

Children's Services Practice Standards

VERSION 1.0

MARCH 2024

CONTENTS

| SECTION | DETAILS | PAGE |
|----------|--|-----------|
| 1 | Introduction | 1 |
| 2 | Liverpool City Council Children’s Services Practice Principles | 1 |
| 3 | The Standards | 4 |
| | ONE Good quality management oversight and decision-making | 4 |
| | TWO Good recording | 6 |
| | THREE Good quality home visits | 8 |
| | FOUR Good quality assessments | 10 |
| | FIVE Good quality child protection enquiries | 13 |
| | SIX Good quality child protection conferences | 15 |
| | SEVEN Good core groups | 18 |
| | EIGHT Good planning for children (child in need, child protection and care plans) | 20 |
| | NINE Good support for children in need | 23 |
| | TEN Moving children from home into our care well | 26 |
| | ELEVEN Good support for children in our care | 28 |
| | TWELVE Good Child in Care reviews | 32 |
| | THIRTEEN Good support for our care leavers | 35 |

1. Introduction

These standards describe the minimum levels of practice that children, young people and families should be able to expect from us. They take into account legislation, national guidance, social work practice standards, research, the views and experience of practitioners and managers and feedback from children, young people and families.

The standards are not intended to provide detailed practice guidance, which is available in our Children's Services Procedures Manual (tri.x). They help us to know what good looks like and provide us with a way of reflecting on the way we work with children and their families. They promote consistency in the quality of practice delivered across Children's Services.

A commitment to embedding best practice principles and standards is a core expectation of all Liverpool City Council Children's Services employees, and working to these standards is mandatory for all workers.

Each standard describes the best practice we should be aiming towards (what we *should* do) and contains some 'bottom lines' (what we *must* do).

2. Liverpool City Council Children's Services Practice Principles

Safeguarding children and young people:

Our primary responsibility is to safeguard children and young people. We will strive through authoritative practice to do this in the least interventionist way possible, responding to the needs of children, young people, and their families as quickly and early as possible, providing the right support at the right time.

Equality and diversity:

We respect difference, celebrate diversity, and value all people. We work to challenge oppression and discrimination in all forms. We support everyone to achieve their full potential in line with their choices and abilities, regardless of who they are and their past experiences.

Being professional and accountable:

We are accountable for providing the highest quality service we can. We will be reliable and honest in order to earn the trust and confidence of children, young people, and their families. We will show commitment to our service vision and values

as well as national and local standards of practice. We will model behaviour based on our positive values and encourage other people to do the same. We will respect managerial direction. We will make time to learn and use our agreed practice models.

Listening and communicating clearly:

We will be responsive, available, and take time to listen carefully. We are aware of barriers to communication and will help everyone to participate and communicate as much as they can. We will work to understand the lived experience and opinions of children, young people and their families. We will use language that is non-judgemental, jargon free and easy to understand verbally and in writing. We will provide accurate information and be polite, respectful and helpful. We will ensure children, young people and families are aware of their rights.

The right relationships:

We will model relationships based on kindness. We will spend time working with (rather than 'doing to') children, young people and families in order to build meaningful relationships and co-produced plans that are based on honesty and a clear understanding of people in their own context.

Participation:

We will co-produce plans, assessments and other work together with children, young people and families. The participation of children, young people, parents and their families will be held at the core of what we do, ensuring they are prepared for meetings and know why we are involved in their lives.

Working together:

We are responsible for our role in professional networks to coordinate current work and provide the right support for families at the right time. We will look for opportunities to improve how we deliver services through collaboration with colleagues in our service, partners outside our service and the children, young people and families we work with. We will show professional curiosity and respectful challenge with each other.

Developing our staff:

We prioritise the health, safety and wellbeing of staff. We will endeavour to ensure staff have a manageable workload that leaves room for development. We are committed to improving our own practice. We will encourage and support the professional development of others. We will try to be creative, flexible, innovative

and take an active role in our learning culture. We will protect, prepare for and make use of supervision, reflection and continuing professional development and training which is tailored to our specific services.

Achieving permanence:

The best outcomes for children and young people are normally met in their own family. However, for children who can't stay in their families, we will work as quickly as we can to help them have a lasting home where they can feel settled and belong. For children and young people in every part of our service, we will prepare life story work with them to help them understand and make sense of their own journey. We will promote independence whilst protecting our children and young people from danger or harm.

How we write about children, young people and families:

We are aware that records belong to the child or young person. We will strive to accurately capture their lived experience, voice and journey. We will set out clearly how decisions have (and have not) been made. We will meet statutory requirements around recording. We will maintain confidentiality and only share information when there is a clear 'need to know'.

3. The Standards

Throughout the standards, the terms ‘child’ and ‘children’ are used to refer to all the children and young people we work with.

STANDARD ONE: in Liverpool good quality management oversight and decision-making means:

- Ensuring management advice and decisions are professionally sound, based on clear evidence, professional expertise and are recorded accurately and within expected timescales.
- Providing clear direction in order to ensure assessments and plans are good quality and effective in bringing about positive change for children.
- Management oversight and decision making is purposeful that adds benefit to the quality of care planning, and in certain circumstances includes how risks for children are mitigated as a result of actions being taken.
- Modelling positive relationships and communication with staff and colleagues, demonstrating professional behaviours and setting expectations of good practice.
- Creating a culture of learning and professional curiosity in teams that are mutually supportive, respectful and focused on good work, and offering practitioners high support and high challenge in terms of our expectations regarding quality of practice.
- Helping ensure children and young people are at the centre of everything we do – their voice, their felt and lived experience, their individual story, their needs. Encouraging practitioners to build meaningful, effective and supportive relationships with them and their families.
- Recognising and celebrating good practice and promoting this inside and outside the team
- Having regular conversations about the achievements, progress and safety of children in between formal supervision and recording them clearly.
- Creating a safe space to hold reflective conversations on race, culture, diversity and identity. This includes encouraging curiosity and challenging unconscious bias and inequalities whilst celebrating diversity and difference.

- When we need to have courageous conversations or make difficult decisions, such as addressing poor performance, doing so with openness, honesty, transparency and respect.
- Being assured that work is of good quality by routinely reading and auditing case recordings and ensuring corrective actions identified in all audits are completed as soon as possible.

Our bottom lines...

- We will evidence that quality supervision is taking place with all staff in line with the supervision policy.
- We will hold formal supervision with all practitioners and managers every four weeks, with a minimum target of 10 supervisions across the year.
- We will discuss each family at least every two months, recording on file the rationale for any decision to discuss them less frequently than two monthly.
- For those children who have a visiting frequency of every three months or more, including those accessing short breaks and children in care, supervision frequency will be aligned to the child's individual plan. If supervision frequency is outside of the two monthly this will be clearly recorded in the Case Summary, along with expected visiting arrangements.

STANDARD TWO: In Liverpool good recording means:

- Keeping children's records up to date and reflecting their current circumstances, plans and the progress being made through working together.
- Remembering that we are the holders of children's stories and making sure that their voice is visible in all recordings.
- Recording the rationale for the decisions we make about children so that they and others can understand why we have made decisions.
- Recording children's unique identity in terms of language, ethnicity, culture, religion, age, gender, sexuality and disability.
- Making sure it is clear if the child or family have any specific communication needs due to language, disability or learning needs etc.
- Recording respectfully, using strengths-based language and acknowledging the strengths of the child and their family so that when they read what is on their records they will know they are valued and listened to.
- Using clear language in recordings and avoiding using professional 'jargon' and acronyms.
- Clearly identifying the child's views in their record, recording what children tell us in their own words. In order to clearly identify the child/young person's words, recording them in bold type.
- Ensuring that recordings reflect the views of all of those who are relevant to the child and that, when they do not engage, all efforts to gather their views are recorded.
- Creatively recording evidence of direct work, attaching scanned examples of resources used and uploading photographs or direct work sessions, to ensure the child's contribution, voice and opinion is captured in a meaningful way.
- Differentiating between observed fact, reported fact and interpretation/ opinion in recordings.
- Evidencing management oversight by recording all authorisations and decisions.

- Where other professionals or family/ friends have provided information, ensuring that recordings reflect their name, contact details and relationship to the child.
- Recording instances where interpreters or specialist workers have been used to facilitate communication.
- For children in our care, evidencing oversight from their Independent Reviewing Officer (IRO) and the impact of their wishes and feelings in their reviews.
- Letting children know that they can ask to see recordings about them and providing them with information on how to do it.

Our bottom lines...

- We will clearly record when children have been seen on their own and use a range of methods to obtain and document their wishes, feelings and views and how these have informed our decisions and plans.
- We will make sure that every child's record contains:
 - a good quality, concise chronology of key events in their lives and decisions taken and who made them
 - a genogram, so we can see who the important people are in their lives
 - a concise, up to date case summary
- Whenever children who we look after moves home we will write concise summaries of their time in that home for or with them, so they can see their story when they get older and so we can learn from their experience and use it to inform future planning for them.
- We will update recordings within 24 hours of a critical event, such as a child coming into our care, strategy discussion taking place; within two working days of significant events, such as statutory visits to children; and five working days for all other recordings.

STANDARD THREE: In Liverpool good quality home visits means:

- Planning enough time for visits so we can have meaningful conversations with children and their caregivers and build good working relationships with them.
- Where possible, arranging visits that fit in with family routines (this may not be possible where e.g. child protection or care plans require unannounced visits).
- Arriving on time for home visits and contacting families to let them know if we are unavoidably delayed.
- Respecting people's homes and family cultures and practices, for example removing shoes when entering or avoiding particular days or times which clash with religious or cultural events.
- Preparing well before visits so we are clear about what we want to achieve from the visit and can explain the purpose of our visit to families – remembering that each home visit should be an intervention, make a difference for the child and be linked to the aims and progress of their plan.
- Asking families about their culture and belief systems, recognising that they are experts in their own lived experiences, and exploring with them what this means for the way they live as a family and care for their children.
- Using direct work tools to help children express their wishes and feelings, and to assess whether our support and plans are reducing risk and improving their lives.
- Observing and recording children's daily lived experience, how well their needs are being met, and interaction and attachment between them and their caregivers.
- Assessing home conditions in line with agreed plans, including checking kitchens, toilets, bathrooms and children's bedrooms, especially where neglect is an issue.
- Addressing any issues with caregivers so that there is a shared understanding about acceptable standards for the child.
- Having open and honest conversations with caregivers, acknowledging

progress being made and addressing with them any areas of concern in terms of lack of progress. This is to help them understand our concerns and work together to reduce risks and improve outcomes for their child/ren.

- Using professional curiosity to assess and understand any changes in the family's living circumstances, for example significant events, new adults or previous partners of concern living in the family home.
- Recognising any immediate risks or additional concerns for the safety of children and taking appropriate action.
- Recording visits in a respectful way, distinguishing between fact and observation, and with clear actions agreed with the family.

Our bottom lines...

- We will always see children alone on visits unless there is a specific reason not to and will record whether they were seen alone and if not why.
- The frequency of our visits will be informed by the needs of individual children, agreed plans and management guidance. However, minimum visit frequencies for the following children are:
 - Children with a Child Protection Plan – at least once every 10 working days
 - Children in Need (CiN) Plan – at least once every 20 working days
 - Children with complex health needs and disabilities being supported by the disabled children's team – as agreed with team manager according to individual needs
 - Children with Disabilities and accessing specialist packages of care, direct payments and short breaks – as agreed in the assessment and multi-agency plan and authorised by team manager
 - Children in Care – at least once every six weeks (or in line with statutory guidance)
 - Care leavers – at least once every two months
- We will record our visits within two working days.

STANDARD FOUR: In Liverpool completing good quality assessments means:

- Building open, honest and respectful relationships with children and their parents/caregivers from the beginning, to start developing trust.
- Working with children and their parents/caregivers understand why an assessment is needed, what we will be doing, why, and the potential outcomes.
- Being authoritative and taking decisive action to protect children that need it.
- Providing help and support to improve children's situations whilst we are completing our assessment.
- Completing a genogram/ eco map with the child and their family, so they can tell us about the relatives, friends and neighbours who are important to them and who could contribute to the assessment and offer them help and support.
- Including and speaking to all the adults who usually live with or care for the child, including the ones who might be temporarily absent and estranged parents or others that who spend significant periods in the home or have child-care responsibilities supporting the family.
- Making sure we can effectively communicate with children, young people and their parents/caregivers. Planning and putting in place any additional help needed, e.g. arranging interpreters.
- Consulting other agencies involved with the family, gathering and analysing their information.
- Making sure assessments are holistic, and include and fully consider risks, needs, strengths, the historical context, significant events and the context to the child/ young person's current situation and events leading to the assessment.
- Taking a balanced approach towards assessments, recognising that all families have their own stories, including challenges and successes
- Thinking about all the things that make the child and family who they are. This will include race, ethnicity, gender, disability, religion, sexuality, nationality and any cultural needs.

- For children with additional needs including what is important to and for them, their circle of support, specific communication needs and any additional support they need to achieve specific outcomes.
- Recording the source of information used in the assessment, and distinguishing facts from observations.
- Drawing together an effective analysis of the information gathered that:
 - Demonstrates an awareness of the impact of adverse childhood experiences on children, young people and the way they parent as adults
 - Explores present behaviours and difficulties in the context of past trauma. This will help us to work in a relational and strength-based way and avoid us re-traumatising family members
 - Considers the actual or likely impact of any parenting difficulties on the child's health and development
 - For children with additional needs due to having special educational needs or disabilities, considering the impact of those needs on them and their parents/carers, siblings and other family members.
 - Considers protective factors and the parent/s ability and commitment to change, and what help would be needed to support them to make those changes.
 - Effectively uses research to help us reach fair and relevant conclusions
- Discussing the completed assessment with children and their parents, clearly recording any areas of disagreement or queries around factual accuracy.
- Managers supporting practitioners to make decisions based on observations, reflection, evidence, research and analysis and clearly recording management oversight and decisions.
- Assessments providing additional insight in understanding a child's needs that the practitioner wouldn't have otherwise known.

Our bottom lines....

- We will keep children and their families' voices at the heart of assessments, while using our professional curiosity to fully understand their lived experiences.
- We will make sure we have consent for the assessment from parents and/or young people (depending on their age and level of understanding). If in exceptional circumstances this is not appropriate, we will record this decision and explain our rationale to the family.

- We will include all children in the household as part of family assessments.
- We will see children alone and use direct work to help them express their wishes, feelings, what is going well and worries. For children with special educational needs and disabilities they may require the support of their primary carer, so professional judgement will be needed. If we cannot see them, or see them alone, we will record the reason for this.
- We will see all the children in a family within three working days of allocation.
- There will be a clear allocation process to the practitioner that is directed by their manager that helps to set out the purpose and focus of any assessment.
- We will complete our assessments in timescales that are appropriate and proportionate to the child and family's circumstances but not longer than 45 working days.
- Review points will be built into the assessment to ensure our interventions are timely and the child is being safeguarded.
- When the assessment is finished, we will give the child and family a copy so that they can read it, tell us what they think and check we have included what they wanted to say. We will make sure they know what the next steps will be.
- We will inform relevant professionals and agencies of the outcome of the assessment and next steps.
- We will keep assessments up to date and review them whenever there are significant changes in the child's life.
- When we are working with parents of unborn children, we will begin pre-birth assessments as soon as possible and aim to complete them by week 20 of the pregnancy whenever possible.

STANDARD FIVE: In Liverpool completing good quality child protection enquiries means:

- Holding multi-agency strategy discussions whenever there is cause to suspect a child is suffering or likely to suffer significant harm, to make sure decisions are based on the views of all agencies. Ensuring that all relevant agencies take part.
- Being clear about what led to the strategy meeting being held.
- Starting with information from the agency that made the referral to confirm if they have any additional information they want to add about the referral before providing their overview of involvement with the child and their family.
- Once all information has been shared, providing a summary of the worries, protective factors and any grey areas.
- Making a clear joint decision, based on information shared, about whether to complete a s17 family assessment or whether there is reasonable cause to suspect that the child is at risk of significant harm and the rationale for this. If yes, the threshold is met to initiate child protection enquiries under s47 or immediate protective action.
- Setting out the actions to be taken under a s47 or s17 assessment. As a minimum this will include:
 - Who will see and speak to the child, where and when
 - Who will see and speak to the parent/s, where and when
 - Who will visit the child's home and when
- Where there is a joint investigation with the police or a criminal investigation, discussing with the police what information will be shared and when
- Thinking about how we can best engage children and their parents/carers, recognising that a s47 enquiry will be a stressful process for them.
- Using a range of direct work activities with children to understand their lived experience and gain their wishes, feelings, worries and strengths
- Identifying all concerns regarding significant harm including likelihood, and identifying all potential risks, including those posed by frequent visitors to the household.
- Making sure that strengths and potential protective factors have been

identified and recorded and thinking about how they could mitigate against the identified risks.

- Ensuring that we understand the role of fathers and partners in the household and that new partners or new household members are properly assessed.
- Recognising the potential needs and safety of brothers and sisters and any other children in the household (and other connected households where relevant).
- Identifying all the key agencies involved with the child and their family and incorporating the information and views of all agencies into the assessment.

Our bottom lines...

- We will follow Liverpool Safeguarding Children Procedures for S47 enquiries.
- We will hold strategy discussions as soon as possible, always within 24 hours of referral unless in exceptional circumstances
- Where a strategy discussion decides a s47 enquiry should take place we will see the child within 24 hours and speak with them alone during the enquiry
- Where a strategy discussion requires immediate action to protect a child we will plan and enact this.
- Any non-mobile infant with unexplained bruising should be referred to Legal Gateway
- We will agree and record the interim safety plan for the child at the strategy discussion.
- We will ensure s47 assessments include a clear analysis of risks and strengths, and a recommendation regarding whether to convene an Initial Child Protection Conference and any other actions to be taken.

STANDARD SIX: In Liverpool managing good quality child protection conferences means:

- Recognising that child protection conferences can be stressful and emotive and can create significant anxiety for families.
- Helping parents and young people prepare for the conference by helping them understand the reasons for the conference. Proactively supporting them to be able to attend and participate and making sure they know they can bring a supporter or advocate to the conference.
- Planning for any communication or accessibility needs of people attending and making arrangements for interpreters if needed.
- Making sure a good quality social work report is available which summarises and analyses all information from the assessment to date and all pre-existing records relating to the family and makes clear recommendations about next steps.
- Making sure that the social work report is shared with the family in advance of the conference, and that they have had chance to consider and comment on the report.
- Partner agencies preparing reports which consider strengths, worries, risks and protective factors and their impact on the child and sharing them with the family before the conference.
- Considering whether the child or young person should attend for at least part of the conference. If they are not attending the conference, then encouraging them to share their views beforehand.
- The CP Chair meeting with the parents and child before the conference to explain what will happen at the meeting and that they will have the opportunity to contribute to discussions.
- The CP Chair chairing the meeting in an inclusive and sensitive way, so that parents, young people and professionals all have the opportunity to contribute information and their views.
- The CP Chair making sure that there is a comprehensive discussion of family strengths and protective factors as well as difficulties, risks and their impact on the child.

- The CP Chair enabling all participants to share their views about the need for a child protection plan.
- The CP Chair making sure the conference concludes with a well-reasoned decision about the need for a child protection plan that is based on sound application of the threshold criteria i.e., whether or not each child is suffering or is likely to continue to suffer significant harm.
- Agreeing an outline plan, where appropriate, that is proportionate, SMART, addresses what needs to change in order to protect the child or young person and clearly identifies who is responsible for agreed actions and when they will be completed.
- Making sure that plans make clear to parents what they need to change, what the plan is to achieve change, how they will be helped to achieve change, how we will assess the impact on the child's wellbeing and the action we could take if this change is not achieved.
- If a child does not need a child protection plan, agreeing whether they need help and support and how this will be coordinated e.g. via a Child in Need Plan or early help plan.
- At the end of the meeting the chair will seek the parents' view of their experience of the conference

Our bottom lines...

- We will hold Initial Child Protection Conferences (ICPCs) within 15 working days of the strategy meeting where the decision was made to initiate a child protection enquiry.
- We will hold the first Review Child Protection Conference (RCPC) within three months of the child being made subject to child protection planning, and then at least every six months thereafter.
- Where a pre-birth assessment indicates that a baby will be at risk of suffering significant harm when it is born, we will hold an ICPC at 30 weeks gestation and an RCPC within one month of the child's birth or within three months of the date of the pre-birth conference, whichever is sooner.
- Managers will authorise social worker reports for conferences before they are shared.

- We will share social worker reports with families (including everyone with parental responsibility) and chairs at least two working days before ICPCs and at least five working days before RCPCs.
- CP Chairs will agree the date of the next conference and the date of the first core group (within 10 days of ICPC) with the people in attendance at the Initial Child Protection Conference.
- We will send a decision letter and outline child protection plan out within one working day, and the record of the conference out within 15 working days.

STANDARD SEVEN: In Liverpool managing core groups well means:

- Recognising that core group meetings can be stressful and emotive and can create significant anxiety for families for families.
- Helping parents and young people prepare for the core group by helping them understand its purpose. Proactively supporting them to be able to attend and participate and making sure they know they can bring a supporter or advocate to the meeting.
- Supporting parents/carers at the initial core group to share their views in terms of what is working well and what needs to change and have full involvement in producing the family's plan.
- Making sure the right people are members of the group – the child (if appropriate), their parents, advocates, wider family members and the professionals who are involved in supporting the family.
- Helping the family to attend by considering where the core groups will be held and any communication, accessibility and cultural needs of the family. This includes using interpreters where appropriate.
- The chair helping the family to feel comfortable and able to fully participate in developing the child protection plan in partnership with the professionals.
- Making sure at the first core group that children and their family understand the plan and what it means for them. This will help parents to understand what changes need to be made by them and when, and what help and support will be offered to them, by who and when.
- Maintaining a focus on reviewing progress of the child protection plan and the impact on the child/ young person, making amendments to the plan in line with changing needs and risks.
- The chair encouraging core group members to take a strengths-based approach. This means acknowledging family strengths and improvements made while also ensuring professional curiosity and providing authoritative challenge where the family or professionals have not progressed agreed tasks within the plan.
- Where the plan is not effective in reducing risk, or risks intensify, considering further action with the core group.

- The social worker discussing intensifying safety concerns from the core group with a manager and agreeing action to be taken. This could include increasing or adjusting the support being provided or considering legal planning.
- At each core group prior to a Review Child Protection Conference, agreeing a summary of progress against the plan and impact on the child, and a clear recommendation for the review conference about whether the child protection plan needs to continue.
- Encouraging professional members of the core group to contribute fully to supporting the child and their family and keeping them safe. Informing team managers about any professionals who are not attending and/or progressing their actions, so they can follow agreed escalation procedures.

Our bottom lines...

- We will agree arrangements for the first core group at the Initial Child Protection Conference (ICPC) and it will be held within 10 working days of the conference.
- At the first core group we will discuss the outline child protection plan agreed at ICPC and develop it into the full plan. We will agree what outcomes we wish to achieve for the child and what actions will be taken by whom, including timescales, to progress the plan and ensure the child is kept safe.
- Following from the first core group, we will hold core groups **at least** every month to review the progress of the plan, changing risks (decreasing and increasing) and impact on the child. Core groups may need to be held more often according to the individual needs and circumstances of the child, and always after a critical incident or when considering initiating removal.
- We will use an approach of 'high support: high challenge' to address any drift or delay on agreed actions.
- We will produce a clear, easy to understand record of the core group and share it with the family and professionals involved within five working days.

STANDARD EIGHT: In Liverpool good planning for children (family, child in need, child protection and care plans) means:

- Keeping children and young people at the heart of plans, including their wishes and feelings, their individual and cultural needs and their hopes for the future.
- Being aware of the potential impact of adverse childhood experiences on children, young people and adults, and planning in ways that acknowledge present behaviours and difficulties in the context of current and past trauma. This will help us to work in a relational and strength-based way and avoid us re-traumatising family members.
- For children with special educational needs and disabilities, making sure we take the impact of the child's additional needs on them, their carers and family into consideration when planning.
- Involving families fully in co-producing plans, including agreeing actions for caregivers and children as well as professionals.
- Basing plans on comprehensive, holistic assessments of children and their family's needs and including strengths as well as risks.
- Holding an initial Team Around the Family (TAF) planning meeting within 10 working days after the Early help Assessment is completed, or within a month of a family changing from being supported by children's social care to being supported by Early Help.
- Ensuring that all planning includes Family Group Conferences where appropriate in order to involve a family's wider social network of relatives, friends and community groups in developing plans.
- Making sure plans are clear, detailed and 'SMART' (including outcomes and goals which are Specific, Measurable, Attainable, Relevant and Time-bound), stating clearly what needs to be achieved, what needs to happen, who is responsible for actions and when they need to be completed. This means writing plans in plain language that everyone including children can understand.
- Making sure that if multiple recommendations are made the sequence and priority of actions is clear.

- Making sure actions in plans are achievable within a reasonable timescale, and that everyone responsible for an action understands what it is they need to do and what difference it will make to the child.
- Keeping plans proportionate and appropriate to strengths, risks and levels of need, in line with Liverpool Safeguarding Children Partnership Levels of Need Framework and findings of assessments.
- Agreeing realistic contingency plans which families can understand within family, child in need and child protection plans.
- Developing and progressing parallel plans for children in care to achieve permanence and avoid drift and delay.
- Being explicit about when children need a separate written safety plan, for example, where we are addressing non-familial risk or a specific risk and making sure the child's main plan links with and references the safety plan.
- Involving care leavers in developing their pathway plans at an early stage, based around how they want their future to be.
- Everyone involved with plans at whatever level making sure they complete their actions between meetings and reviews.
- Reviewing, evaluating and refreshing plans regularly, based on changes in family situations, progress on actions and the impact of plans on children's outcomes.
- Evidencing appropriate management oversight of plans and reviews.

Our bottom lines...

- Wherever possible children will have one plan that incorporates all aspects of their safety and wellbeing. This will usually be a Family Plan, Child in Need Plan, Child Protection Plan or Care Plan (the latter will include the Placement Plan, Health Plan and Personal Education Plan).¹
- Where children require an additional safety plan to address a specific risk or non-familial abuse, we will make sure children and families are involved with the planning and link it to their main plan.

¹ As required by the Care Planning Regulations

- We will write up plans clearly, noting any areas of disagreement, and share copies with everyone who will be contributing towards the plan in a timely way to ensure actions are completed.
- We will update a child's plan after every Family, Early Help, Child in Need, Core Group, Child Protection Review Conference, Care Planning Meeting or Review.
- We will review children's plans at frequencies commensurate with their needs/presenting risk. **Minimum** expectations are:
 - Team Around the Family (TAF) every three months
 - Children in Need every three months
 - Children with complex health needs and disabilities being supported by the disabled children's team – as agreed with team manager according to individual needs.
 - Children with Disabilities and accessing specialist packages of care, direct payments and short breaks – as agreed in the assessment and multi-agency plan, authorised by team manager
 - Core Groups every six weeks or after a critical incident
 - Care Plans within 20 working days of coming into our care, three months after that and then every six months

STANDARD NINE: In Liverpool good support for Children in Need means:

- Basing the help and support we provide to children and their families on good quality holistic assessments.
- Working with children and their families to find their own solutions and make positive changes, either on their own or with help from us or others. This includes making sure parents and carers are supported to contribute fully at child in need meetings
- Coordinating timely and effective help and support services to the family to build on their strengths and make the changes identified within the assessment.
- Co-producing the written Child in Need Plan with the family at the first child in need meeting and reviewing and updating it at each subsequent meeting.
- Making sure the written Child in Need Plan is SMART, easy to understand and clear about what actions to be taken by who.
- Making sure the Plan is clear about how we will know when things are improving for the child and next steps.
- Making sure that the Plan is clear about what will happen if things do not improve for the child.
- Regularly reviewing progress and impact of the plan – ask ourselves are we making a positive difference for the child and if not what else should we be doing?
- Recognising when progress has been made and is sustainable and ending our intervention ‘well’ i.e. agreeing with the family and partner agencies what level of support and from who, needs to continue.
- Using the final child in need review meeting to develop the ongoing support plan so that everyone is clear who will be doing what.
- Arranging meetings at a time that is convenient for the family and considering any communication needs. Holding meetings in an environment that is accessible to the family and the child, and where they feel comfortable. This could be, for example, the family home, school or a children’s centre.

- Ensuring that we understand the role of fathers and male partners in the household and making sure that new partners or household members are properly assessed.
- Making sure that parents/carers know they can bring a relative, friend or advocate to meetings to support them and help them express their views, ideas, wishes and feelings.

Our bottom lines...

- If we assess that a child needs a package of support as a Child in Need, we will hold a meeting within 10 days to co-produce a plan with the family and their support network.
- We will visit children who are being supported by a Child in Need Plan according to their needs and at a frequency agreed by team managers. This will be at least every 20 working days, or as directed by the team manager.
- We will see children alone at each visit and use a variety of direct working tools to gain their wishes and feelings, get to know more about them and what life is like for them and assess whether the Child in Need Plan is helping to improve outcomes for them. This may not be appropriate for very young children or some children with disabilities. In these circumstances we will use creative ways of understanding their lives including will observing the interaction between them and their parents.
- If support to a child or young person changes from Child Protection to Child in Need planning, the Child Protection Conference Chair will ensure that an outline Child in Need Plan is agreed, including which professionals will be supporting the family and what their roles and responsibilities are. They will agree a first Child in Need meeting within 10 days of the conference.
- We will record clear notes from meetings and updated plans on the child's record, and make sure that everyone involved in the Child in Need meeting receives a copy of them within 10 working days, translated for parents/ young people if needed.
- We will review the plan at frequencies in line with assessed need/presenting risk. The **minimum** frequency will be within three months of the plan starting, and continue on a three-monthly basis, depending on the complexity of needs and progress against the actions and outcomes.

- For children with complex health needs and disabilities being supported by the disabled children's team we will review plans as agreed with team manager according to the child's individual needs
- Children with Disabilities and accessing specialist packages of care, direct payments and short breaks we will review plans as agreed in the multi-agency plan and authorised by team manager
- If satisfactory progress is not being made, and there is reasonable cause to suspect the child is at risk of significant harm, we will discuss with our team manager whether a strategy discussion should be arranged.
- Team managers will discuss the progress of Child in Need Plans with social workers at frequencies in line with the supervision policy.
- If while supporting one child in a family we become aware of another child in the wider family who would benefit from a separate assessment of needs, we will make a referral to Careline. This will help to make sure their needs are assessed and they are offered the right help.
- When a family is moving to live in a different area, we will obtain consent from parents and notify the local authority for the area the family are moving to and share appropriate information either before they move or within five working days of them moving. This will help make sure they continue to receive support.
- We will continue to support the family in their new home until the authority the family has moved to hold a CiN meeting and confirms its decision on case management. This is in line with the North West ADCS *Children in Need Moving Across Local Authority Boundaries Procedure*.

STANDARD TEN: In Liverpool moving children from home into our care well means:

- Exploring all potential alternatives to children and young people coming into care, including friends and family who could look after them safely, at a Family Group Conference or family meeting.
- Making sure decisions about providing children with alternative care, and how we look after them, are based on comprehensive assessments of strengths, needs and risks, involving the other professionals working with their families.
- Being aware of the impact of adverse childhood experiences on children, young people and adults, and intervening in ways that acknowledge present behaviours in this context. This will help us to work in a relational and strength-based way when bringing children and young people into care, so the experience for them and their parents is as least traumatic as possible.
- Making sure parents and children are supported to understand the reasons for alternative care and what the next steps will be and are given copies of all paperwork. (This includes using interpreters and advocates where needed)
- Recognising that coming into care can be a stressful and frightening time for children and young people and ensuring that they are emotionally supported by familiar adults where possible. This includes making sure the child's social worker or someone they know well takes them to their alternative home.
- Considering in assessments whether it is in the child's best interest to live with their brothers and sisters, and if so keeping them together whenever possible.
- If brothers and sisters are living apart, making sure they have regular family time where this has been assessed as being in their best interests.
- Discussing the child's needs in relation to race, ethnicity, language, disability, communication, gender, sexuality, identity and culture and considering them within the assessment, care plan and alternative home.
- Considering any contextual safeguarding issues, and if there are concerns around child sexual exploitation or criminal exploitation, completing a risk assessment and linking in with the right support.

Our bottom lines...

- We will place children with their family or friends wherever possible, and always make sure they know where they are going and why
- When children have to move from home into our care, we will make sure their belongings are packed carefully and appropriately and will **never** use bin liners.
- Where children are going to stay with family or friends, we will complete appropriate checks and assessments (e.g. Reg 24 viability assessment) to make sure they will be safe and well looked after. Following this, we will complete the full 'family and friends foster carers assessment' within 16 weeks of the child moving to live with their connected carers.
- If the child is accommodated under S20 of the Children Act 1989, we will obtain written consent from the parent/s who has/have parental responsibility and make sure they have sufficient capacity and information to make an informed decision.
- Wherever possible, we will arrange a Care Planning Meeting before a child comes into our care. Otherwise, we will meet within 10 days and again before the first review.
- We will arrange a Placement Planning Meeting before the child/ young person comes into our care to agree how their needs will be met. If this is not possible because of the urgency of the situation we will hold one within 72 hours of them moving in.
- We will complete a Placement Plan and a Care Plan before the child comes into our care. If this is not possible, we will complete a Placement Plan within five working days and a Care Plan within 10 working days of them moving in.
- We will give carers all the information they need to care for children as soon as they go to stay with them (including family history, medical needs, risks, vulnerabilities, likes and dislikes, strengths and protective factors)
- The child's allocated worker will visit within three working days of them coming into our care, or any changes in where they live. After that they will visit them every week until their first Child in Care Review.

STANDARD ELEVEN: In Liverpool good support for children in our care means:

- Doing our best to provide the same standards of care for the children in our care as we would do for our own children
- Acknowledging that the children who we care for may have experienced significant adversity, attachment disruption and/ or developmental trauma and this may result in additional support needs. Where a multi-disciplinary or multi-agency response is needed, working with partner organisations to make sure their needs are appropriately met.
- Advocating for our children, making sure that they are getting the right individual support, at home, at school, with their health, and in all areas of their life. This includes challenging any discrimination or stigma they might feel as children in care.
- Getting to know children and talking with them about their wishes and feelings, taking their views into account when making plans or decisions that affect their lives.
- Helping children to understand why they have come into our care and doing our best to answer any questions or concerns they tell us about.
- Supporting the child's cultural and religious identity and making sure they have access to culturally appropriate food, activities and education.
- Where appropriate and in the best interests of children, encouraging parents to stay involved in their lives, and where possible supporting them to make changes to enable their children to return to live safely at home.
- Knowing who is important to individual children and helping them to sustain their relationship by arranging friends and family time with them where appropriate.
- Helping children to achieve stability and permanence in a timely way, whether that is returning home to their families or living with kinship carers, adoptive families, long-term matched foster carers or in residential care.
- If children have to move out of their alternative home, making sure that the experience is as positive as possible. This includes us recording a summary of their time there based on their lived experience. This will help ensure that

learning is used to inform future planning for them, and that they have a record of their story while living in that home.

- Supporting carers to provide children with a safe, supportive and nurturing relationship and environment where they have stability and belonging and can feel like part of a family.
- Helping children to understand and process their history and care experiences by regularly completing 'life work' with them and ensuring they have access to personal possessions, information, photos, memorabilia and other reminders of their family where appropriate.
- Helping children to identify and build on their strengths, and celebrating and recording their achievements, to let them know we are proud of them and why.
- Being aware of children's changing needs through regular and good quality assessments, providing them with additional support if needed. This could be support with emotional health and well-being, developmental needs, physical health, education, leisure activities, keeping safe or building support networks.
- Making sure we use the recommendations from specialist assessments (e.g. psychological assessments, parenting assessments) into account when making plans for children.
- Visiting children as often as they need us to, or when their carer thinks a visit would be purposeful for them.
- Helping children live as 'normal' a life as possible, with carers and parents having appropriate authority to make decisions about their day to day lives.
- Making sure children know about their rights and entitlements, advocacy and participation opportunities, and about how they can complain if they are not happy with the way they are being cared for. This includes helping them to understand why we sometimes make decisions in their best interests which they may not agree with.
- Being honest with children if we make mistakes with our decision making or care planning for them, looking at where we went wrong, learning from this, and most importantly, putting things right for them as quickly as possible.

Our bottom lines...

- Every child who is cared for by us will have an Independent Reviewing Officer (IRO) and an allocated social worker.
- We will give the children who we work with our contact details so that they know how to get in touch if they need to. This will include their social worker and IRO's mobile numbers, the duty number, the customer service number and email address.
- We will give children a 'coming into care pack,' including information and contact details for advocacy, no later than the first visit which is within three days of coming into our care. We will go through the pack with them to make sure they understand the information.
- We will let the other professionals involved with the child know they are being cared for by us within five days, so they can provide them with the right help and support.
- We will arrange for children to have health assessments before we begin caring for them, or if this is not possible this will be done within 20 days. After that, we will arrange six-monthly health assessments for children under five and annual assessments for those who are five and over. We will discuss health assessments with young people, encourage them to participate, respect their wishes if they choose not to and find alternative ways of providing them with health information and support.
- When children have to move home, we will make sure their belongings are packed carefully and appropriately and will **never** use bin liners.
- If a child has to move home unexpectedly, we will arrange a Review to make sure the new plan and living arrangements will meet their needs and a disruption meeting to understand the reasons for them having to move home.
- We will visit children in their alternative home within three days of them moving in, and weekly until their first CiC Review. After that we will visit at least every six weeks until the home is agreed as the child's long-term alternative home, then visits will be at least every three months.
- If a child is settled in their long-term home for at least a year and wants to have less contact with their social worker, we will discuss this at their Review and consider reducing visits to every six months.

- If the social worker who is supporting a child is changing, we will say goodbye properly and write a card or letter for them to keep in their memory box. We will introduce their new worker to them, visiting together whenever possible.
- We will complete life story work with every child who we care for, based on their individual situations. Life story work should celebrate their successes, include positives about them and help them to build memories

STANDARD TWELVE: In Liverpool managing good Child in Care Reviews means:

- Acknowledging that Review meetings with lots of professionals involved can be anxiety-provoking for some children, young people and families, and taking proactive steps to make sure they are well supported (e.g. keeping Reviews small, and encouraging children to say who they want to be there).
- Being aware of the impact of adverse childhood experiences on children, young people and adults, and managing any present behaviours and difficulties in the meeting in this context. This will help us to encourage discussions that are relational and strength-based way and help ensure meetings are as positive as possible for children and their parents and alternative carers.
- Speaking with the child before their Review to help them understand what the meeting is about and agreeing with them where the meeting should be held and at what time, who they want to be invited and what they want to be discussed. Making sure they know they can be accompanied by a relative, close friend or advocate help them to take part.
- The child's IRO visiting them in advance of the review to ensure they are involved in planning it.
- Encouraging the child to take part in their Review meeting either directly, or by other means (e.g. facetime, written submission etc).
- Sharing the social worker's report with the child before the meeting.
- Speaking and consulting with the child's parents before the meeting and sharing the social worker's report with them.
- Ensuring the right people are there, in line with the child's wishes and feelings – the child, their social worker, parents, the person who looks after them and other professionals who work with them.
- Making sure the child is kept at the centre of discussions during the meeting.
- Making sure the child's parent(s) and carers are helped to take part in the meeting and their views considered when agreeing plans.
- Making sure that all relevant areas are discussed in the review – e.g. the child's lived experience, health (social, emotional, physical and

developmental), school, interests and activities, identity needs, family time, pocket money, long term plans and whether an independent visitor would be helpful for them.

- Agreeing clear actions at the meeting, focused on the needs, wishes and feelings of the child, when they will be completed and who by. This will help to make sure that there is no drift or delay in progressing their Care Plans.

Our bottom lines...

- We will hold a Review within 20 working days of starting to care for a child. Then we will hold the next review within three months, and after that every six months. Reviews may be held as a series of meetings where appropriate.
- If a child has to move home unexpectedly, we will arrange a Review to make sure the new plan and living arrangements will meet their needs.
- The child's Independent Reviewing Officer (IRO) will bring forward Reviews if there are any significant events affecting them, or if there is a need to change the plan for how they will be cared for.
- We will discuss the plan for permanence for the child at their second Review and all subsequent Reviews, to help avoid drift and delay and ensure they are able to settle into a permanent home in a timely way.
- The child's social worker will share and discuss their report with them and their parents at least five days before the Review.
- The child's IRO will speak to them alone before every Review.
- We will make sure the child's wishes and feelings are kept at the centre of Reviews, whether they are able to attend or whether they contribute in a different way.
- The child's IRO will send the social worker's team manager recommendations and decisions made at the Review within five days and complete the record of the Review within 15 days.
- The child's social worker will update the plan for their care within 10 days of receiving the recommendations and decisions made at the Review from the IRO.

- The child/ young person's IRO will keep track of actions agreed at the Review to make sure they are completed on time and will take action if there is any delay.

STANDARD THIRTEEN: In Liverpool supporting our care leavers well means:

- Helping to prepare our young people properly for when they leave care, such as being ready emotionally and having the practical skills needed for living more independently.
- Helping care experienced young people to achieve independence at a pace which is right for them, and being there for them when they need us.
- Building good working relationships with care experienced young people, understanding their lived experience and having conversations with them which are strength-based and solution-focused.
- Working with young people to assess their needs and help them identify what they want for their future, including their strengths, vulnerabilities and hopes.
- Based on the assessment, working together with young people to co-produce their pathway plan, which sets out their goals and how we will help them to meet them.
- Making sure pathway plans address all the important things like identity, relationships, education, employment, where they will live, legal issues, physical and emotional health, money and life skills.
- For our care experienced young people who will need support from adult services, contacting the adult social care team when they are 17 years old to help good joint decision making and a smooth transition.
- Making sure that pathway plans for Unaccompanied Asylum-Seeking Children (UASC) address any additional needs arising from their immigration issues.
- Doing as much as we can to keep in contact with our care experienced young people until they are 25, even if they decide they do not want to stay in touch with us. This will help maintain a route back for them if they need our support in the future.
- Regularly promoting our local offer for care leavers and self-referral process and offering creative and flexible support to young people who opt out of staying involved with us.
- Respecting care experienced young people's heritage and identity and using appropriate and sensitive methods of communication with them.

- Helping care experienced young people to stay on with their foster carers in 'Staying Put' arrangements whenever possible, discussing this at Reviews as they are approaching 16
- Celebrating with young people their achievements and significant milestones, letting them know we are proud of them and why.
- Supporting care experienced young people in custody through their period of detention, planning for their release and post-release and ensuring good support and a smooth transition.
- Supporting our care leavers who are not in employment, education or training to find the right opportunities for them.
- Supporting our care leavers to find and live in a home which is right for them, whether that is staying put with their foster carer, supported/semi-independent accommodation, independent accommodation or specialist adult accommodation.
- Supporting care leavers who are parents where we are involved with their child. This means advocating for them, helping them to understand the process, helping them to build on their strengths as a parent, challenging them if necessary, and working closely with the social worker for their child, advising them on the best way to engage with them.
- Writing records in a clear way that young people can understand, and supporting them to access their records if they wish to do so.
- Making sure that recordings tell young people's stories, evidence reasons for decision-making and show we care about them.
- Making sure they can access and make use of the local offer
- Creating life long links so that they have support throughout adulthood
- Allocating a PA prior to young people's 17th Birthday (from May 2024) (16th birthday from September 2024)

Our bottom lines...

- We will actively involve and co-produce with young people in all aspects of their pathway planning, and will get their explicit consent before we share information about them with other professionals or agencies.

- Colleagues from Permanence and Leaving Care teams will work jointly from young people's 16th birthday to provide a smooth transition of support for them, with a joint handover visit by both social workers to support the transition plan and ensure the young person is included in the planning.
- We will make sure care experienced young people have personal advisers (PAs) at a time that is right for them, usually by the time they are 17.5 years old, and until they are 25, if they want this support.
- We will begin pathway needs assessments with care experienced young people at a time that is right for them, usually when they are 15.5 years old, and complete their pathway plan.
- We will co-produce a pathway plan with young people within three months of them reaching 16
- We will review the young person's pathway plan every six months until they are 21, more often if there are any significant changes.
- The young person's social worker or PA will visit them at least every two months, depending on their needs, wishes and feelings. Whenever the young person moves home, we will visit them at their new home within seven days.
- All young people will be discussed in supervision in the two months prior to them reaching 21 and a decision made and recorded regarding continuing involvement with them. They will be encouraged to stay involved with the service and informed that if involvement ends at their request, they can return at any time should they need advice, guidance or support.