# **Case Transfer Protocol**

#### SCOPE OF THIS PROTOCOL

The aim of the protocol is to outline the process for the transfer of cases between the various service areas within Children Social Care and Early Help Services and to enable them to work together effectively and efficiently.

The guiding principle of all transfer decisions must be to ensure that children are safeguarded and that services to support and safeguard children are provided in a coherent and child-focussed manner.

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## 1. Introduction

The Children's Social Care (CSC) exist to safeguard and support children in need of protection and children designated as '<u>Children In Need</u>'. Through this continuum, all services aim to improve outcomes for children, young people and their families.

The guiding principle of all transfer decisions must be to ensure that children are safeguarded and that services to support and safeguard children are provided in a coherent and child-focussed manner. This protocol provides guidance on how that is most likely to be achieved, taking into account the remit of services and the statutory framework. However, the complex nature of the needs of individual children may mean specific decisions have to be made on a case by case basis.

# 2. Key Principles

**Needs Led** - There can be no delay in providing a service because there is uncertainty or disagreement about which service should take responsibility for a case; any disagreement must be resolved within one working week. It should be clear at all points of the transfer process who is responsible for the case.

No Delay - Inability of the incoming team to allocate is not a valid reason not to accept a case.

**Reasonableness** - The transfer protocol may not fit all circumstances, and therefore flexibility is needed according to what is best for the child (ren) and their family and the management of the case. Case transfer should only happen when the focus of the work moves from the remit of one service to another. However, no decisions can be unilateral; both sides of the transfer process must be actively involved in that decision. Direct discussion between managers to agree an appropriate way forward is good practice.

**Departmental Perspective** - All managers have a shared responsibility for the work of the department as a whole and the way work flows through between services.

Communication - Both the family and other professionals in the network must be informed about the transfer.

# 3. Roles and Responsibilities

Social workers are responsible for ensuring cases for transfer are written up and prepared in the required manner and informing other professionals and service users of the planned transfer.

Team Managers are responsible for sending and receiving case files for transfer. On receipt of transfer they are responsible for ensuring allocation to a social worker and that the work is carried out as required.

A transfer summary or assessment is sent on notice of a request to transfer a case. It is proposed that the 'case transfer episode in Micare will be the formal mechanism for transferring cases. Any papers held in a hard copy file will be sent at the time of the actual transfer. Until the acceptance of the case transfer on Micare by the receiving manager, the case remains the responsibility of the 'transferring out' team.

It is expected that as much documentation as possible as laid out in point 5 of this document should be completed prior to transfer. Any significant failures to do so should be reported to the relevant Locality/Service Manager. Responsibility to complete the documentation remains with the 'transferring out' social worker. However missing documentation will not be used as a reason to prevent transfer within children's social care. Any missing documentation must be sent as soon as located, or the receiving team informed of the reason why such documentation is not available. In all cases a timescale for the completion of documents must be given and adhered to at point of transfer.

Any problems encountered in the transfer process should be reported to the relevant Locality/Service Manager.

Case responsibility remains with transferring out team until Transfer Episode is accepted by receiving team which should usually be within one working day of 'sending' the case on Micare.

# 4. Arrangements for Transfer

#### 4.1. Governance

Responsibility for the movement of cases between Service areas rests with the Locality/Service Manager, for each of the service areas. Any disputes regarding transfer will be resolved at Head of Service/Locality level. Failure to resolve dispute at this level, will be escalated to the Strategic Head of Service, who will make the final decision. Case files must be quality assured by transferring team managers before notification to transfer.

#### 4.2. The Process

- All notifications of cases for transfer should be sent to the receiving Team Manager/ their team business support inbox by 4PM on a Tuesday.
- The point at which notification of transfer is received by the receiving team manager, to the agreed
  case transfer process (with clear timeline) shall NOT EXCEED 5 working days. FOR CLARITY, by
  the following Wednesday a clear plan and date for transfer should be agreed between managers.
- It is expected that most cases will be transferred within 15 working days of notification.
- At the point of the agreed case being accepted for transfer the receiving manager will allocate to a worker. There must not be any unallocated cases in this process.
- Any statutory visits that are due at the point of transfer it is the responsibility of the team transferring to complete this visit and invite the receiving team to join this as best practice where possible.

## 4.3 Special Circumstances on cases

- Cases transfer on the principle that there should only be one social worker allocated to the sibling
  group who are resident in the same household unless input from more than one service has been
  agreed as being in the best interest of the children concerned by the respective Heads of Service;
- Heads of Service/Locality will designate which service will hold primary case responsibility for a
  case where there are sibling groups with different presenting needs. This may necessitate
  discussions outside of the transfer process.

# 5. Eligibility of Cases for Transfers

## 5.0 Early Help - Step Up & Step Down

#### 5.0.1 Stepping Down

The **MASH**, **including the Contact Centre** will pass across to the Early Help hubs in a timely manner child or families were it has been identified that they would benefit from a provision of early help services. All children and families passed from the MASH, including contact centre should have Social Work oversight, consent for family and include analysis of emerging problems and what needs to happen.

An outcome from a **Child and Family Assessment or Child in Need planning** can be to step down to Early Help. Cases identified as being stepped down to Early Help should be referred into the Early Help hub using a Children & Family Referral form.

Good practice standard will be that the final Child and Family Assessment visit or multi-agency meeting is carried out with the Early Help worker or the Early Help Practitioner. In regards to children and families who have been open as Child in Need, Early Help must always attend the final Child in Need Meeting.

#### 5.0.2 Step up to Social Work

Children and families stepped up following the **Early Help triage process** should be sent direct to the locality Social Work team from an Early Help Social Worker. The child or family would have been assessed within Early Help and often will include a multi-agency response and Social Work oversight the decision should be accepted by the locality Social Work team. It is important that we trust one another assessments in order to provide a timely response to children and families within Manchester.

Children and families stepped back up from **Early Help Interventions** as a general guidance should have a consultation with the Early Help Social Worker and it would be good practice for workers to start mapping the signs of safety / something in identifying existing strengths, danger / risk and what needs to happen. This discussion should be recorded on a casenote by the Early Help Social Worker. Children and families being stepped up to Social Work will be completed by the Early Help worker completing a MSCB Multi-agency referral form and sending the referral into the MASH.

# 5.1.0 Transfers and Step Down from the MASH AWAITING INFORMATION

## 5.1.1Transfers from Duty & Assessment

# 5.1.2 CIN Cases

- <u>Child in Need</u> cases will be transferred following a decision that it is unlikely that their needs will be met in less than 45 working days or through referral to another agency;
- The point of transfer is at the CIN meeting following the completion of the Detailed Assessment;
- The CIN meeting should take place within 10 days of the completion of the Detailed Assessment;
- Duty and Assessment provides the **Child in Need Plan**;
- Notification should be made of transfer at the completion of the Detailed Assessment or earlier;
- CIN Cases will transfer to Locality Teams.

#### 5.1.3 Child Protection Cases

- Children who are the subject of <u>Child Protection</u> procedures where the child has been made subject to a <u>Child Protection Plan</u> will transfer from Duty & Assessment to Locality at the <u>Initial</u> <u>Child Protection Conference</u>;
- Both Services must attend the first Child Protection Conference;
- Duty & Assessment complete a Detailed Assessment-Initial Child Protection Conference report;
- Children who are not subject to a Child Protection (CP) Plan after the initial Child Protection
   Conference will transfer to Locality Teams at the first Child in Need Meeting a Child in Need Plan,
   having been completed;
- Notification should be made of transfer at the point when a case conference date is confirmed.

#### 5.1.4 Transfer in Child Protection Conferences

- Transfer in <u>Child Protection Conferences</u> will be dealt with by the Duty & Assessment Team. The
  Transfer in Conference will be recorded as a referral and the Conference held within 15 working
  days from the date of notification that a child/children subject of a Child Protection Plan is
  moving/has moved into the Manchester City Council. The transfer in conference will be convened in
  line with Manchester City Council Child Protection Procedures;
- The transfer in Conference may recommend that although case responsibility is transferred to
  Manchester City Council, joint work with professionals form agencies in the originating authority
  continues for a time limited period. Where this occurs, the originating authority must comply with
  terms of the revised Child Protection Plan;
- Families should be made aware that information will be shared with services in Manchester City Council;
- When a planned transfer of responsibility for a case is being arranged, a social worker for the
  originating authority, with knowledge of the case must be invited to attend the transfer in conference
  along with any other significant contributors to the Child Protection Plan.

## 5.1.5 Children Looked After Cases

- Children who are <u>Accommodated</u> will be transferred to the Family Support and Child Protection
  Teams at the first <u>Looked After Review</u>, if there is a plan for reunification with parents/carers, all
  appropriate documentation and Looked After <u>Care Plan</u> having been completed. Where there is a
  clear indication and agreement for a permanency plan for long term care, the case will transfer to
  the Children Looked After (PERMANENCE) Service:
- Children who are subject to court proceedings will be transferred after the first review and within the
  first 7 days of a court hearing or first hearing following any emergency action i.e. <u>Police</u>
  <u>Protection</u> or <u>EPO</u>, where the first review has already taken place;
- Babies who are relinquished babies for adoption will be transferred to the Permanence Service.

NB: Given the complexity of children looked after early notification is paramount. Particularly around cases that are entering proceedings it will be essential to involve the appropriate team at an early stage of the legal process to ensure that both services are in agreement with the proposed protection and Care Plan. Minutes of legal planning meetings must be sent to the appropriate Locality/Service Manager.

 Children Looked After will be transferred to in the Locality Teams to explore rehabilitation, with parents/carers or connected persons.

#### 5.1.6 No Recourse to Public Funds

These cases should be viewed in the same way as CIN and CP as stated above.

#### 5.1.6 Private Fostering Cases

• **Private Fostering** cases should transfer upon completion of a Detailed Assessment and when the case has been agreed as appropriate will remain within the Locality Teams.

## 5.1.7 Unaccompanied Asylum Seekers (Minors)

• These cases will be transferred to the Permanence Teams following completion of a Detailed Assessment and First LAC Review having been completed.

#### 5.1.8 Homeless 16-17 Years

- These cases will be transferred to Locality Team following Detailed Assessment as a Child in Need:
- These cases will be transferred to the Permanence Teams following Detailed Assessment as requiring accommodation section 20 and First LAC Review having been completed.

## 5.1.1 Out of Borough

- Cases where another borough has completed an assessment will on receipt of the assessment be passed to the LOCALITY service. This includes children subject to CIN plan;
- Cases that transfer in from other Local authority such as transfer in Case Conference;
- <u>Supervision Order</u> renewal application, and <u>Family Assistance Orders</u> will go directly to Locality.

## **5.2 Transfers from Locality Teams**

#### **5.2.1 CIN Case**

These do not transfer out once with Locality Teams but can be stepped down to Early Help Hubs.
 Should cases re-refer within 3 months of closure Locality will resume case responsibility for the family/ young person.

#### 5.2.2 Child Protection Cases

• These cases do not transfer out of Locality Teams. Should the case re-refer after completing the Child Protection Plan / closure within three months then Locality will resume case responsibility.

## 5.2.3 Children Looked After

- Children who become Looked After whilst in Locality will transfer to the Permanence Teams, when a plan for **Permanence** has been agreed and ratified by the court and or **IRO** at a LAC review;
- Where a Placement Order has been granted, cases will remain with Locality Teams to the point of Adoption;
- Where a Special Guardianship Order is granted cases will transfer to the Permanence teams.

Given the complexity of Children Looked After, early notification is paramount. Particularly around cases that are entering proceedings it will be essential to involve Locality/Permanence teams at an early stage of the legal process to ensure that both services are in agreement with the proposed Care Plan. Minutes of legal planning meetings must be sent to the Head of Service/Locality for Locality/Permanence.

#### 5.3 Transfers from Permanence Teams

# 5.3.1 CIN/CP cases

- These are cases where Children Looked After have returned home:
- Support should be offered for up to 3 months by Permanence after return home;
- After this 3 month period the case should be prepared for transfer to Locality, providing that the placement is stable and the plan is for the young person to remain within their family/wider family;
- If this is the case, then the point of transfer is at the CIN meeting following the completion of a Detailed Assessment:
- The CIN meeting should take place within 10 days of the completion of the Detailed Assessment;
- Notification should be made of transfer at the completion of the Detailed Assessment or earlier.

**NB**: Children Looked After will only transfer out of Permanence when they have been home for a period of 3 months.

(See also <u>The Children Act 1989 Guidance and Regulations - Volume 2: Care Planning, Placement and Case Review (2015)</u>).

#### 5.3.2 Child Protection Cases

If there are Child Protection issues on a Child Looked After, these will be dealt with by Permanence
Teams to include children returning home and being supported by Permanence in the following 3
months.

## 5.3.3 Completion of Proceedings

 Where a child is placed within their extended family but not on a Care Order, s/he will transfer to the Locality. This includes cases where the court has made a Supervision Order as an outcome to care proceedings.

## 5.3.4 Leaving Care Cases

- Upon reaching 15 ½ Children Looked After will be referred to the Leaving Care Team (LCT) so that
  a Personal Advisor can be identified to become involved when the young person reaches 16, when
  the Social Worker and Personal Advisor will have a dual role the Social Worker for completing the
  initial pathway plan and the statutory Looked After Child processes;
- The Leaving Care Team Personal Advisor will attend the LAC review prior to the YP's turning 16;
- The LC personal advisor will begin to work with the young person once they reach 16 to progress the pathway plan as set out by the social worker.

#### 5.3.5 Other Case Scenarios

In the event of new child born to a family held in Permanence Team in which sibling children have been previously removed:

- If there are court proceedings on siblings in progress, the family Permanence social worker is responsible for the new child;
- If sibling children have been removed within past 12 months / 1 year or Care Proceedings have concluded within the last 12 months / 1 year, the Permanence social worker is responsible for the new child;
- If the sibling child is born over 1 year after the removal or conclusion of Care Proceedings for his/her siblings, the Duty & Assessment Teams complete the new assessments.

 If a Looked After Child in the Permanence Teams becomes a parent, the pre-birth assessment will be completed by the Duty & Assessment teams and will follow the CIN CP transfer process as above.

## 5.4 Transfers to Children with Disabilities

## Need to review not sure what MCC arrangements are

#### 5.4.1 Case Remit

- The Children with Disabilities (CWD) Team currently work with children who have severe or profound disabilities within the terms of 'I Count' Disabilities register;
- If it is clear on the referral that the child suffers from significant and enduring disability, transfer should take place within one working day's notice. The Brief Assessment will be carried out by the Disabilities Service:
- If the level of disability is not clear from the referral and threshold is met for a statutory response

  Duty & Assessment Teams will undertake a Brief Assessment to ascertain this and then request a

  transfer;
- Any proposed transfer should be discussed between the current Team Manager and the CWD
  Team Manager in order to confirm that these criteria are met. It is important that there is clear
  evidence of the nature and extent of the disability;
- Detailed Assessment and all relevant CP / LAC documentation are required as appropriate;
- Where transfer is agreed in between Team Managers, the transfer process at <u>Section 4.2, The</u>
   Process must be followed.

## 6. Requirements for Transfers

## 6.1 Key Principles

- It is the responsibility of the Transferring out Team Manager and receiving Team Manager to arrange the details of the transfer. As a minimum this should include a handover meeting and visit and notification to interested parties. This should be considered 'good practice' as a primary factor so that children and their families and involved agencies are fully informed of the process;
- If the case does not transfer on the agreed date, it is the responsibility of the transferring out team manager to negotiate a new date with the receiving team manager for the transfer of the case;
- Cases should not transfer on a Friday, unless handover arrangements and meetings have already taken place and the receiving Team Manager is accepting of these arrangements;
- When a transfer date is not kept the case should not transfer if there is a review / court date within
  one week of the proposed new date;
- The statutory visit for the child must occur within the statutory timescales and is the responsibility of the transferring in social worker to complete prior to transferring over. If the date for transfer is delayed then the transferring in social worker retains responsibility for this task until the child is transferred over.

# 6.2 Generic Requirements, all services

Required documentation as appropriate to the service area:

- Transfer Summary;
- Front Sheet and case notes up-to-date;

• Full case **Chronology**.

**NB**: for D&A to LOCALITY transfers the Initial/Detailed Assessment will cover much of the Transfer Summary so that information should not be repeated – the Transfer summary will be a case synopsis, and highlight outstanding tasks, important dates, financial commitments, etc.

# **6.3 Specific Requirements**

## 6.3.1 D & A to LOCALITY

#### **CIN Cases**

- Brief Assessment;
- Detailed Assessment;
- CIN Plan.

#### **Child Protection Cases**

- · Brief Assessment;
- Strategy Meeting/discussion;
- Section 47;
- Detailed Assessment;
- Conference Report;
- Child Protection Plan;
- PLO / LPM Minutes (where appropriate).

#### 6.3.2 D & A / LOCALITY to PERMANENCE

#### **LAC Documents**

- · Review papers;
- Contact Plan;
- Placement and Information Record;
- Care Plan;
- Statutory Medical;
- Detailed Assessment;
- Risk Assessment (where appropriate);
- PLO / LPM Minutes (where appropriate);
- · Court Documents (where appropriate);
- · Copies of any addresses on file.
- Date of last stat visit

## 6.3.3 D & A / LOCALITY / PERMANENCE to LEAVING CARE

#### **LAC Documents**

- Review papers;
- Contact Plan;
- Placement and Information Record;
- Care Plan;
- Statutory Medical;
- Detailed Assessment;

- Risk Assessment (where appropriate);
- Court Documents (where appropriate);
- Pathway Plan.

## **6.3.4 PERMANENCE to LOCALITY**

#### **CIN Cases**

- Brief Assessment;
- Detailed Assessment;
- CIN Plan.

## **Child Protection Cases**

- Brief Assessment;
- Strategy Meeting/discussion;
- Section 47;
- Detailed Assessment;
- Conference Report;
- Child Protection Plan.

#### **All Cases**

- Copies of supervision on file;
- Updated Chronology.

# 7. Requirements for Staff

# 7.1 Transferring out Social Worker

- Adhere to this protocol with regards to case status, record-keeping, circumstances for transfer and time frame requirements;
- Discuss the transfer plan with the child and/or parent/carer as appropriate wherever possible and confirm the changes in writing;
- Complete visitation and contact requirements;
- Ensure that a face-to-face meeting with the child has taken place in the last 2 weeks (child on CP cases) or last month (Looked After Children);
- Complete and update all paperwork;
- If the transfer summary was sent in advance, subsequent significant events are to be recorded;
- Discuss the transfer process with the team manager and verify that all work in advance of transfer has been completed;
- Ensure that key partners are aware of the transfer and have the name of the receiving social worker and team manager where known, that is: Fostering, Legal section, Residential Units, Family Centres, Independent Reviewing Officer's, Health Personnel, etc
- Ensure that Micare data is accurate;
- Must participate in a verbal handover to the receiving Social Worker and Team Manager.

## 7.2 Transferring out Team Manager

 A Transfer Summary on all cases to be forwarded to the receiving Team Manager by Tuesday 4pm following receipt of the completed (the list identifying the team the case transferring to) transfer list;

- Review the case files to ensure they are complete;
- Ensure that all required documents are complete and on Micare;
- Agree with the receiving Team Manager a date on which case responsibility will be transferred and ensure that all hard-copy files are delivered by that date;
- If documents/reports are identified as 'missing' by the receiving team, to ensure that they are made available and agree a timescale by which they will be completed;
- Set the case to Awaiting Allocation on Micare and change the Team specified on the referral to the team (TBC).

N.B: Team changes should only be made on Framework-i following verbal agreement with the receiving Team Manager and when the paper files have been received;

Notify Locality/Service Manager if any dispute on case responsibility, or other hold-up.

# 7.3 Receiving Social Worker

- Be familiar with the outline of the case as in the transfer summary to formulate issues for handover and supervision;
- Prioritise time for verbal handover from the transferring out team;
- Review the case immediately for key diary dates;
- Write an introductory letter to the parents/child;
- Have face-to-face contacts with the child and parents/carers within 5 working days of receiving case;
- Contact identified key partners within 10 working days of receiving case.

## 7.4 Receiving Team Manager

- Be familiar with the outline of the case as shown in the transfer summary and Chronology when considering allocation;
- Allocate according to priorities within awaiting allocation list in conjunction (as appropriate) with Head of Service/Locality;
- Identify any urgent problems, special concerns or required actions from the written/verbal handover;
- Allocate the case to worker on Framework-i, update the file location and check the team specified on the referral is correct;
- This task is completed within one working day of receiving case on Micare;
- Notify Head of Service/Locality if any disagreement about case responsibility, hold-up in transfer or other difficulty.

# 7.5 Locality/Service Manager/Heads of Service

- Ensure satisfactory functioning of transfer procedures and make changes if required;
- Monitor the overall distribution of cases within Children's Social Care;
- Discuss with other senior management in the event of any disagreement on which service a case belongs to.

## 8. Micare Case Transfer Workflow

Case Transfer Workflow - AWAITING INFORMATION

# 9. Dispute Resolution

In event of a disagreement regarding a case transfer, the following will apply, according to the table below:

	Issue	To be resolved by
1.	Straightforward cases that fit the protocol.	Team Manager
2.	Uncertainty or no agreement.	Locality Manager/Service Manager / Head of Service/Locality
3.	Unresolved.	Strategic Lead Children Social Care

## 9.1 Level One

Team managers should resolve the majority of cases that need transfer. Where the team managers cannot reach agreement they will refer to the respective Locality/Service Manager.

## 9.2 Level Two

Head of Service/Locality will discuss and should resolve the majority of cases. Where there is no agreement, the transferring Locality/Service Manager will discuss the case with their HOS.

## 9.3 Level Three

Where needed the Strategic Lead for Children Social Care will make the final decision.

End