

Protocol between Children's Social Care and Early Help

Responsible Manager: Head of Early Help Services

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1. Introduction and purpose

- 1.1 Buckinghamshire County Council's Children's Services is committed to providing services/interventions to prevent the most vulnerable children and families in the community from experiencing difficulties and prevent suffering significant harm.
- 1.2 Key Principles;
Children are safe
The process is simple transparent and future proofed
Early Help owns it's threshold as does Social Care
- 1.3 Early Help is about ensuring that children and families receive the support they need at the right time. Working Together to Safeguard Children (2015)¹ defines Early Help as:
Providing early help is more effective in promoting the welfare of children than reacting later. Early help means providing support as soon as a problem emerges, at any point in a child's life, from the foundation years through to the teenage years. Effective early help relies upon local agencies working together to:
 - *identify children and families who would benefit from early help;*
 - *undertake an assessment of the need for early help; and*
 - *provide targeted early help services to address the assessed needs of a child and their family which focuses on activity to significantly improve the outcomes for the child (page 12).*
- 1.4 A coordinated approach is required to partnership working in order to support children and families at levels 3 & 4 of the Threshold document www.bucks-lscb.org.uk/professionals/thresholds-document/ . A 'single front door' (First Response) has been established to enable a clear process of referrals, to transition children and families to the support they need at the right time.
- 1.5 One standard form, the Multi Agency Referral Form (MARF) www.bucks-lscb.org.uk/wp-content/uploads/BSCB-Procedures/Multi_Agency_Referral_Form.doc is used to refer children and families for services, to either the Early Help Panels or Children's Social Care (CSC).
- 1.6 MARFs meeting level 3 criteria will be progressed to an Early Help Panel (except for Children In Need cases) for consideration of a coordinated Multi Agency approach for support. An Early Help panel has been established across the county. This is a multi-agency panel established to determine the appropriate lead agency for the case. MARFs meeting level 3 Early Help criteria will be directed by First Response to the Early Help Panel.
- 1.7 MARFs meeting level 4 criteria will be progressed to Children's Social Care Team for an assessment. MARFs meeting Social Care Children In Need threshold will also go through for an assessment (see section 2 below).

¹ Working together to Safeguard Children (March 2015): A guide to inter-agency working to safeguard and promote the welfare of children. This guidance covers: the legislative requirements and expectations on individual services to safeguard and promote the welfare of children; and a clear framework for Local Safeguarding Children Boards (LSCBs) to monitor the effectiveness of local services.
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419595/Working_Together_to_Safeguard_Children.pdf

- 1.8 First Response is based within Social Care to ensure consistency around decision making and safeguarding scrutiny.
- 1.9 This protocol sets out the agreement between Children's Social Care and Early Help services about how referrals will be processed and cases will be transferred between Children's Social Care and Early Help Panels, in order to achieve the best outcomes for children, young people and their families.

2. Legal context

- 2.1 Section 17 of the Children Act 1989 (Children in Need) states that a child shall be taken to be in need if:
 - (a) the child is unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision of services by a local authority under Part III of the Children Act 1989;
 - (b) the child's health or development is likely to be significantly impaired, or further impaired, without the provision of such services; or
 - (c) the child is disabled.
- 2.2 Section 96 of the Children and Families Act 2014 (young carers)
All young carers under the age of 18 will have a right to an assessment regardless of whom they care for, what type of care they provide or how often they provide it.

3. Responsibilities of Children's Social Care

- 3.1 This section sets out the agreed responsibilities of Children's Social Care in respect of maintaining an effective working relationship with Early Help services and delivering a system to process referrals for support at level 3 of the Threshold document through the Early Help panels.
- 3.2 Children's Social Care will provide a 'single front door' (First Response) that receives all children and families referrals for levels 3 & 4 of the Threshold document. Any referrals at 1 & 2 of the Threshold document will be directed back to the referrer or signposted accordingly.
- 3.3 First Response will ensure they receive informed consent and sufficient information to assist in them making a judgement on the level of need and appropriate action. If there is insufficient information from the referrer, the MARF will be returned to the referrer for further information. If a MARF has not been completed, the referrer will be requested to confirm the referral in writing via a MARF. Where this is not possible (for example self-referrals) First Response will ensure that full information is passed to the Early Help Panel.
- 3.4 First Response will record details onto the agreed recording system (LCS Liquid Logic) and decide on the appropriate response or action in accordance with the Thresholds document. If the threshold for Early Help is met, it will be designated on the system as 'referred to other agencies' (until further development of the system can take place).
- 3.5 First Response will provide information to and /or signpost referrers to the appropriate services or to Buckinghamshire Family Information Service (BFIS) where needs are below the level for Children's Social Care and Early Help (levels 3 & 4).

(This is currently not recorded if clear level 2; or if it is initially recorded, it is added as 'referred to other agencies'; until further development of the system can take place).

- 3.6 Children's Social Care will continue to carry out assessments and provide appropriate support for children and young people requiring level 4 interventions (and level 3 as detailed in 1.6).
- 3.7 Children's Social Care are responsible for ensuring that cases that are transferred to Early Help Panels meet the criteria at level 3, according to the Threshold document, and that level 2 cases are signposted to the appropriate agencies.
- 3.8 Referrals through First Response meeting EH criteria initially, will be passed to the EH Panel within 24 hours.
- 3.9 If the C and F Assessment indicates possible Family Resilience Support is appropriate this will be discussed in the Weekly Transfer Meeting attended by Team Managers from both social care and Family Resilience.
- 3.10 *Step forward process:* Following assessment and/or intervention, including where the child has been the subject of a Child in Need or Child Protection Plan and the risks and needs have been sufficiently reduced, the social worker has the following options:
 - To sign post the family to other services and close to social care
 - To step forward to a partner agency already involved in the CIN or CP team around the child
 - To discuss the child at the Weekly Transfer Meeting which would lead to one of the following:
 1. Identified level 2/3 Early Help or Universal Services brokered by Social Worker
 2. Family Resilience Service
 3. Referral to the Early Help Panel due to need for multi-agency support and identification of lead agency
 4. Child to remain with CIN

Following the decision to transfer a child to the Family Resilience Service, a joint handover visit will take place with the Social Workers and Family Resilience Worker.

Before stepping forward from Social care to Family Resilience the social worker should ensure the following:

- The family give consent to continuing services on a voluntary basis
- There is a clear rationale for the continuing role of Early Help and Support Services

Process:

- All those attending should be given at least 3 days notice of children to be discussed (by Friday to be discussed on the following Wednesday)
- The decision rests with the receiving manager
- All agencies are notified of the change of team.
- Children should not be closed to one service until accepted by the receiving service

- 3.11 *Step up process*: where specialist advice on step up is required, discuss with First Response in the first instance. Where new information clearly increases the level of need to level 4, the case should be referred back through First Response on a MARF, clearly indicating the following: a clear rationale why the new information meets level 4; services/support offered provided by the referrer; expected outcomes for the family. If there is risk of significant harm (Section 47 – see appendix 4) the referrer will be invited to a strategy meeting.

4. Responsibilities of Early Help

- 4.1 This section sets out the agreed responsibilities of Early Help services in respect of maintaining an effective working relationship with Children's Social Care in responding to requests for complex needs / specialist help, through First Response in Children's Social Care.
- 4.2 EH Panel Coordinators will receive referrals from First Response, including family consent and will gather/coordinate multi-agency information for the EH Panel for level 3 cases.
- 4.3 EH Panels will meet regularly to discuss cases and assign a lead agency. Core partner composition of the EH Panels include: Social Care, TVP, Health Visiting, FRS, CAMHS, Schools, DAAT, Youth Services, District Councils, Children's Centres, Early Years, Voluntary sector and School Nursing.
- 4.4 If the EH Panels receive referrals through First Response that do not appear to meet the criteria for intervention through EH, the EH Panel Manager will be responsible for ensuring the procedure outlined in section 7 of this protocol is followed.
- 4.5 Lead agency will assign a lead family worker; the lead agency will contact the EH Panel Co-ordinator to highlight the lead worker to the EH Panel.
- 4.6 Lead worker will engage with the whole family and support them to develop a plan to deal with the issues they are facing.
- 4.7 Lead worker to deliver and coordinate services to support the family. A Team Around the Family meeting may take place where appropriate to draw in agencies to support the family and ensure the views of the family members are represented.
- 4.8 Agencies will record case details on their own recording system. Outcomes should be reported to the EH Panel coordinators.
- 4.9 It is recommended to agencies through training that individual agency assessments should be completed within **one month**.
- 4.10 Reviews of plans should take place regularly; it is recommended through training that these take place at **one month, three months and 6 months** or closure. This will be dependent upon individual agency policies. Agencies should contact the EH panel if: the case is complicated and requires further discussion; if the case is 'stuck'; if there is disengagement by the family; or if the case is closed.
- 4.11 Step up process
- 4.11.1 Lead agencies will ensure that there is effective communication and consultation with Children's Social Care about individual cases, particularly

where there are concerns that intervention at level 4 of the Threshold document may be required. See 3.11 above – step up process.

- 4.11.2 In situations where lead agencies assess that intervention is required for complex cases at level 3 and level 4, there should be liaison with the relevant team manager/First Response and a MARF submitted. For level 4 cases where there is an immediate child protection concern, this should be referred immediately. Partners providing Early Help services and CSC need to work together to ensure a smooth transition.
- 4.11.3 Where cases are being transferred to Children's Social Care, family consent is required. However, if the nature of the concern meets Section 47 criteria, consent is not required and should be referred immediately. (If unsure please consult a Manager or Social Worker in First Response)
- 4.12 In order to facilitate the smooth transfer of cases, where families no longer require statutory intervention but will need ongoing targeted support, Early Help partners will ensure appropriate attendance at Team Around the Family meetings or other review meetings.

5. Key communication routes

- 5.1 All cases considering transfer between the services will be discussed at the Weekly Transfer Meeting
- 5.2 There will be ongoing communication and consultation between the services in respect of individual children, young people and families on a case by case basis where required.
- 5.3 All level 3 cases going through the Assessment teams will be passed through the TM range 10 post or PIM (and as previously discussed in 3.10 for Step forward cases).
- 5.4 Discussion will take place on cases where it is considered there may be a challenge, this will aid learning and moderation on cases and further collaboration between CSC/CIN managers and EH Managers on consistency of application of threshold levels.

6. Information sharing procedures

- 6.1 All agencies have a responsibility to adhere to the Children, Young People and Families Information Sharing Code of Practice, this can be found at: <http://www.bucks-lscb.org.uk/wp-content/uploads/BSCB-Procedures/Revised Information Sharing Code of Practice 2013-16.pdf>
- 6.2 Cases for Children's Social Care are recorded on LCS; cases directed to Early Help are designated as 'referred to other agencies'. If cases are referred to the Family Resilience Service, the case file will be recorded on EHM. If cases are referred through the EH Panel to a lead agency, the case file will be recorded on the lead agency's case file system.
- 6.3 The following have 'read only' access to LCS to access appropriate records for supporting families:
 - Family Resilience Service
- 6.4 Children's Social Care are permitted 'read only' access to EHM.
- 6.5 The Outcomes Star has been agreed as Buckinghamshire's engagement, assessment, planning and distance travelled measurement tool for level 3 not

meeting CSC threshold (and level 2 where appropriate). A single licence will ensure coordination of this tool across partners and will provide a consistent monitoring and reporting mechanism of Outcome Stars, at an operational and strategic level.

7. Procedure for resolving difficulties

7.1 If the Early Help Panel receives referrals that do not appear to meet the criteria for intervention, or if the Early Help Panels do not accept referral(s) when requested, the staff will follow this agreed procedure.

7.2 Inappropriate level 2 cases:

- As per section 3.7 any level 2 cases coming through to First Response should be returned to referrer or signposted to appropriate agencies.
- Where inappropriate level 2 cases are referred to the EH Panel, the referral should be returned back to the referrer for action, or advise on appropriate action/signposting may be given. First Response should be notified for management to use as a learning tool.

Inappropriate level 3 / 4 cases:

- Where a case comes to EH Panel that is deemed inappropriate for Early Help in the first instance this will be discussed at EH Panel with CSC Manager Representative.
- If issues cannot be resolved at this level, they will be raised by the EH Panel Manager with the appropriate Head of Service within 24 hours, for discussion and decision upon the appropriate course of action.
- If this does not resolve the issue, the escalation process will be. It is important that in following this procedure, staff should be mindful of the need to minimise any delay in responding to the referral.
- Where difficulties encountered indicate that there has been inconsistent application of levels of need thresholds for intervention, this will be addressed in senior management meetings. Consideration of any proposals for changes in processes, that may be necessary for a more consistent approach, will be taken forward by Heads of Service.

7.3 Please refer also to BSCB Escalation Policy:

http://www.bucks-lscb.org.uk/wp-content/uploads/BSCB-Procedures/Escalation_Challenge_and_Conflict_Resolution_between_Practitioners_or_Agencies_Procedure.pdf

Appendices:

Appendix 1: Threshold document

<http://www.bucks-lscb.org.uk/professionals/thresholds-document/>

Appendix 2: Multi agency referral form (MARF)

<http://www.bucks-lscb.org.uk/concerned-about-child/>

Appendix 3: Early Help Strategy

http://www.bucks-lscb.org.uk/wp-content/uploads/BSCB-Procedures/Early_Help_Strategy_Nov_20152.pdf

Appendix 4: Legal Context:

Working Together (2105) states (extract from pg's 15-16):

The provision of early help services should form part of a continuum of help and support to respond to the different levels of need of individual children and families.

Where need is relatively low level individual services and universal services may be able to take swift action. For other emerging needs a range of early help services may be required, coordinated through an early help assessment. Where there are more complex needs, help may be provided under section 17 of the Children Act 1989 (children in need). Where there are child protection concerns (reasonable cause to suspect a child is suffering, or likely to suffer, significant harm) local authority social care services must make enquiries and decide if any action must be taken under section 47 of the Children Act 1989.

The criteria, including the level of need, for when a case should be referred to local authority children's social care for assessment and for statutory services under:

- *section 17 of the Children Act 1989 (children in need);*
- *section 47 of the Children Act 1989 (reasonable cause to suspect children suffering or likely to suffer significant harm);*

- *Section 17 – see section 2*
- *Section 47 of the Children Act 1989*

Section 47 of the Children Act 1989 (reasonable cause to suspect children suffering or likely to suffer significant harm) states that:

Where a local authority:

- (a) are informed that a child who lives, or is found, in their area (i) is the subject of an emergency protection order, or (ii) is in police protection; or
- (b) have reasonable cause to suspect that a child who lives, or is found, in their area is suffering, or is likely to suffer, significant harm:

the authority must make, or cause to be made, such enquires as they consider necessary to enable them to decide whether they should take any action to safeguard or promote the child's welfare.