most and how long has it been happening? Over the whole timespan it has been happening, how bad has it been? Over the whole timespan it has been happening, what has been the overall impact on you? 	 Flexible working Well-being toolkit for staff Staff sport and exercise activities Employee Assistance Programme Signs of a Safe Working Environment exercise
Focused and purposeful	 Am I clear about my personal work objectives and priorities? What is the most important and urgent task today? 	Performance ConversationWork planPractice Observation

Using Signs of Safety alongside statutory guidance

Signs of Safety provides us with a relationship-based approach to working with children and families that does not minimise or dismiss the harm that children have or may experience. However, we must always work within the requirements of the law and its associated statutory guidance. Working Together to Safeguard Children 2018 is issued under the Local Authority Social Services Act 1970 and The Children Act 2004 and therefore must be followed. This chapter sets out how to use Signs of Safety alongside the statutory requirements of Working Together to Safeguard Children 2018. In essence, Working Together to Safeguard Children 2018 sets out what we must do and the Signs of Safety approach helps with how to do it. Careful consideration has been given to how the two align and this chapter aims to help practitioners and their managers understand how to use Signs of Safety whilst also meeting the statutory requirements.

Flow chart 1: Action taken when a child is referred to local authority children's social care services



Flow chart 2: Immediate Protection

experience

Information Decision made by an agency with statutory about present and/or past child protection powers (the police, the local harm indicates authority (LA) or NSPCC) that emergency serious/immedia action may be necessary to safeguard a child te danger to the child Immediate strategy discussion between LA children's social care, police, health and other agencies as appropriate, including NSPCC where involved Relevant agency seeks legal advice and outcome recorded Three houses or Immediate strategy discussion makes decisions other about: Immediate safeguarding action; and direct work 2. Information giving, especially to parents. completed with the child to Relevant agency (taking emergency action) sees ascertain child and outcome recorded what they need and want in order to feel safe No emergency **Appropriate** Strategy Family network meeting takes discussion action required emergency place. Danger and section action taken statements and 47 enquiries safety goals shared initiated and bottom lines set out. The family develops the initial With family and child in need * or other child protection ** Child in safety plan with professionals, need clear next steps agree plan for which will show ensuring child's everyone how the See flow See flow safety goals will be future safety and chart 4 ** achieved to chart 3 * welfare and improve the child's record decisions, everyday lived

and act on it

Multi-agency discussion takes place

between Children's Services, Police, Health and any other relevant agency. Discussion to include past harm, future danger, complicating factors, existing strengths, existing safety, safety goal and next steps followed by scaling the risk - 0 (no safety) -10 (safety) to inform the strategy discussion. Professionals consider the need for an immediate family network meeting and who would need to do what in order to arrange this.

Social Worker begins an assessment

which comprises of mapping the information with the family, the professionals and the child and analysing across the 7 sub domains.

Discussions take place with parents about who in their naturally connected network with us/them

against progress towards the safety

goal

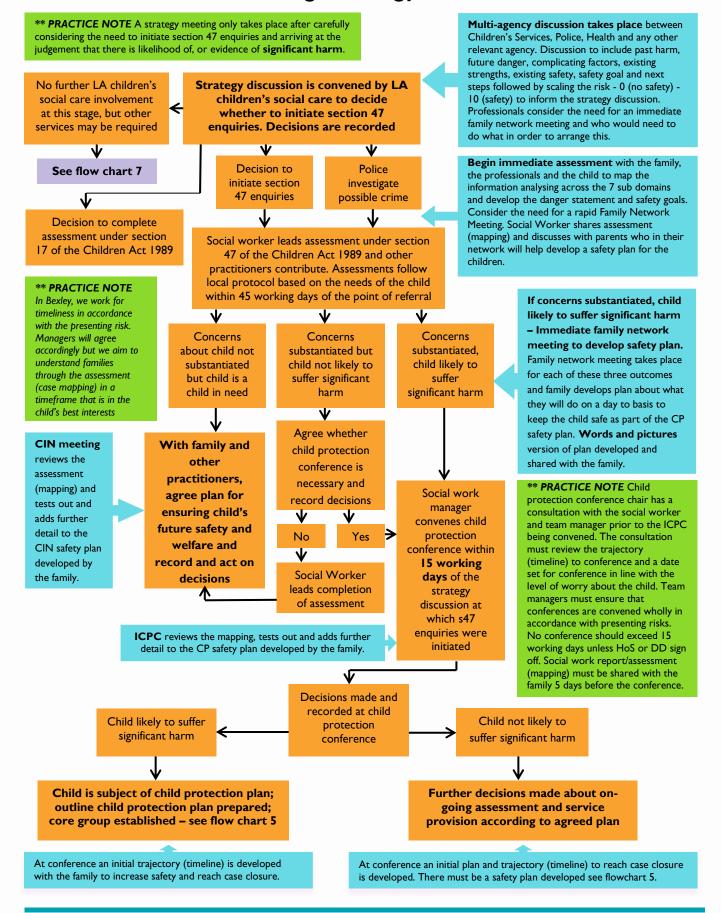
Flow chart 3: Action taken for an assessment of a child under the Children Act 1989

Social Worker begins (or Assessment, led by a social worker, Feedback to continues from Section completed in line with the local referrer 47) an assessment. protocol, including a decision on course Information from the family, of action within one working day of ** PRACTICE NOTE the child and other referral followed by a timely In Bexley, we work for professionals is mapped and timeliness in accordance assessment based on the needs of the with the presenting risk. analysed across the 7 sub child within 45 working days** of the Managers will agree domains in order to make accordingly but we aim to point of referral into LA children's decisions about next steps understand families social care through the assessment (practitioners may also (case mapping) in a consider the three domains timeframe that is in the of the assessment child's best interests. No LA children's LA children's social framework 'triangle'). social care support care support required *** PRACTICE NOTE required but other Three houses or other In Bexley, following a direct work is completed action may be serious case review in 2018, we learned that Actual or No actual with the child to ascertain necessary e.g. social workers and team or likely likely what they need and want in onward referral for managers must carefully significant significant consider how often a order to feel safe help to child and child in need plan is harm harm family; referral for reviewed and that this must be in accordance an early help **Danger statement** with the degree of and safety goals assessment uncertainty about a child's safety and welfare. (including for child in need) shared and Social Worker discusses next See flow further developed with steps including chart 4 the family. Discussions review/decision points*** with family about who with child, family and colleagues in their network will work with them/us to Assessment continues; services Suspect develop a child in need provided if appropriate significant harm safety plan Family network meeting takes Social worker with family/other place; draft danger statements and professionals agrees next steps safety goals and bottom lines set out and family develops the child in need within 45 ** working days e.g. safety plan to meet the safety goals could agree the Children in Words and pictures safety Need (CIN) plan or Child plan/house and/or explanation takes **Review Family** Protection (CP) plan. place with the child network Coordinates provision of Trajectory setting out timeline to meetings review appropriate services case closure agreed with family and safety and scale professionals 0-10 for safety

Review plan and outcomes for child and when appropriate refer to non-statutory

services e.g. 'step down'; or refer for section 47 enquiries or close the case

Flow chart 4: Action following a strategy discussion



Flow chart 5: What happens after the child protection conference, including the review?

Child Protection Safety plan refined, understood and made 'fridge friendly' by the core group. Trajectory (timeline) set out by the core group; timeline for the case agreed by family and professionals to the point of closure.

Family network meetings regularly test and refine the safety plan and offer the family opportunities to reflect and learn.

Words and pictures work developed further with the family.

Danger statements/safety goals reviewed in core groups and scaling 0-10 used to review progresses towards the safety goals. Child is actively

engaged in giving feedback about their safety and this informs our thinking and planning throughout.

** PRACTICE NOTE

The work following the child protection conference is the crucial part of the work. It involves skilfully using our authority to build relationships with the family and their network that creates hope and inspires change. We are not looking for perfect parenting but are seeking at every interaction, to engage the family and their network in a process that helps them to think more deeply, more intelligently and more compassionately about the problems, to identify what action they need to take as a network to create lasting safety for their children and to be supported to sustain these changes. See Practice Framework and expectations for expectations of how this is achieved in practice.

Child is subject of a child protection plan Core group Registered social worker completes multi-agency meets within 10 assessment in line with working local protocols for days of assessment initial child protection Core group members conference commission further specialist assessments as necessary

Core group members provide/commission the necessary interventions for child and/or family members

Child protection plan developed by lead social worker, together with core group members, and implemented

First child protection review conference is held within three months of initial conference

This is a CHILD PROTECTION SAFETY PLAN *In Bexley, all children who are assessed as being in need or subject to a children protection plan have a safety plan that incorporates what professionals will do to support the family to increase safety for the child, and what the family network will do on a day to day basis to increase safety for the child.

In addition to the child protection safety plan, there must also be a 'fridge friendly' version for children that is produced with them and shared with the family network

If a child subject of a child protection safety plan becomes looked after, the child protection safety plan must be reviewed at the placement planning meeting / first review, incorporated into the care safety plan and amended as necessary e.g. 'foster carer will...' of 'mother will...' This should also be reviewed at the first review. All children must understand and contribute to any revised plans.

> Case mapping exercise from the ICPC should be displayed, and a newly mapped assessment undertaken during the review conference in order to compare the progress made and evaluate the impact of the plan. Danger statements/safety goals are reviewed in light of this. Safety scale used to review

progress and make judgement on level of safety. Next steps

Review conference

held

** PRACTICE NOTE

The conference process must follow the principles outlined in Bexley's Signs of Safety Practice Framework and Expectations N:\Everyone\Everyone\Signs of Safety\For practitioners A judgement about increased safety and the impact of the plan cannot be completed until the child's feedback is heard and fully considered. What does the child say is different about their experience at home?

Are they safe enough? And are the family and network receiving enough support to enable the family to stay safely together? ** PRACTICE

No further concerns about significant harm

Child no longer the subject of a child protection plan and reasons recorded

Further decisions made about continued service provision

See flow chart 7

Some remaining concerns about significant harm

Child remains subject of a child protection plan which is revised and implemented

Review conference held within six months of initial child protection review conference. Decisions required in the best interest of the child

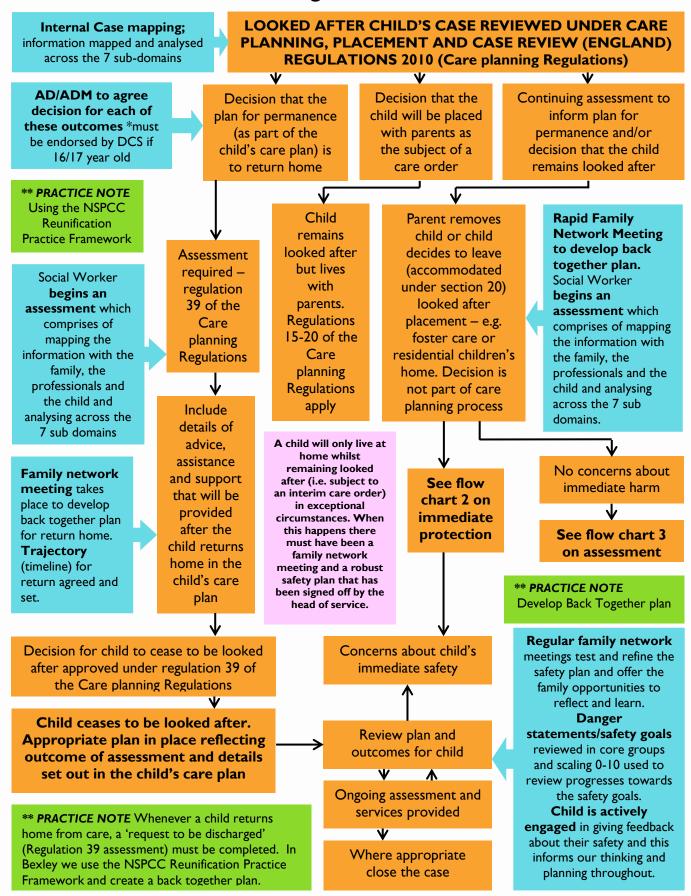
If the plan is likely to continue beyond six months, refer to the Case Management Review. The CMR panel should be built into the trajectory (timeline) and will review the plan and trajectory (timeline) in advance and in parallel with scheduled review

conferences and

core groups.

NOTE

Flow chart 6: Children returning home from care to their families



Flow chart 7: Family Wellbeing Process

Front Door-MASH receive an early help Case Mapping on Family Wellbeing Service (FWS) request with the family's signed information from referrer consent, on the multi-agency referral form. Referral form is available at and family. MASH enquires http://bexley.gov.uk/earlyhelpandprevention into past harm, existing strengths and existing safety in discussions with the referrer and family. Eligibility criteria for Presenting level of Eligibility criteria for FWS is met and FWS is not met and/or need is higher than level 3 FWS. Child is presenting level of need level of presenting can be met by other need requires a level 'in need' or at 'risk of level 2 local services significant harm' 2/3 FWS Family are re-directed Family or referrer FWS manager to level 3/4 Children's contacted & reviews referral, Social Care service for checks initial Front-The FKW begins an signposted to assessment. For cases that another local Door decision and child in need have come directly to FWB, service allocates to a Family assessment this comprises of mapping the Keyworker (FKW) information with the family, professionals and child and analysing across the 7 sub If at any time the FKW arranges introductory domains. For cases that have been open to CSC, this family's situation visit & starts undertaking comprises of updating the CSC deteriorates and the wellbeing assessment mapping. needs of the child Three houses work is increase requiring a completed with the child to tier 3 or 4 service. Following the Following the understand what they need and assessment, the assessment, the FWS Manager can want. transfer direct to family decide family no longer Children's social care need or want a they do want a FKW develops worry statements **FWS FWS** and wellbeing goals with the family. Scaling questions are developed and everyone is invited to scale and give FKW arranges initial wellbeing planning meeting, inviting family their narrative for how they have & relevant partner agencies to form a team around the family scaled. The family start to develop the wellbeing/safety plan with the FKW. The wellbeing plan is put into place, the FKW visits the family Words regularly (minimum 4 weekly) & partners keep the family and The and each other updated on the progress wellbeing/safety **Pictures** plan continues work is to be refined, undertaken FKW arranges review wellbeing planning meetings (every 3 reviewed and with the months minimum) to measure progress and update the plan developed family. agencies to form a team around the family through ongoing family network The family reach their goals and no longer need or want a FWS. An ending meeting is meetings and

family support

meetings.

held, the case is closed and closure letter is sent to the family and partners are informed.

(Episode closed on EHM)