



Internal Transfer Process including step-up/down from or to early help

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Services Provided by the Right Team at the Right Time

Principles Underpinning Transfer (no delay)

1. Children and their families will receive the minimum number of different social workers and transitions between services. Children and families will be given the maximum information about the changes, at the earliest opportunity. This will be completed via a handover meeting with the family and confirmed via written communication. In sibling groups, the children will have the same social worker, unless it can be demonstrated this is not in the child's best interest. key aim: *Services provided by the right team and at the right time*

Case Transfer Standards are non-negotiable

2. All transfers to be discussed in a respectful and supportive way between Managers and Teams. All transfer requests recorded and shared in advance for receiving teams to review the information, involvement and planned interventions. Date of transfer will be confirmed and recorded. All managers across the service will meet and present their case. The **transferring manager** is responsible to ensure all records, information and outstanding tasks are completed prior to the transfer, the **receiving manager** will review prior to the discussion. Where there may be outstanding information or actions identified, these will be completed within an agreed timescale but **will not delay transfer**.

The following tasks will be updated prior to transfer, this is non-negotiable.

3. **With a child and family focused Lense**, every child will have a one-page profile and risk/ needs assessments is coproduced with the young person, evidences their voice, views and wishes/ feelings which are age appropriate. Plans and support will be inclusive of the family, their voice informs our involvement and interventions. Records should contain a photo of child, their genogram or eco map is updated and reflects important people in their supportive network and family.
4. **Every young person** will have accurate demographic information (LCS). This will include ethnicity, Health, Education and current legal status. Chronology and case summary will be updated and actively include the child's voice, lived experience prior to transfer. Child and Family assessment are updated at the start of involvement and prior of transfer if involvement exceeds 5 ½ months. Where risk is identified, plans and support needs are clear, evidence GCP2 (Neglect), DASH where DVA is a factor of CSE when a young person is considered as high risk e.g. repeated missing incidents or exploitation worries.
5. **Case records** are updated, recorded and finalised. Records reflect plans for next steps including reason for transfer, the child and families understanding this is taking place and when. Management oversight is recorded. All records regarding case management decisions, oversight and supervisions are updated and completed, this will include supervision.
6. **Legal pathway** (LCS) updated, key documents recorded if matter progressing through court, if in PLO: plans are updated and reviews recorded, are impactful and child focused. Critical dates such as CIN, CPP, CLA meetings and court dates are referenced in case summary. Professional networks and family are aware of the planned transfer, introduction and handover to new social worker.
7. **Critical key documents** such as PPM's, Health assessment and PEPs are recorded in line with practice guidance. This will include pathway plans, Family Time arrangements and risk assessments. It will also include commencing (CPR) for plans

of permanency outside of the immediate family. Family Group Conferences should be routine where CLA and CPP, recorded. Where adoption is identified as part of the child's parallel plan (and/or a parent has had a child placed for adoption previously, Early permanence will be considered and a referral to adoption to be made as part of parallel planning. For children who have a care plan of Adoption, the Later Life Letter should be completed by the social worker who knows the child best and their journey. The Life Story Book will be completed in the CLA team.

Case Transfer LCS

8. LCS form updated and agreed, notification to relevant Team manager for transfer (alert in management oversight/ decision case record). Transfer process as detailed in this guidance. Handover supervision will take place prior to handover. **Transferring manager is responsible to confirm and complete outstanding tasks in LCS** work tray before transfer occurs. They will quality assure, reflected on LCS under Management oversight/ Decision making.

Stepping down/ up with Supporting Families/AIPT (level 3):

9. threshold met to step down to and family consenting to receiving support. **Stepping up means** threshold met, referral to C-SPOC for consultation, decision confirmed and family informed. In both areas joint meetings take place as a handover point within 10 working days.

Transfers to CWD Team

10. At the point of contact or referral if threshold met (the child must have a permanent or substantial disability and be severely or profoundly impaired). Presented to the transfer meeting if it is identified during work with the family that a child in the family meets the threshold.

Case transfer between A&I Teams to FSP

11. Child in Need, transfer will occur where involvement is extended beyond 6 months.
12. Child protection: within 10 working days following ICPC: A&I worker leads initial core group; this forms the handover point.
13. PLO: transfer at initial PLO review meeting,
14. Legal proceedings: when ICO agreed A&I and FSP teams work together to start joint working, case responsibility to sit with A&I until CMH and FSP take from this hearing dependant on timescales. If the CMH is more than 3 weeks away the case can transfer providing team managers have a meeting to discuss outstanding work at least 5 days prior to CMH, with the view of reducing the time cases are sitting on transfer. If in this meeting agreement cannot be met between the team managers are to escalate to their service manager.

Transfer from A&I, FSP to 16+ Team

15. All 16- and 17-year-olds accommodated in the Family Courts or under Section 20
16. Where a 16 or 17-year-old becomes (or remains) CLA they become entitled to leaving care services.

FSP to CLA

17. Within 10 days where final hearings have concluded, child remains subject to CLA and care/ placement order
18. Before month 6 for children entering CLA (section 20), no plan to issue for legal proceedings
19. Where child(ren) remain open as CLA: no reunification planned

CLA to 16+ Team

20. The case holding CLA Team manager should also notify the 16+ team manager via transfer panel of a young person who will require support. The transfer should be considered when the young person is 15 1/2 years old. CLA SW to ensure that there is an up-to-date C+F assessment and pathway plan.

FSP to CLA Team

21. The CLA manager will be updated and invited to all relevant meetings where a child is being considered for transfer to CLA team.
22. Cases transfer to the CLA Team within 10 working days of care proceedings concluding in which a child(ren) is made subject to a Placement Order and/or Care Order. Care Order have completed, and child(ren) are made subject to Care Orders and Placement Orders.
23. FSP team manager will notify CLA Team Manager in advance of the final hearing. CLA will provide the name of the allocated worker prior to the final order being made.
24. FSP social worker to ensure that the child's file has photos, and relevant memories which will form part of their future life story work.

Closure

25. It is a significant event when children, young people and families no longer need to receive a service from Children's Services. It means that the child or young person has transitioned to the next stage of their life or that the lived experience of the child or young person has improved so that we are no longer needed. It can also be a time when there will be a risk that the improvements may not be maintained. The guidance updated February 2025 confirms the actions which will be taken

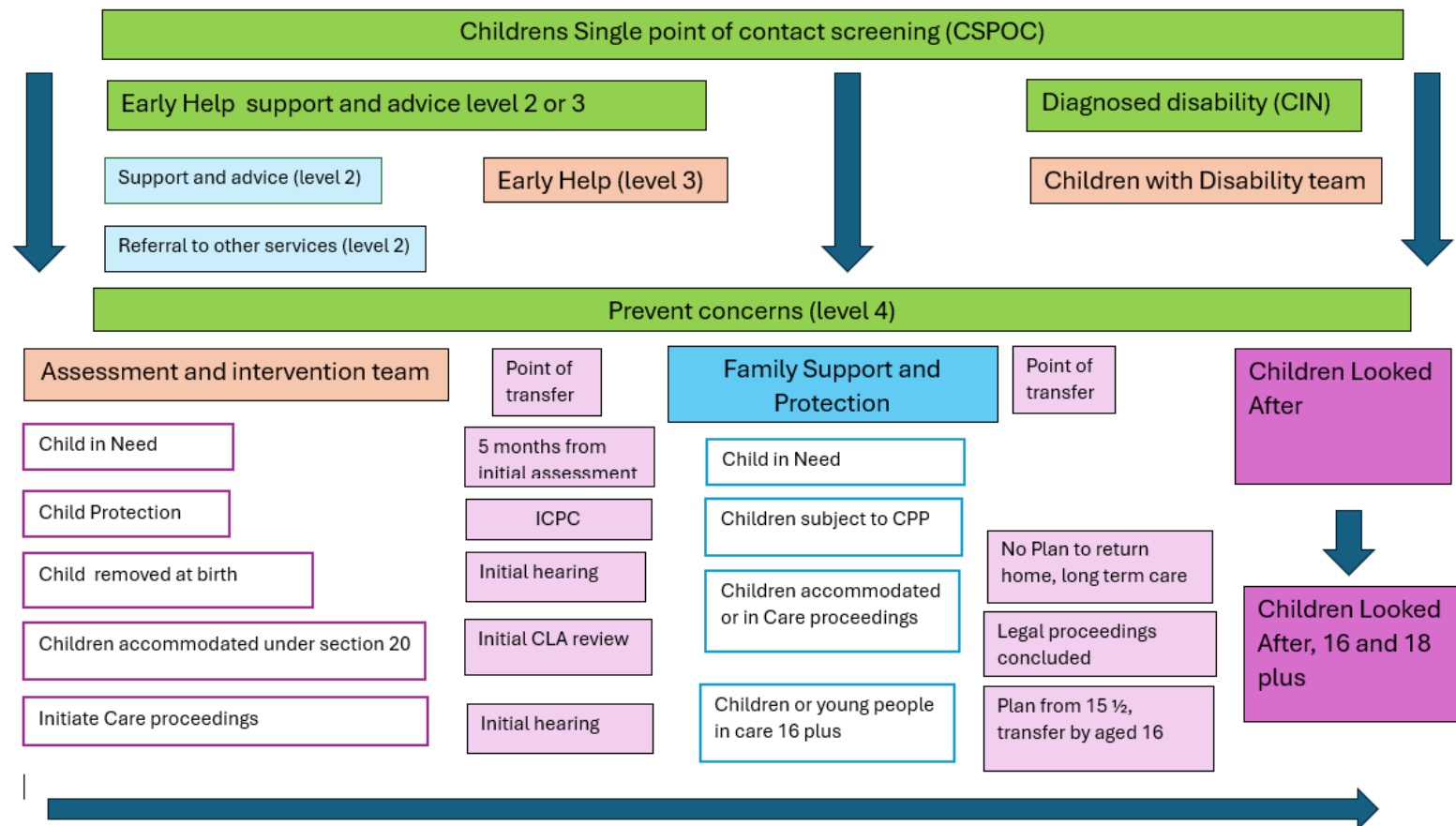


Working_together_
to_safeguard_childr



Case closure
guidance 2025.pdf

Case Transfer Flowchart



Documents required for transfer: Transfer document, Assessments, CIN report / CP Conference report, Plans (CPP, CIN or CLA), Court documents, Transfer Audit form. **Children could transfer directly from Assessment to CLA if Threshold met, from CIN or CPP to CWD if threshold met.**