

The conduct of care proceedings – a social worker's guide

Legal Workflow

1

From LPM to the 1st hearing: Preparing and making the application, case management

Following receipt of advice and authorisation given at the 'Legal Planning Meeting' to make an application to commence public law care proceedings – the application must be lodged with and issued by the family court within **5 working days of the LPM**.

The court will issue the application after gatekeeping¹ and set the date for the 1st hearing. CAFCASS are notified and a children's guardian (CG) appointed.

A standard 'Letter of Intent to Issue' must be immediately sent or given to the parents so that they can secure legal aid to instruct a solicitor.

The social care team lawyer with custody of the case will complete a C110A application form (you should read and approve the form) and this is sent with the following social work documents (known as 'Annex Documents') –

- The Social Work Evidence Template (SWET10)
- The core assessment (single assessment) and/or any other assessments you wish to serve as supporting evidence (a family assessment by the 'Eva Armsby Family Assessment Service' EAFC or independent assessment undertaken in the pre-proceedings process)
- A genogram
- A care plan – this is usually contained within the SWET evidence template. If the children are already looked after – the LAC care plan can be submitted.
- An index of the 'Checklist Documents'

The 'Checklist Documents' can be agreed between the social work team and the social care lawyer – 'Checklist a)' documents are those you have selected as crucial supporting evidence you have relied upon in the SWET – Previous assessments,

¹ To assign a priority to the application. See the MoJ HMCTS family procedure rules – practice directions for detail on the conduct of public law proceedings - http://www.justice.gov.uk/courts/procedure-rules/family/practice_directions/pd_part_12a

judgements, Police reports etc. 'Checklist b)' documents include minutes of child protection conferences, CP, CIN and LAC plans, the 'Letter before Proceedings' etc. Only 'Checklist a)' documents are served with the application – b) documents listed in the index can be requested by parties.

A report of the most recent 'Family Group Conference (FGC)' and the resultant 'Family Plan' should also be filed if available and any completed viability assessments of family members.

The care proceedings must be concluded with 26 weeks²

The date of the issue of the care application by the family court is **"Day 1"** of the care proceedings

The social care lawyer will complete a draft 'Case Management Order (CMO)' for the first hearing. The CMO indicates the proposed court directions for the content of the proceedings – the assessments and activities required by the court to resolve the proceedings fairly.

The proposed assessments – of the parents by the EAFC, or by the allocated social worker, of any family members or connected people who have put themselves forward as alternative permanent carers of the children – will be timetabled (assigned reporting dates) to allow for a timely conclusion of the proceedings.

The proposals for assessment and the proposed interim care plan for the children will be determined and agreed at the 'initial care planning meeting' chaired by the relevant service manager.³

The social care lawyer (or the local authority's counsel if required) will also prepare a draft 'interim threshold' document which relying on the social work evidence (presented in the SWET) gives the local authority argument for why the children have been or are at risk of being significantly harmed, section 31 of the Children Act 1989⁴ - the "threshold" criteria. This document should be approved by the social work team.

The social work statement SWET, the C110A and all the other court documents are to be placed on the children's files

² This is a statutory duty – Children and Families Act 2014 – care case duration can only be varied by judicial order.

³ Head of Service agreement is required for placement of the family in a 'parent & child' residential assessment unit.

⁴ <https://www.legislation.gov.uk/ukpga/1989/41/contents>

The SWET initial template and other social work documents have to be sent to the social care lawyer within 3 working days of the LPM

The 'Case Management Hearing CMH' should take place within 12 days of the application (but not later than 18 days – a further case management hearing FCMH can be listed within 25 days). The CMH sets the timetable for the proceedings and makes the CMO. The CMO is usually agreed but there may be a dispute over the proposed assessments. The 1st hearing of the proceedings should serve as a CMH and be concerned with the case management of the application. However the 1st hearing may involve a trial and adjudication over the proposed interim plan for the children – if the local authority is proposing their removal from their parent's care.

The court must be made aware if the application is eligible for the London and Family Infant Team (LIFT) randomised controlled trial (BEST) – where the children are aged under 5 years and the plan is for their removal from their parents' care.⁵

It is important that case management is resolved and timetabled as early as possible in the proceedings. More time is then available for assessments, care planning, family finding, preparing your final evidence and plans and for any 'finding of facts' (a trial) within the 26 week timescale.

Children's Social Work Team: Workflow

1

From LPM to the 1st hearing: Preparing your evidence, care planning, protecting the children

A draft initial statement of the social worker's evidence (SWET10) will have been prepared for the LPM. This now needs to be updated and finalised. The proposals for the interim care of the children, any contact arrangements and proposals for assessments should be included in the SWET.

Preparing the statement

The statement needs to be succinct, clear and easy to read (*keep it short – 25 - 30 pages maximum!*). It should though contain all the evidence relied upon in support of the local authority's case (ie: critical events, incidents, data

⁵ A 'LIFT' eligibility pro-forma accompanies the C110A application

(child's weight, growth charts, school attendance, the testimony of the children), with sources and dates). The statement will include an analysis of why the evidence presented supports the proposed plans for the children.

Please note: Section 1.4 of the SWET – gives a only summary of the case – covering the key issues and evidence & the reason for the timing of the application. It should be very brief – 200 -300 words max.

A digest of the plan should be given and an indication of the orders sought.

Anyone reading this if they were reading nothing else in the template should have a digest of the case.

The evidence for the proposed plan & the supporting analysis should be set out in the rest of the template – do not repeat the same information.

The initial care planning meeting

An initial care planning meeting should be held, ideally before the application to the court is made, but in every case before the 'case management hearing'. The meeting is to be chaired by the relevant service manager. The allocated lawyer, the social work team should attend alongside members of the Child Placement Team, the Permanency and Adoption Team, The EAFC, the Family Group Conference (FGC) Co-ordinator and the Court Work Case Manager (CWCM). (NB: It is not a multi-agency meeting)

The meeting will determine the interim plan, contact plan and proposed assessments with report times. A draft CMO will be drawn up and circulated following the meeting.

Preparing the plan

The social worker will complete the initial care plan in time for the 1st hearing at the very latest but ideally to accompany the application to the court. If the children are at immediate risk then the application must be made immediately after the LPM and upon the court being notified of the risk the legal gatekeeping will ensure an early hearing⁶. In most cases intermediate arrangements for the protection of the children will need to be taken (frequent SW visiting, placement with a trusted family member (subject to Police (87b) checks, a trusted family member staying at the family home etc.).

⁶ If the children's safety requires their removal from their parent's care then the application must be made with the utmost urgency – on the day of the concerning incident or parental conduct. Applications can be made outside working hours. Any delay will imply a more favourable risk assessment.

The care plan can be included in the SWET along with the supporting analysis and welfare balance sheet of realistic alternative placements and care arrangements (section 7). If the children have significant special needs or multiple arrangements are being proposed for their care then separate care plans should be prepared. If the children are looked after already or by the time of the 1st hearing (by voluntary agreement under s20 CA 1989 or through the exercise of the Police's powers of protection – s46 CA 1989) the 'LAC' care plan can be filed⁷ or a plan using the LAC care plan headings (use of the traditional [pre-2013 revised PLO] LAC (29)99 chapter headings is not advised).

If the children are to be placed apart a 'together or apart' assessment giving the placement rationale should be filed – ideally a separate one but their placement apart should be at the very least be addressed in sec. 7 of the SWET.

The care plan should give the proposed family contact arrangements with a rationale. It should identify any supports or services to be provided to the placement and any transitional arrangements.

The interim care of the children

The placement must have been identified and be ready by the time of the 1st hearing. The children should be placed immediately after the hearing or in accordance with a transition plan (also filed with the court).

Arrangements should be made for an initial LAC review (within 20 working days of the children becoming LAC) and for an initial LAC medical (BAAF forms IHA-C, IHA-YP & Parental Consent Form).

A 'LAC' pack of all the relevant forms and paperwork required for the placement of a child in local authority care – s20 and medical consent forms, HA application forms, Schedule 4 template etc – will be available to social work teams.

The initial care plan and all relevant documents should be placed on the children's casefiles.

⁷ See ADCS/CAFCASS Guidance SWE12 08/2014 and *Regulation 5 (a), (b)(i) – (vii) [The care planning, placement and case review (England) regulations 2010]*

From LPM to the 1st hearing: Placement with family, friends and connected people

Placing children within their family or with people they know is usually the first option if they cannot remain in the care of their parents.

A Family Group Conference (FGC) should be held as early as possible prior to initiating proceedings to identify any alternative permanent or interim carers for the children, certainly within the pre-proceedings (PLO) process and when FGCs are held to identify family support for Child Protection plans the issue of alternative care should be aired. Families should be encouraged to nominate a single alternative carer, the one they consider best suited to be the child's permanent carer.

If the plan is for the child to be 'looked after' and placed with family members or connected people – in contrast with a 'family arrangement' where the alternative care has arisen without the involvement of the local authority or at its behest – then the child is placed under regulation 24⁸ of the Care Planning Regulations. The proposed family carers will then serve as 'family and friends' foster carers and the following conditions have to be met prior to placement:

- A preliminary 'schedule 4' pre-placement assessment has to be completed⁹
- DBS applications to be made and carer consent for medical assessment given
- An urgent Police check (using Form 87b) should be made if a recent DBS check is unavailable
- Written approval for the placement is given by the responsible service manager and the service manager for resources¹⁰

If the assessment is favourable, the checks and applications made and approval given then:

⁸ 2010 Care Planning Regulations & Children Act 1989 Guidance and Regulations Volume 2: Care Planning, Placement and Case Review, DCSF 2010 – See also Family and Friends Care: Statutory Guidance

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/288483/family-and-friends-care.pdf

⁹ Using a standard form: 'Initial viability/temporary assessment as a foster carer: connected person (reg 24/25)' Care planning, Placement & Case Review (England) Regulations 2010

¹⁰ The family carer will on their approval serve as a foster carer & the National Minimum Standards (Fostering Services (England) Regulations 2011 apply:
<https://www.gov.uk/government/publications/fostering-services-national-minimum-standards>

- A 'family and friends' fostering assessment must be completed and approved by the foster care panel within 16 weeks.
- DBS checks and a medical assessment must have been completed for submission to the panel

There is a specific Tower Hamlets 'Family and Friends Fostering Agreement' setting out the duties and responsibilities of the carer that must be signed¹¹. The carer is also upon approval entitled to a fostering allowance.

The 'family and friends' foster carer should have an existing familiarity with the children and in most cases be able to serve as their future permanent carer. In this case the carer should consider applying to be the children's Special Guardian.

A referral should be made to the Permanency and Adoption Team (PAST) for allocation of a 'family finding' social worker, for an initial 'Permanency Planning Meeting' and to identify a social worker to carry out any proposed Special Guardianship assessments. All the arrangements for the interim care of the children by a family member should be completed before the application is made if possible or at the latest before the 1st hearing (by 'day 12').

The schedule 4 assessment, Police 87B and DBS checks, medical consent forms, the fostering agreement and written service manager authorisation should be placed on the children's casefile

For any family members and connected people either identified at the FGC or nominated by the parents who wish to be alternative permanent carers of the children – a viability assessment will need to be undertaken¹². Viability assessments will need to be completed as early as possible ideally in time for the initial care planning meeting.

¹¹ There is a similar assessment agreement form – supplementary to the BAAF Form C – that can be used.

¹² The assessment needs to be rigorous covering the topics of the BAAF Form C in line with the Special Guardianship Regulations 2005 & 2016: <http://www.legislation.gov.uk/uksi/2016/111/made>
A 'Form C' template can be used.

From the LPM to the 1st hearing: Fostering for adoption, concurrent planning and dual approval

In the interest of protecting the children from the impact of changes of primary carer it is advisable to place them with alternative carers who are likely to care for them permanently. In the case of babies and infants this might be with carers who will serve as their adoptive parents¹³.

Children can be placed in the interim with approved adopters under regulation 25a¹⁴ with the agreement of the Agency Decision Maker (ADM). In this case a report must be submitted to the ADM giving details of the case and the rationale for the proposed placement and a completed Decision Sheet for the signature of the ADM (the ADM's approval is required because the decision pre-empts the later ADM decision in favour of placement for adoption and ADM approval of the children's match with their prospective adopters – as advised by the Adoption Panel).

Children can be placed with approved adopters who are also approved as foster carers. Dual approval of adopters is achieved with the approval of the foster care panel upon consideration of a fostering assessment report (Form F) or an enhanced Prospective Adopters Report (PAR) which covers all the aspects of a Form F.

Placement with approved prospective adopters in the interim should be considered for all children who are very likely to be permanently placed for adoption, for children relinquished for adoption or where older brothers and sisters have been placed for adoption and their adoptive parents would like to adopt the new sibling.

The prospects for placement of the children with approved adopters should be considered at the initial care planning meeting. Again a referral to the PAST team should be made as early as possible in the preliminary care planning process.

¹³ Anyone who wishes to adopt the children who isn't already an approved adopter would have to be an approved foster carer or a family member assessed and approved as one under reg. 24.

¹⁴ Care planning, placement & case review & fostering services regulations 2013: http://www.legislation.gov.uk/uksi/2013/984/pdfs/ukxi_20130984_en.pdf

From the case management hearing CMH to the issues resolution hearing IRH:

At the CMH the case is timetabled only to the Issues Resolution Hearing 'IRH'. The court will seek to resolve the case quickly and fairly without a trial, narrowing the issues, seeking consensus and agreement so that the case can finish at the IRH.

All the assessments and the local authority's evidence and proposed final plans for the children, the other parties responses to the local authority (LA) evidence need to have been filed and served in good time before the IRH.

There will be an advocates meeting 7 days before the IRH¹⁵(as there was before the CMH) of the parties legal representatives. The lawyers will seek to share their issues, resolve or narrow them and indicate the points of issue for judicial resolution.

If the local authority's evidence and plan is disputed, if there are disputed facts or if a determination of the facts is required (who caused injuries to the children for instance) or the validity of professional opinions must be established in order for the case to resolved then a final hearing (FH) will listed at the IRH. At the FH, the trial Judge will test the evidence, hearing the parties submissions and the cross examination of the witnesses (including the allocated social worker) and pass judgement and make final orders.

To allow a margin for a Final Hearing, the IRH should take place between the 16th and 20th weeks of the proceedings and to allow for the parents and the guardian to respond, the final evidence and plan of the local authority should be ready for filing and service between the 12th and the 16th week.

Filing times will be directed in the CMO – these are court directions, judicial orders, and must be complied with. The CMO must be placed on the case file and the social work team must adhere to the order in its care planning and casework, meeting all directed deadlines. To do otherwise is unlawful and unprofessional. There are no excuses!

¹⁵ FPR Practice directions http://www.justice.gov.uk/courts/procedure-rules/family/practice_directions/pd_part_12a

A word about bundles!

Court 'bundles' are the collected documentation for the proceedings – they include all the application forms, your statement and care plans, the expert reports, contact reports and the orders and eventually the final judgement and orders. They are a complete record of the proceedings. They should not exceed 350 pages (which is why your statement should not exceed 25 or so pages).¹⁶

The social care lawyer will maintain the bundle but you will need to furnish them with contact and other reports. You must keep on top of your case and read everything in the bundle, especially if you are to be cross-examined in court as a witness. The bundle must be put on the child's case file (or a link to it given) – it is a key record for the child in the future.

Children's Social Work Team: Workflow

2

From the case management hearing to the issues resolution hearing: assessment and care planning: preparation of the final evidence and care plan

You must prepare your evidence and determine the plan for the children's permanency in good time. Case work continues, you must observe contact sessions between the children and their parents on several occasions, you must visit any family members who are being assessed as prospective special guardians.

You should make your own assessment based on your own activity with the children and their family. Expert opinions and other assessments conducted within the proceedings, Special Guardianship (SGO) and any EAFC family assessments by colleagues or others by independent social workers (ISW) or LIFT reports¹⁷ can be analysed in the context of your own views for your final evidence.

¹⁶ Practice direction 27a https://www.justice.gov.uk/courts/procedure-rules/family/practice_directions/pd_part_27a

¹⁷ If the family are receiving intervention from the LIFT service, the care proceedings are removed from the statutory 26 week court management service track.

Your evidence can also include a record of your work direct with the children – such materials make for compelling evidence. Older children could be encouraged set out their views for the judge or write a “Dear Judge” letter, they should be given the opportunity to meet the judge and to be separately represented in the views differ from those of their guardian (CG).

Social work partnership with parents should be maintained despite the significance of the local authority (LA) application and the adversarial aspects of care proceedings¹⁸ to promote family contact, ‘life story work’, care planning and to support reunification of the children if appropriate.

Care planning meeting – week 12 - 13

The local authority’s final evidence and plans for the children will need to be ready by around week 14 for an IRH in week 16. Prior to filing another ‘care planning’ meeting is required. All the evidence that will be available to the court should be provided to the meeting, chaired by the responsible Service Manager: All parenting assessments, expert witness opinions, psychiatric and psychological assessments of the children and the parents and assessments of family members.

As with the initial care planning meeting, the allocated social worker, team and service manager (the chair), internal social workers who have prepared assessments (from EAFC, PAST), the family finding social worker, the CWCM and the social care lawyer should attend. The evidence will reviewed by the meeting and care plans determined. The rationale for the plan, the evidence relied upon, a welfare cost/benefit analysis of the options for the permanency of the children (see ‘re BS’ analysis below) will be discussed to assist with the preparation of the final evidence and plan.

The final evidence and care plan – weeks 12 - 16

The final evidence and plan presented on the final social evidence template (SWET11) in good time for quality assurance and approval. It should be sent to the team manager, service manager and the CWCM within 5 days of the filing date – it will need to be sent to the allocated lawyer 3 days before the filing date.¹⁹

¹⁸ It’s harder for them than us: <http://survivingsafeguarding.co.uk/>

¹⁹ See ‘The LBTH Protocol for the Filing of Evidence 4’ Sarah Williams

The evidence must furnish the court with a welfare analysis of the realistic placement options (See below – the “*re BS*” analysis in the adoption workflow) setting out the rationale for the proposed care plans and orders.

The plan must set out the permanence provisions for the children²⁰, proposed placements, the proposed contact plan, supports and services to be offered to the child²¹. As with the initial evidence and interim plan this can be provided within the SWET11 template but if the child’s needs are considerable or if the court so orders separate plans may be necessary. Here again the LAC care plan can be filed or the LAC care headings used.²²

The 2nd LAC Review – the permanency provisions of the care plan²³

The first LAC review is held within 20 working days of the start of the children being ‘looked after’ by the local authority and the second within 3 months (91 days). Care planning, and the permanency provisions for the children, is a statutory responsibility of the reviews²⁴. A permanency plan for the children should be indicated at least by the second review²⁵. It may then be necessary to bring forward the 2nd LAC review so that it has fulfilled its duties before filing the final care plan – at around 2 months after the first.

The children if LAC should have an initial LAC health assessment (within 28 days – see above). The allocated social worker should ensure that the birth of the child has been registered and that a birth certificate is obtained and placed on file (this is necessary for a placement order application). An application for a passport for the child should be made.

²⁰ The Children and Families Act 2014 sec 15

<http://www.legislation.gov.uk/ukpga/2014/6/section/15/enacted>

²¹ Children and Social Work Act 2017 sec 8

<http://www.legislation.gov.uk/ukpga/2017/16/section/8/enacted>

²² See ADCS/CAFCASS Guidance SWE12 08/2014 and *Regulation 5 (a), (b)(i) – (vii) [The care planning, placement and case review (England) regulations 2010]*

²³ The Children and Families Act 2014 part 2, s15 (1)(3A),(3B)

²⁴ “The responsible authority must not make any significant change to [a child’s] care plan unless the proposed change has first been considered at a review of [the child’s] case, unless this is not reasonably practicable.” Reg 32(2) ‘Care Planning, Placement and Case Review (England) Regulations 2010. See also the ‘IRO’s Handbook’ https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/337568/iro_statutory_guidance_iros_and_las_march_2010_tagged.pdf

²⁵ As with the care planning meeting the review must have the benefits of the all the evidence in reaching its decision

International Factors

Tower Hamlets is a diverse, multicultural community and assessments may need to be made of family members overseas and consideration given to their placement outside the jurisdiction.²⁶

Children who become LAC (or in care proceedings are likely to become so) who are citizens of other countries have consular rights under the Vienna Convention 1963 having been detained by a foreign government. The LA is obliged to notify the relevant consulate²⁷

Alternative Care: Family, Friends and Connected People

2

Planning for permanent placement with a family member

If the children are cared for by family and friends foster carers (under regulation 24 – see above) then their fostering assessment with supporting DBS checks and health assessment must have been completed and presented to the fostering panel by week 16. With the written agreement of the ADM an 8 week extension is available exceptionally if there is good reason for the delay and the assessment must be considered by the panel by the 24th week.

Special Guardianship

If the children cannot return to their parent's care they can live with alternative carers from their network of family and friends under a Special Guardianship Order (SGO)²⁸. If the thorough screening or 'viability' assessment undertaken by the allocated social worker was positive then the prospective special guardian must undergo a special guardianship assessment. These are usually undertaken by social workers from the PAST team (the child's social worker

²⁶ See LB Tower Hamlets v D & others [2014] EWHC 3901

²⁷ See Re E [2014] EWHC 6 – Judgement by Sir James Munby, President of the Family Division - <http://www.familylawweek.co.uk/site.aspx?i=ed126781> - also - <http://childprotectionresource.online/tag/vienna-convention/>

²⁸ The Adoption and Children Act 2002 amended the Children Act 1989 to create this provision: <http://www.legislation.gov.uk/ukpga/2002/38/section/115>

prepares parts 1 – 3 [Part A for the BAAF Form C] about the children and their needs). A support plan must be prepared and a financial assessment undertaken. The special guardian may be entitled to an allowance. If the court makes the order the applicant gains parental responsibility for the children.

The completed SGO assessments must be ready for the care planning meeting and before the final completion of the Child Permanency Report (see below) and ADM decision (ideally by week 11). The CMO will ensure that they are filed before the final evidence.

The SGO support plan and the agreed financial offer, alongside successful DBS and medical checks, must be filed before the IRH if the court is to make the SGO.

Interim 'regulation 24' family and friends foster carers who want to be the children's permanent carers should be nominated as 'special guardians' so that the children can leave care. The BAAF Connected Person/Family and Friends Form C assessment for submission to the fostering panel (within 16 weeks) can be used for SGO assessment.²⁹

Adoption Planning

2

Placing the children for adoption

If the plan is for the child to be adopted then a 'Child Permanency Report' (CPR) must be completed³⁰. The CPR is a multi-purpose document that serves as a record for the child³¹, as a legal report for the placement order application and the ADM decision and as a 'matching' report and a profile and history of the child for family finding, prospective adopters and the Adoption Panel.

CPRs should be prepared for children in proceedings aged 1 to 6 years. Concurrent planning for adoption should take place even if placement with alternative family carers or even if reunification is still under consideration.

²⁹ In Tower Hamlets the Form C is now used for SGOs

³⁰ In Tower Hamlets we use a BAAF CPR that doubles as an 'Annex B' or 'Part 14' report that is filed with the court in support of the application for the placement order – The Family Procedure Rules 2010, Part 14, rule 14.11(3) and Practice Direction 14C - MoJ.
https://www.justice.gov.uk/courts/procedure-rules/family/practice_directions/pd_part_14c

³¹ Each child should have their own CPR

The ADM must approve the plan if it is for the child's adoption and a placement order³² is to be applied for.³³ To make her decision the ADM must consider the following documents –

- The completed and checked CPR for each child
- All the available evidence: All family & parenting assessments, expert opinion, SGO assessments etc,
- Up to date complete health assessments of the children³⁴ and the medical advisors summary
- Legal advice from the social care lawyer
- The minutes of the 'Care Planning Meeting'³⁵
- The permanency plan approved at the 2nd LAC review
- A draft of the social worker's final evidence and care plan if available – usually this is finalised after the ADM decision – an analysis of the evidence and the rational for the plan is given in the CPR (sec C)

The CPR must be ready in time and have been read and amended for quality assurance by the team manager and service manager and finally by the Agency Adoption Advisor. Working towards an IRH in weeks 16 to 20, the CPR should be completed and submitted to the team and service managers by week 13 for quality assurance by the Adoption Advisor and submission to the ADM in week 14. With the care planning meeting held in weeks 12/13 an ADM decision can be made in week 15³⁶.

When adoption is the preferred plan, the final evidence should offer an analysis supportive of the plan that addresses the expanded welfare checklist of the Adoption and Children Act 2002³⁷ and considers the lifelong impact of the child ceasing to be a part of their family and analyses the benefits of their relationships with family and friends, the latter's views, and the likelihood and impact of losing them if adopted.

Your argument should include a cost/benefit welfare analysis of the different placement options for each child weighing up the value of each in relation to

³² Adoption and Children Act 2002 s21

<http://www.legislation.gov.uk/ukpga/2002/38/section/21>

³³ Children Act 1989: Guidance & Regulations Vol. 2, Care Planning, Placement & Case Review Regulations: 2015. Statutory Guidance on Adoption – 'National Minimum Standards': July 2014

³⁴ LAC Full HA BAAF forms IHA – C, PH (parent's health), M (obstetric) & RHA (Review) if appropriate – the assessments should be current – within the last 6 months

³⁵ The ADM is advised by the care planning meeting

³⁶ The ADM will need time to consider in detail all the reports and advice.

³⁷ ACA 2002 sec 1 (4) (a)-(f) – with particular reference to (c) & (f) i,ii,iii:
<http://www.legislation.gov.uk/ukpga/2002/38/section/1>

the welfare checklist (ACA 2002) to establish that the child's adoption is necessary in relation to its lifelong welfare – known as "the *re BS*" analysis³⁸.

This analysis needs to be presented in the CPR (sections 32, 33, 34 & C) for consideration by the ADM.

The final evidence must be reviewed and quality assured by the team and service manager, sent to the CWCM and the completed, checked draft should be sent to the allocated lawyer 3 days before the filing date.

The final evidence and plan, the CPR, ADM decision and all the supporting evidence and assessments must be placed on the child's casefile.

Family Finding

Family finding should not wait until the making of final orders. Endeavours should be made to find a permanent family for the children from the outset of the proceedings.

The 'family finding' social worker from may be directed to file a statement reporting on progress made in identifying a permanent family. If not the allocated social worker would need to cover this in their final evidence.

Long term foster care

If the plan for the children is for them to permanently reside with a foster family then foster parents will need to be identified that 'match' the children in relation to their background and ability to meet the children's needs. The 'match' will need to be approved by the fostering panel (without the consent of the parents this would take place after the making of final orders).

The 'family finding' social worker from may be directed to file a statement reporting on progress made in identifying a permanent family. If not the allocated social worker would need to cover this in their final evidence.

The final orders and the Judgement (a transcript if available or counsel's record) should be placed on the children's casefiles.

³⁸ The legal test for adoption: See *re B* [2013] UKSC 33, *re BS* [2013] EWCA CIV 1146 & *re R* [2014] EWCA CIV 1625 (the latter was a tower hamlets case & the judgement of the President, Sir James Munby, is worth reading to understand what is expected of LA evidence for the adoption of a child).

