



Practice Standards For Social Workers and Practitioners

Swindon Children's Services

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Principles and Vision

Our vision

Children at the heart of everything we do

Our non-negotiables

- 1) Children and young people are seen alone, and we know their lived experiences
- 2) Children and young adults' views are obtained, and they will inform planning and decisions for their lives
- 3) All children and young adults have an up-to-date assessment that identifies their needs and a plan that addresses how their assessed needs will be met, by whom and by when
- 4) All children and young adults are subject to a supervision discussion/management oversight on a minimum of a monthly basis, to ensure their needs are being met and they are safe
- 5) All children know and are seen by their Independent Reviewing Officer/Child Protection Chair, who will oversee that their needs and safety is being met, and take timely action where this is not the case

We also aspire to work in the following ways which are our practice principles. Practice principles are the foundations of good practice and are what is expected of all social workers and practitioners. Our Practice standards (page 12 onwards) are measurable and underpin accountability for practice delivery.

Anchor Principles: What is the Assessment for; What is the story; What does the story mean; what needs to happen now; How will we know we are making progress?

Purposeful Visiting Principles: Purpose; Child's voice; Parent's voice; Safety plan; Analysis; Action

C-Smart Plan Principles: Child-focused; Specific; Measurable; Achievable; Relevant; Timely

Risk Assessment Principles: What harm are you most worried about; If this happened what would be the impact on the child? What makes this more or less likely; What do we need to do now to make harm less likely; When will we review this; Are we making progress?

Risk Review Principles: What harm were you worried about? What have we done to reduce the harm? Has this improved life for the child? What do we need to do now? When will we review this? Are we making progress?



Introduction

Practice standards are an agreed set of expectations which are carried out by our children's services staff. Many standards are set through government guidance and legislation and are informed by research. Practice standards are a guide to outstanding practice and ensure a quality service to our children and families. Relationship-based practice and working together with our children, families and professional colleagues are at the heart of our practice culture. The Practice Standards sit alongside our Management Practice standards and together they provide accountability for the work we do with children, young people and families in Swindon.

We recognise that Swindon is made up of diverse communities, and that our practice should reflect this. We will ensure we are culturally competent, taking into consideration a child and their family's ethnicity, culture, background and past experiences, as well as disabilities and barriers to understanding.

Our aim is to provide a quality service. All social workers and other qualified practitioners need to know what is expected of them, and that work is being carried out to an acceptable standard. In a practitioner's absence, colleagues need to be able to access records and quickly understand what has been happening in the child's life and how best to respond to any needs that arise. Our Emergency Duty Service (EDS) relies on sound recording on children's records, including accurate and up-to-date summaries to inform decision-making out of hours. Key information should be available from the basic details screen, within the child's summary, chronology, genogram, recent reports, and the latest records, plan, and reviews.

Swindon Borough Council's model of practice is Family Safeguarding. Family Safeguarding aims to enable children to live safely in their families, in line with the vision of the Children Act 1989

and the recent Children's Social Care Guidance Stable Homes Built on Love (2023). The model is a strength-based whole-family approach to working with children and their families, that empowers parents to create sustained change for themselves and for their family. The model should be used in each team and service, not just the Family Safeguarding Service, and all staff should undertake family safeguarding training in order that they can utilise it.

All staff should undertake training and development and utilise the resources that are available on Tri-x (National Policy and guidance) Swindon Children, Families and Community Health Procedure Manual (proceduresonline.com) and the Resources Library (local policies and guidance) Resource Library (proceduresonline.com) and the Resources Folder (practice guidance) which is in Learn for You on the Swintranet <https://learnforyou.swindon.gov.uk/>

Social workers and practitioners should also be aware of the Swindon practice standards for Early Help and Social Care that relate to children with special educational needs and disabilities (SEND) which can be found on Tri-x here [prac_standards_csc_eh.pdf](#) (proceduresonline.com)

Swindon Social Workers and Practitioners also have access to Research in Practice and Community Care Inform. This can be accessed through: (<https://sbcintra.sharepoint.com/sites/HumanResources/SitePages/Community-Care-Inform.aspx>)

Our Social Work Practice Standards should be understood within the context of:

1. Social Work England, Professional Standards
2. The Health and Care Professions Council Standards of Conduct, Performance and Ethics
3. The Department for Education's Knowledge

and Skills Statement for approved child and family practitioners

4. Swindon Children's Services Management Practice Standards
5. Working Together to Safeguard Children (2023)

Swindon Children's Services recognises that working with children and young people and their families is one of the hardest and most complex tasks carried out within the public sector. Practitioners are required to give of themselves both professionally and emotionally in a demanding environment. Practitioners require a high level of emotional intelligence, resilience and fortitude. They have a right to expect high-quality support and supervision from the organisation in which they work.

"Children's social work can be highly pressured and, at times, extremely stressful. So, whether you are a frontline social worker, team manager or working with children in another social care setting, effective supervision helps you to do your job well." - (Supervision and Effective Social Work practice, Ofsted Blog, 23 October 2018)

All practitioners are responsible for ensuring that a good quality service is provided, which includes the following:

- Ensuring a professional response from the initial referral to closure.
- Ensuring good quality recordings about the child/family on our database that evidence the work done, the decisions made, and what the desired outcomes are for the child.

- Ensuring the child or young person's voice is heard and fully considered when implementing the plan.

- Attending supervision, annual Personal Development Reviews (PDRs) and team and service meetings

- Participating in a supportive team culture, with good communication, high expectations, high support and routine commitment to rigorous professional practice

- Demonstrating effective multi-agency collaboration and working.

Additionally,

The National Minimum Standards for Fostering Services can be found at:

<https://www.gov.uk/government/publications/fostering-services-national-minimum-standards>

The National Minimum Standards for Adoption can be found at:

<https://www.gov.uk/government/publications/adoption-national-minimum-standards>

General Practice Standards

Induction

- All practitioners should have an induction which allows them time to understand the organisation and its core values, meet relevant others, familiarise self with Practice Standards, policies and procedures and complete mandatory core training.
- An induction programme has been created to welcome every new employee to Swindon Children Services. An induction pack will be given by the manager to the new practitioners. For social workers, this will include a Direct Work backpack, which contains resources and materials.
- The 2-week induction programme can be adapted to suit different roles but contains key essential information relevant to all employees across Children Services.
- A revised induction programme may be useful to support individuals who have been absent from the workplace for a significant period.

Supervision

- All Social Workers should attend monthly supervision with their managers. Supervision is both a right and a responsibility. Frequency will vary between roles. (see Supervision Policy)
- All Social Workers should be given and sign a supervision agreement, (a template is available in the Supervision Policy) which outlines expectations clearly. This should be reviewed on an annual basis or when there is a change in supervisor.

- Supervision is an essential part of employee care; should provide opportunity to consider the impact of work on self; along with professional development and any training needs.
- Information on these issues must be placed in the practitioner's personal supervision file on SharePoint, not on the child, young person's/ young adults or foster carers record.
- All managers must ensure protected time to explore decision making and workload. Quality supervision is a key requirement to assure us that children and young people are kept safe, receive a quality service and that planning in respect of them is needs led and timely.
- The supervision record is a key management tool for childcare planning and recording. It must be used in every supervision session relating to that child, young person or foster carer and must include consideration of the following:
 - Guidance as to the course of action required if expectations cannot be met, and contingency plans in the event of no access visits. (Laming 2003 Rec34)
 - The requirement for an allocated social worker; that children and young people's needs are assessed; they each have a plan which meets all their needs and support is put into place to actively address those needs.
 - The requirement that children and young people should be seen, seen alone, and spoken to. If this does not happen, there should be an explanation as to why with detail as to who else is in contact with the child or young person.

- The child/young person's voice should inform planning and decision making; with creative use of direct work tools to engage and communicate.

- Supervision should also consider any potential risk to the practitioner along with their health and wellbeing.

- If an audit has taken place; this should be reflected upon during supervision and any actions tracked to ensure learning loops have been closed and good outcomes.

- Any key management decisions outside of formal supervision, which shape the actions and interventions of a practitioner, must be recorded by the manager responsible not the practitioner.

- There should be layered management oversight when advice is sought from a Service Manager or Director; recorded by the relevant Senior Manager.

- Any decisions made outside of hours will be recorded by Emergency Duty Service on Care Director.

Supervision Records

- There must be a record of the discussion completed for each child or young person/ young adult or foster carer at every supervision session concerning them.

- The Team Manager/Assistant Team Manager must retain a copy of supervision on the practitioner's welfare supervision file on SharePoint. If a child, young person, or foster parent has been discussed during welfare supervision; only their Care Director number should be recorded within their welfare supervision record; to be held safely within their personal file on SharePoint.

- Supervision notes should always be recorded in a restorative way.

- Group supervision can be effective; it encourages different perspectives to be sought and experience to be shared. A summary of any actions that stem from group supervision should be recorded within the file.

Meeting Attendance

- Social workers are expected to attend all meetings related to the child or children they are working with. On occasions their line manager will also attend meetings, specifically those when the child is being transferred between teams, and where there is a change in the child's circumstances.

- They are also required to attend team meetings and service meetings, and whole service development days which happen quarterly.

Auditing

- Social workers will be expected to participate in all audits where requested. The auditor will sit with the allocated social workers and go through the questions on the audit tool.

- Where there are areas of training and development deemed necessary for the social worker, the auditor will inform their line manager, who will assist with making sure opportunities for practice development are available.

- Audits that are not judged Inadequate will also have a set of recommendations that will need to be addressed.

Confidentiality

All Social Workers have access to personal and highly confidential information pertaining to the public and. Swindon Data Protection & Confidentiality Policies explains how we expect employees of the Council to treat confidential and personal information and so should be read alongside this practice guide.

As a Social Worker, you will receive and handle personal and private information about children, families, foster carers/parents, adopters, partner agencies, and organisational matters through the course of your day-to-day work. Swindon Children's Services is committed to ensuring this information is well-protected. To this end, all Council employees are expected to complete mandatory training

We must protect information for a number of reasons, to include:

- Children, young people, care experienced young adults and family personal information is sensitive.
- Information can be sensitive to the operational area.
- To safeguard children, young people from harm and / or promote their wellbeing.
- To safeguard and protect vulnerable adults.
- Confidentiality affects all employees. Council employees may have various levels of authorised access to confidential information. Common examples of confidential and personal information include:
- Financial information.

- Personal data regarding children, families, foster carers/parents, adopters, members of the fostering family, partners, agencies and commissioned services.
- Data entrusted to the Council by external parties.
- Documents and processes explicitly marked as confidential.
- Unpublished goals, plans, forecasts, strategies, and initiatives marked as confidential or otherwise.

What you should do:

- Ensure mandatory training is always up to date.
- Clear desk policy.
- Lock or secure confidential information always.
- Place confidential documents in the confidential waste when they are no longer needed.
- Make sure you only view confidential information for the purpose of completing work related tasks.
- Make sure you only view confidential information on secure devices and only those that you are directly working with, or your staff are.

Keep confidential documents inside Swindon BC premises unless it is absolutely necessary to move them.

What you should not do

- Use confidential information for any personal benefit, profit, or interest.
- Disclose confidential information to anyone outside of Swindon BC unless there are legitimate reasons for doing so.

- Replicate confidential documents and files and store them on insecure or personal devices.

Confidentiality Measures

Swindon BC will take measures to ensure that confidential information is well protected; to include:

- Ensure that manual records are held securely.
- Minimise printing.
- Encrypt electronic information and safeguard databases.
- Ask you to sign a confidentiality agreement.
- Ask for authorisation by senior management to allow employees to access certain confidential information or restrict access e.g. if there is a known conflict of interest.

Exceptions

Confidential information may occasionally have to be disclosed for legitimate reasons. Examples include:

- Where a regulatory body requests information as part of an investigation or audit.
- Where it is necessary and considered to be in the best interests of safeguarding the welfare of children and young people.
- Where Swindon BC examines a venture or partnership that requires disclosing some information (within legal boundaries).
- In such cases, employees involved should document their disclosure procedure and collect all necessary authorisations. We are duty bound to minimise the amount of information disclosed to only that which is necessary.

Disciplinary Consequences

Any breaches of the Council's Data Protection & Confidentiality Policy may lead to disciplinary and legal action.

Swindon BC will investigate every breach of confidentiality and consider termination of any employee who wilfully or regularly breaches our confidentiality guidelines. Swindon BC may also have to act in respect of any unintentional breach of its confidentiality policy depending on the nature of this, intent, frequency, and seriousness.



Communication

Communication with children, young people, care experienced young adults, foster carers and families

- All those who we work with are to be spoken to professionally and always treated with respect.
- Practitioners to provide full contact details to children and young people, their families and care experienced young adults and all relevant professionals within two working days of new allocation. This includes name, telephone contact and email address.
- Children, young people and their families to be notified of changes of social worker or management within two working days (e.g. re-allocation or transfer).
- All telephone messages and emails to be responded to within two working days.
- All Social Workers to be open, honest, and transparent with families always.
- All Social Workers must use plain and jargon free language.
- Social workers must ensure that children, young people, families and care experienced young adults; carers have access to interpreters if their first language is not English, or if British Sign Language speakers – also, that written information provided is translated if required.
- Duty telephones should have clear, relevant message to assist those who are calling Swindon BC.

- All practitioners should ensure they have a complete signature on their email – their name, role, team, telephone and email details; relevant workdays if applicable. We are asking all Children Services employees to support other colleagues by using pronouns.
- Out of Office should be used so that people are clear whether people are available for contact and accurate voice mail messages should be updated.
- All practitioners should provide their first and last name to callers and when reference is made to someone talking to their manager, the name of that manager is provided to the caller.

Communication with Professionals:

All professionals to be spoken to professionally and treated with respect.

Practitioners provide full contact details to all professionals involved with the child, young person/young adult and their family. This includes name, telephone number and email address.

All messages to be responded to within two working days.

Professionals to be advised of any significant events or changes within the family circumstance within two working days.

All professionals to be invited to all key meetings regarding the child or young person with sufficient notice.

All professionals to receive a copy of all relevant documentation within timescales.

Foster carers should be afforded the same level of respect.

If capacity is challenged, wherever possible a response email should be sent with an indication as to when a fuller response can be provided.

Communication with your Colleagues.

- Colleagues to be spoken to professionally and always treated with respect.
- Social workers to advise ATM/Team Manager / IRO / CP Chairs immediately of any significant changes to a family situation which may mean a child or young person is at risk; Service Manager to be consulted as appropriate and if escalation is required, or of any change in their own circumstances that may prevent them being able to safeguard a child i.e. absence from work.



Performance Development Reviews

- All employees must have a minimum of two Performance Development Reviews (PDR) a year. This provides opportunity for employees to formally think about their achievements in the past twelve months and record any actions or areas for development. See (Performance Management Guidance Booklet.pdf)
- The learning outputs of these conversation will be documented and reported on.
- Staff are responsible for undertaking the training and development they need to ensure their practice is effective and they are improving outcomes for the children and families they are working with.

Performance

- Effective supervision, high support and high challenge are key to good performance and ultimately good outcomes for children, young people/young adults and families/foster carers.

Practitioners are accountable for their own professional practice and should be held to account if performance is not at expected standard. Where poor or under performance by the practitioner is identified, managers must seek support and guidance from their own line managers and Swindon Human Resources service in line with relevant procedure.

“Supervision and case consultations are critical in helping practitioners draw out their reasoning so that it can be reviewed.” - (The Munro Review of Child protection, Munro, 2011)

Sickness absence

- All Staff are required to follow Swindon’s Sickness Absence policy and procedures. Managers are required to support staff and manage sickness absence in accordance with the policy and procedure that can be found on Swindon’s Intranet on the following link; Sickness absence

All employees should be mindful that they are spending public money and ensure that they are obtaining the best value for money.

The standards on the next page relate to social work practice

Practice Guidance

Visiting timescales

Standard	Visiting Practice Expectations	By Who
Timescales for visiting children are driven by the child's plan, urgency of their situation or level of concern. Decisions about when/how often practitioners visit is taken in supervision, with these decisions recorded on the case record and in the child's plan	Early Help The frequency of contact is set out in the child's plan, sufficient to enable assessment and intervention to be effective and to allow for a credible review of the child's progress.	Social Worker
	Children we are notified about contacts made to children's services <ul style="list-style-type: none"> • The decision about the type of response the child needs and feedback to the referrer is made within one working day of a referral being received (WT). • If a Section 47 enquiry is triggered, the child is visited according to risk and need, no later than 2 working days. 	Social Worker
	Child in Need <ul style="list-style-type: none"> • As set out in the CiN Plan agreed with Manager • At least every 4 weeks. 	Social Worker
	Children subject to a Child Protection Plan <ul style="list-style-type: none"> • Within a maximum of 48 hours, thereafter, as set by the Initial CP Conference & Core Group • At least once every 10 working days. 	Social Worker
	Children We Care For: <ul style="list-style-type: none"> • On the day the child is placed, then within 1 week of the beginning of the placement • Intervals no longer than six weeks during the first year of any placement • Every six weeks during subsequent years unless formally agreed as a permanent placement and once agreed, at intervals of not more than three months • Whenever reasonably asked for by a child or foster carer, regardless of placement status. • Where the child has a series of short breaks, they are seen as a minimum twice a year in that setting (at least once unannounced) 	Social Worker
	Children and young people who are placed in a series of short breaks: (short break care arrangements, or short stays with relatives): <ul style="list-style-type: none"> • Within the first seven placement days then within 3 months of the first placement day. • Intervals of no less than six months after the first visit • Unannounced at least once a year if placements interval is more than six months • At least annually the child's sleeping arrangements will be seen 	Social Worker



Standard	Visiting Practice Expectations	By Who
Timescales for visiting children are driven by the child's plan, urgency of their situation or level of concern. Decisions about when/how often practitioners visit are taken in supervision, with these decisions recorded on the case record and in the child's plan	Children placed in an adoptive placement: <ul style="list-style-type: none"> • Within the first week of the placement and weekly thereafter until the first review • Thereafter, a minimum of monthly until the adoption is finalised • Additional visits are arranged where there are any concerns. • Shared with SSW or adopters/child's social worker 	Social Worker
	Privately Fostered Children: <ul style="list-style-type: none"> • Within 7 working days from the date of notification to the local authority • Intervals of not more than six weeks during the first twelve months • Intervals of not more than 12 weeks in any 2nd or subsequent year. 	Social Worker
	Children with temporarily approved foster carers or parents under Interim Care Order: <ul style="list-style-type: none"> • Weekly until the first review • Every four weeks thereafter until the carer is approved or final hearing completed. 	Social Worker
	Children made subject to a Care Order and placed at home with parents: <ul style="list-style-type: none"> • Within the first week • Intervals of no more than six weeks thereafter. 	Social Worker
	Children reported missing: <ul style="list-style-type: none"> • The 'children missing/missing from care' procedures are followed on the Swindon Safeguarding Partnership website. • Visited within 72 hours of the child's return, referring to the above procedures. 	Social Worker
	Children in more than one placement - residential school and foster care or residential home: <ul style="list-style-type: none"> • visited in each living situation, at least every 12 weeks 	Social Worker
	Young people aged 18-25: <ul style="list-style-type: none"> • At least every 2 months by their personal advisor. • In addition, keeping in touch by phone, text or email based on the YP's preference • frequency and type of contact agreed with the YP and set out in their Pathway Plan 	PA

Assessment of Need

Standard	Assessment Practice Expectations	By Who
All children have an assessment of their needs which reflects how their experiences, wishes, feelings and needs are known and understood	Single assessments should be carried out within a maximum of 63 (45 working) days. In Swindon the target is 30 days	Social Worker
All children have an assessment which reflects the wishes, feelings, needs and capacity of parents and carers; enabling them to fulfil their responsibilities	The Manager will review the progress of the single assessment between 1- 8 working days (concluding whether no further action is required and the assessment can be closed, or whether further work is needed); again at 20 working days; and signed off with appropriate comment as an assessment that meets good standards by 45 working days.	Manager
The single assessment will be updated: As a minimum once every 12 months; When a section 47 has been initiated Prior to a child becoming a Child We Care For; Prior to a child returning home from Care; When any significant change or incident in the child's life requires updated assessment and planning; Where the Line Manager believes it would be necessary;	The reason for the assessment is clear and child-focused (i.e. not just a process), stating why we are assessing this child's needs now and what questions this assessment is seeking to answer. All information in the assessment is sourced clearly and accurately.	Social Worker
six monthly if the child is subject to a CP Plan for longer than 3 months; Once a year for all Children We Care For to inform a new Care Plan;	Consent is sought to seek and share information, unless to do so could be likely to place the child at risk of harm.	Social Worker
	Every child open to a social worker has an up to date assessment. It is evidence based and includes a clear analysis of all the information available. There is multi-disciplinary input, used to triangulate social work views and family views with evidence from professionals involved with the child and family. It is clear which agency provided which information.	Social Worker Multi Agency Professionals
	Assessment is understood to be a continuous process; it is regularly reviewed and clearly linked to the plan that details actions to meet the changing needs of the child.	Social Worker
	Each child's file has a chronology and genogram that has clearly been used to inform the assessment. The chronology is used as a tool to ensure the family history informs the analysis. However, the assessment does not contain the full chronology, but a summary of the significant events for the child.	Social Worker

Standard	Assessment Practice Expectations	By Who
	The assessment accurately conveys each child's lived experience, gathering and recording each individual child's views and feelings, seeing the child in a variety of settings where possible, including alone.	Social Worker
	The assessment presents a clear professional view, with the impact on the child of the dynamics and issues the assessment uncovers, seen to be central to the assessment. This means an accurate understanding of the child's development in the context of their family social history, past and current lived experience.	Social Worker
	The social work involvement empowers and supports the family to fulfil their responsibilities to each child in their care; the assessment records each parent or carer's needs and views (including partners). It includes consideration of offering a Family Group Conference.	Social Worker
	Diversity is clearly considered, with the assessment noting if any specific needs arise from the child or family's ethnicity, culture, heritage, age, disability, gender, faith and sexuality.	Social Worker
	The assessment is clearly informed by assessment of risk; considering protective factors, static and dynamic risks. It evaluates each protective factor or risk in terms of the impact on the child, how significant the risk is or how it might promote resilience. Contingency plans are set out including practical steps to ensure the safety and welfare of the child.	Social Worker
	All assessments must include a review of any relevant previous care proceedings. Practitioners are required to identify and record any prior care proceedings concerning the child and/or their siblings, or parents. They should analyse the outcomes and learning from those proceedings, including decisions made by the court and the rationale behind them. Social workers should demonstrate in the assessment how past proceedings inform their current analysis.	
	The assessment considers available resources and the child's place within the context of family, community and culture.	Social Worker
	The assessment makes use of evidence-based assessment tools and cites research where it is relevant, explaining how it is relevant for this child in this situation to inform the analysis.	Social Worker
	The assessment includes consideration of other children and family members within the close or wider family network, including their contact with and impact on the child, gaining their views where appropriate and possible. This includes a professional view as to whether any of these other children or adults need their own assessment or support.	Social Worker
	The social worker is professionally curious and uses supervision for critical reflection to make sense of the information they are gathering, particularly to support a view of parental capacity to change and to write analyses in assessments.	Social Worker

Standard	Assessment Practice Expectations	By Who
	The analysis concisely sets out the practitioner's reflective record of how the information in the assessment impacts on the child's world or their development (including risk and protective factors) and what interventions need to be made in the child's interests, or what is the expected outcome of an intervention.	Social Worker
	Social workers ensure intervention and the provision of services during the assessment period where needed to improve the child's situation.	Social Worker
	Assessments are written in plain language, with correct spelling, punctuation and grammar, free from acronyms and jargon so they can be understood by the child, parent/carer as far as possible. If needed so as to ensure the child/family can understand and engage in the assessment, it is translated into their first language.	Social Worker
	Assessments are shared with parents, others with parental/carer responsibilities and the child, depending on their age/level of understanding. Their views are clearly recorded on the assessment before it is signed off.	Social Worker
	All assessments are scrutinised and approved by a manager with the manager's view and rationale for this view clearly recorded.	Manager



Planning

Standard	Practice Expectations	By Who
All children have a plan which explains what needs to happen; by when; by whom; what outcomes we are seeking together; how risk is managed; and what the contingency plan is	When there are concerns that a child is suffering or likely to suffer significant harm, a Strategy Discussion/Meeting is used to determine whether a Section 47 enquiry is required, as well as safety planning. The timescale for the Strategy Discussion/Meeting is determined by the level of risk and need, within a maximum of 2 working days.	Manager
	If Section 47 enquiries are triggered the timescale for completion is determined by the level of risk and need. The enquiry will be completed within a maximum of 15 working days.	Social Worker
	The reason for and purpose of the plan are clearly set out.	Social Worker
	The plan flows from the analysis made in the preceding assessment, or earlier plan and is outcome focused.	Social Worker
	The plan clearly addresses needs and risks as well building on strengths.	Social Worker
	It conveys the views, wishes and desired outcomes of the child and other relevant parties.	Social Worker
	The plan is based on evidence and research directly relevant to the child's circumstances and stages of development.	Social Worker
	Plans for children separated from parents/siblings or significant others include arrangements for contact and permanence.	Social Worker
	Plans include an analysis of the risks and benefits of all the realistic options for the child.	Social Worker
	Plans result in action. Actions are agreed by all parties and each person is clear about the part of the plan they are responsible for.	Social Worker
The plan is SMART (specific, measurable, achievable, realistic and timely), clear what needs to change and includes clear timescales that meet the changing needs of the child. The plan has clearly identified intermediate outcomes that can be used to evidence progress and minimise drift.	Social Worker	

Standard	Practice Expectations	By Who
	It includes a contingency plan should it fail to achieve the intended outcomes to keep the child safe in the event of an emergency or where a carer places the child at risk.	Social Worker
	The plan contains clear arrangements and timescales for review.	Social Worker
	Where there are multiple teams involved with a child, a monthly multi-team meeting to be held to ensure clear communication, co-ordinated planning and consistent support is provided to the child and family.	Worker
	There is evidence of management oversight of the plan to ensure the practice expectations above are met before the plan is signed off.	Manager
	In reviewed plans, the progress in meeting outcomes is clear and evidenced.	Social Worker
	Children subject to Child Protection Plans have a draft plan written with the family before the ICPC and an outline plan established at the 1st Child Protection Conference, developed by the Core Group at their 1st meeting after the conference. Core Group meetings must be held every 4 weeks to review the Child Protection Plan.	Social Worker
	Children in Need plans are reviewed at intervals clearly agreed with the Social Worker's line manager, and at least every three months. If there are significant changes in the family circumstances, there is clear consideration of whether an early review should take place.	Social Worker
	Children in Care have a Permanence Plan ready for consideration at the 2nd Review (incorporated into the Care Plan). Any reduction in established frequency of review meetings is discussed by the SW, manager and IRO, in line with Tri X policy guidance.	Social Worker
	Care Leavers have their Pathway Plan reviewed within 3 months and thereafter within a maximum of six months.	Social Worker
	Children receiving Short Breaks have their plans reviewed within 3 months and thereafter within a maximum of six months. Any reduction in frequency is discussed by the SW, line manager and IRO in line with Tri X policy guidance.	Social Worker

Child Protection Conference and Reviews Standards

Standard	Child Protection Conference and Review Practice Expectations	By Who
<p>Preparation: Initial.</p> <p>Invite timescales. If these timescales are not adhered to then there is a risk that the conference will not proceed.</p>	<p>Initial conference to be held 15 days following the strategy meeting. The list of professionals to be invited will be sent to the Quality Assurance unit following the decision to convene a child protection conference either: immediately following the strategy discussion which endorses that decision or no later than day 5 of any section 47 enquiry.</p>	Social Worker
	<p>Invites will be sent to professionals enabling them to have 6 working days' notice of the date of the conference. This will allow them time to prepare their report and to share it with parents.</p>	Social Worker
<p>Consultation with a Conference Chair.</p>	<p>A consultation with a conference chair should take place as soon as the decision to convene a conference is reached. This consultation should interrogate the threshold and ensure that a conference is the appropriate and proportionate process for the child/family. The consultation should consider whether there is an ongoing risk of significant harm/impact on the child/intent/why a child in need plan is not sufficient. The decision to convene a conference, however, remains with the operational team.</p>	Social Worker /CP Chair
<p>Timescale for Reports</p>	<p>Reports for an initial conference should first be shared and discussed with parents at least 3 days prior to the conference and before they are sent to QA for circulation. Reports should be sent to QA 2 working days prior to the conference. This is not negotiable.</p>	Social Worker
<p>Review Conference</p>	<p>Invites will be sent a minimum of 13 days prior to conference.</p> <p>Reports will be sent 5 working days prior to conference to be circulated to enable all participants to have read the report prior to the conference.</p> <p>Reports should be shared and discussed with parents/young people.</p> <p>Dates for review conference will be set at the preceding conference.</p>	Social Worker

Standard	Child Protection Conference and Review Practice Expectations	By Who
<p>All Conferences;</p> <p>Quality of Reports.</p>	<p>All reports for conference should include a detailed assessment of the needs of the child/family with a clear analysis of the impact of parents' behaviour on the child and why this is deemed to be significant harm. The report should include a summary of the child/parent views/voice. The report should be written in straight forward language and avoid jargon. Review reports should clearly outline progress made and the impact on the child.</p>	Social Worker
	<p>Reports should consider culture/diversity/ethnicity and any impact this has on the family functioning or understanding of the concerns of the local authority.</p>	Social Worker
	<p>Reports should be quality assured by the relevant team manager</p>	Manager
	<p>Child Protection Chairs will raise any concerns about the quality of reports directly with the team manager outside of the conference and through their own QA mechanisms.</p>	CP Chair
<p>Parental involvement</p>	<p>Reports will be shared with parents by the social worker at least 2 working days before conference to ensure that their views are known. Parents must be given the opportunity to discuss the report directly with the social worker</p>	Social Worker
<p>Child/Young person Involvement.</p>	<p>If the child/Young person is over 12 then they should be given the opportunity to have the report shared and be given the choice whether to attend the conference or not. Younger children should be informed in a way which is age appropriate of what the conference may mean to them. In all circumstances the views/voice of the child must be ascertained.</p>	Social Worker
<p>The Chair</p>	<p>The conference chair will see the parents and child (where applicable) at least 15 minutes before the conference and will ensure that they have seen the report and that they know what is going to happen at the conference. The chair will explain the lay out of the conference room and where they will be sitting.</p>	The Chair
<p>Interpreters</p>	<p>Where English is not the first language of the family all reports should be translated and an interpreter booked for the conference</p>	Social Worker

Standard	Child Protection Conference and Review Practice Expectations	By Who
Domestic Abuse.	Where there is domestic abuse within a family the chair must consider whether the conference needs to be held in two parts to enable the victim/perpetrator to be separated.	CP Chair/ Social Worker
Cancellation of Conference	The decision to cancel or postpone a conference must be taken by the relevant Director or Service Manager in consultation with the operational team. Conferences should not go ahead without parents. Where parents ask for dates to be changed this should be considered sensitively and take account of the family/child's needs. If a CP conference is cancelled there must be a monitored safety plan for the child, in the meantime until a new date can be organised.	Director Service manager
Proposed Child Protection Plan	The plan should be discussed with the family prior to the conference and a draft plan included with the report. The plan should address what parents need to do to minimise any impact of their behaviour on their children and in doing so improve outcomes. Plans should include actions for other professionals, which should also be discussed prior to the conference. Plans should be written in a language that children/parents understand and avoid the use of jargon.	Social Worker
At the Child Protection Conference Conduct.	Parents will be treated with respect. If they become distressed then appropriate breaks will be offered. Strengths as well as concerns should be explained without the use of jargon. Disagreement between professionals should be in the form of professional challenge. Criticism of social workers is not appropriate and where there are practice/performance issues this should be addressed through appropriate line management outside of the conference. Parents/Young people should be given the opportunity to express their views although where necessary the chair may intervene.	Chair Chair Chair
Threshold Discussion/ Decision	The conference will discuss whether the threshold for a plan is met. The overriding decision rests with the chair. If the chair disagrees with the majority of the conference participants then the rationale for this must be accurately noted.	Chair

Standard	Child Protection Conference and Review Practice Expectations	By Who
Child Protection Plan.	The draft plan should be discussed in more detail during the conference and agreed on conclusion of the conference. The outline plan from conference should then be discussed at the core group and further detail added if required. The plan needs to be outcome focused and clear about what is expected of parents to ensure their children are safe.	Chair Social Worker Family Professional network
1st Review conference decision.	If at the first review conference (three months) it is decided that the plan is no longer required this must be discussed and agreed with the Director prior to the conference.	Director Chair
Following Conference. Decisions.	The decision and actions from the conference should be entered onto the child's electronic file and shared with attendees within 24 hours.	Social worker QA Chair
Minutes.	Minutes. Minutes from conference must be on the child's file within 20 working days.	QA
Significant Incidents.	Where there is a significant incident/increased risk/poor engagement in the plan involving a child who is the subject of a child protection plan, the chair must be informed within 24 hours. The chair will then in consultation with the social worker decide if a review conference should be convened earlier than planned. This will decrease the risk of drift and delay.	Social worker Chair Team Manager
Chair's Footprint.	The chair should have an overview of the progress of the plan by looking at the case recording and where appropriate talking to the social worker. The chair should record their activity and observations on the case file to ensure that their oversight is visible.	Chair

Children We Look After Reviews

Standard	Practice Expectations	By Who
Timing of CWLA Reviews.	Once a child becomes cared for the social worker should alert the Quality Assurance unit within 1 working day so that a reviewing officer can be allocated and the first review arranged within 28 days.	Social Worker
	Invite lists should be sent to QA at least 16 working days prior to the date of the review	Social Worker/ QA
	Invites to children's reviews should be discussed with the child/ young person if they are of an appropriate age and understanding. The review is the child's meeting and therefore consideration must be given to the child's views on who they would like to attend.	Social Worker
	QA will send out invites along with the consultation documents 15 working days prior to the review. This will ensure that parents/ carers/children have sufficient time to complete the consultations	QA
Preparation Children's views will be represented.	Social workers will discuss with children/young people their review, its purpose, who they would like to attend, how their views are going to be heard and the importance of the consultation form in representing their views.	Social Worker
	IRO's will ask children aged 13 or over if they would like to chair their own review or part of it and will support them to do so.	IRO
	All children if of an appropriate age and understanding should be encouraged and supported to attend their review	IRO Social Worker
	Children should be encouraged and supported to complete the consultation.	IRO Social Worker
Parents Views will be represented.	Social worker will ensure that the parents/carers of the child are consulted for their views. Even if a child is subject to an interim care order, parents continue to have parental responsibility and therefore they must be consulted about their views on the care of their child. If parents do not attend the review for whatever reason their views should still be represented	Social Worker
Foster carer/ children's home views will be represented	Social workers should consult with foster carers/children's home staff to establish their views whether they attend the review or not.	Social Worker

Standard	Practice Expectations	By Who
Cultural Competence.	The social worker will take account of whether there is the need for an interpreter and/or translation. They will consider the child's culture, background and past experiences alongside ethnicity. These factors need to influence care planning.	Social Worker
Conduct of Review.	Where a child has requested to chair their own review, this will be supported. The agenda for the meeting should be agreed between the child and the IRO prior to the meeting	IRO
Child Participation.	The review is the child's meeting it is about them and their plan for the future, the meeting should be child friendly without the use of jargon.	IRO
	The review should be held wherever possible at the child's home.	IRO
	Children should not be removed from school for a review this will make them feel different to their peers.	IRO
	Children should be able to make written representation to the review either via the consultation document or through pictures/ direct work.	Social worker IRO
	Children should be asked if they would like an advocate and if so one should be provided.	Social worker IRO
Care Plan.	The social worker should present a draft care plan to the first review this should have been discussed with parents, child, carers and their views recorded.	Social Worker
	Subsequent care plans will include permanency planning. Care plans must be discussed/explained to children and families before reviews.	Social Worker
	The IRO will scrutinise care plans and ensure they are both fit for purpose and meet the needs of the child. They will highlight any drift and delay and be responsible for overseeing the progress of the plan.	IRO
	The IRO will have a responsibility to agree the final care plan. If the IRO does not agree the final plan then a referral for independent guidance is available via CAFCASS legal.	IRO

Standard	Practice Expectations	By Who
After the Review. Minutes.	Review minutes will be on the child's electronic file within 20 working days.	IRO
Outcomes. Children.	The outcomes of the review will be shared with the child via a letter from the IRO to the child. This will acknowledge and thank them for attending/chairing and be written in an appropriate child centred way. The social worker will also go through the review decisions with the child. Where the wishes of a child are not possible the reasons must be explained to them.	IRO Social worker
Parents.	The outcomes of the review should be shared and explained to parents.	Social worker
Mid-point review	The IRO should contact the child between reviews and if possible arrange to see them either face to face or if they prefer via Teams .	IRO

Direct Work with Children

Standard	Practice Expectations	By Who
As far as age and understanding allows, children are spoken to alone and worked with by professionals who have the tools to directly engage with them.	Children and young people are seen alone, in a variety of settings, observed and communicated with according to their age, understanding and developmental needs, as part of assessment or intervention.	Social Worker
	Every child knows who their Social Worker is, why they have a Social Worker, how to contact them, how often they will see them and what their plan is.	Social Worker
	Practitioners arrive on time and if going to be late, tell the child/family/ carer as soon as possible to apologise.	Social worker
	Practitioners are familiar with and use direct work approaches appropriate to the child's age, understanding and preferences; and understand that "direct work" includes both play materials/ engagement tools and relationship building conversations.	Social Worker
	All children and young people will receive and have explained to them the procedure for making a complaint/representation, and their right to an advocate.	Social Worker
	Staff make appropriate arrangements for the use of translators, interpreters and communication tools to meet any specific sensory or language needs including use of braille, sign language, hearing loops etc.	Social Worker
	Communication with children is recorded in a manner that reflects their views and is appropriate to be shared with them	Social Worker
	All key assessment/planning documents reflect the views of the child or young person including where a child declines to share any information. The reason why the sharing of information was declined is recorded.	Social Worker
	When children express a desire not to see the social worker, the reason for this and consideration of how to overcome it is given careful consideration and unsuccessful attempts to see a child are recorded.	Manager
	Other than in an emergency (e.g. the worker is absent from/leaves work unexpectedly), all children will be notified of a change in worker, the reason for it and have the opportunity to be introduced to their new worker by their existing worker.	Manager
	Families and carers will be notified both verbally and in writing and all those involved including the child, family, carers and other agencies will be informed of the new workers contact details and the date of the change in writing/by email.	Social Worker
	New workers will read the child's file before meeting the child and family.	Social Worker

Recording

Standard	Recording Practice Expectations	By Who
All children's case records are analytical, well written and timely, so that everyone can understand significant events that have happened; what the plan is; the purpose of actions and contacts; and what difference has been made so far for the child.	Information is written and stored in line with information sharing protocols and the principles of the Data Protection Act: fairly and lawfully processed; for a clearly defined, legitimate and limited purpose; adequate, relevant and not excessive; accurate and where necessary kept up to date; processed in accordance with the data subject's rights; stored with appropriate technical and organisational security.	Social Worker
	Case summaries on the child's record should be updated every three months at a minimum. They must include all professionals involved with the child and family and include their contact details.	Social Worker
	Social workers ask adults and young people for written consent (using the standard consent form approved by Swindon Borough Council) in respect of information sharing and ensure the consent is placed on the child's file.	Social worker
	Children's records are kept up to date. General case recording relating to a child's record/chronology must be recorded within 5 working days. More significant events should be recorded within 2 working days and child protection visits and urgent safeguarding matters should be recorded within 24 hours.	Social Worker
	A chronology is started for every child subject to a single assessment, completed before the single assessment is approved by a manager, and thereafter kept up to date by the allocated social worker.	Social Worker
	The chronology is used as an analytical tool to help understand the impact, both immediate and cumulative, of key events and changes in a child or young person's developmental progress.	Social Worker
	Reports and children's records are written in plain language, free from acronyms and jargon, so they can be understood by the child, parent/carer as far as possible. If needed so as to ensure the child/family can understand and engage in the purpose and completion of the report, they are translated into their first language.	Social Worker
	Assessments, plans, records of visits and of direct work with the child include the child's voice. The way the child's voice has been gained is clearly included and any direct work with the child should be uploaded in case attachments on the child's record.	Social Worker
	Where a child's plan is changed following a review, it is updated on the child's records within 48 hours.	Social Worker

Professional Standards (taken from Social Work England)

Standard	Practice Expectations	By Who
Staff work proactively to improve children's lives. They work within the Family Safeguarding model guidelines, using motivational interviewing and family led plans. This includes a) working with children and families - as opposed to doing things 'for' or 'to' them; and b) providing colleagues with clear expectations, high support and high challenge in equal measure	All staff uphold their professional responsibility to be accountable for their own conduct, development and delivery of a high-quality service. This includes being accountable within their own roles and responsibilities, supporting and holding others to account, and seeking appropriate assistance when needed	Social Worker
	All staff promote the rights, strengths and wellbeing of children and families	Social Worker
	All staff establish and maintain the trust and confidence of children and families	Social worker
	All staff are accountable for the quality of their practice and the decisions they make	Social Worker
	All staff maintain their continuing professional development	Social Worker
	All staff act safely, respectfully and with professional integrity	Social Worker
	All staff promote ethical practice and report concerns	Social Worker

Planning the Move

A clear transition plan must be developed, setting out:

- * Reason for the move
- * Outcomes expected for the child
- * Actions, responsibilities, and timescales
- * The child must be given age-appropriate information about the move in advance.
- * Wherever possible, the child should visit the new home and meet carers/staff before moving.

Preparing the Child

- * Direct work (life story work, visual aids, social stories) must be used to prepare the child.
- * Children should be supported to ask questions and express worries.
- * Emotional support must be offered before, during, and after the move.

Involving Carers and Families

- * Current carers must be included in transition planning and given clear guidance on their role.
- * New carers must receive all relevant information about the child's history, needs, and preferences.
- * Family time arrangements should be reviewed to ensure consistency through the transition.

Education and Health Continuity

- * Moves should, wherever possible, avoid disrupting schooling. If a school move is necessary, planning must involve the Virtual School.
- * All health arrangements (GP, dentist, therapy, CAMHS) must transfer seamlessly, with no gaps in provision.

After the Move

- * The social worker must visit the child within 72 hours of the move and again within 20 working days.
- * A review meeting must be held within 28 days to assess how the child is settling and address any issues.
- * Ongoing monitoring through supervision, visits, and reviews ensures the child is safe and their needs are met.

Recording and Accountability

- * All transition plans and reviews must be recorded in the child's file.
- * Decisions must evidence how the move is in the child's best interests.
- * Managers must oversee transitions to ensure compliance with this standard.

At Swindon what we do really matters



We love 'our' Swindon. We want the best for it. We turn up each and every day to have impact, a place and people to be proud of.

At Swindon we do things right



We are accountable to our residents and ourselves to make the best decisions we can, to try new things to make Swindon thrive now and in the future.

At Swindon we make it happen together



We work together, with our communities, across the Council and with our partners to get the best we can collectively for Swindon.





