3 IDENTIFICATION & ASSESSMENT OF NEED

3.1 POINT OF ENTRY

3.1.1 The Referral & Assessment (R&A) Team is the point of entry to Children's Services (The exception to which is a small number of referrals received by the Children's Disability Team via the Oak House multi-agency assessment process).

3.1.2 Children's Services Centre reception staff will receive callers by telephone, direct call or postal referral and will direct them through to the team clerk, who depending on availability will pass on to the practitioner on duty in the R&A Team for ring back; direct contact or follow-up.

3.1.3 All front-line staff must be trained to pass all calls about the safety of children through to the appropriate duty team without delay, having first recorded the name of the child, her or his address, and the nature of the concern.

3.1.4 If the call cannot be put through immediately, further details from the referrer must be sought (including their name, address and contact number). The information must then be passed verbally and in writing to the duty team within the hour.

3.1.5 It is the responsibility of the R&A practitioner to determine whether:

- Following advice / consultation, this contact meets the Children's Service eligibility criteria or not
- To accept it as a referral request for services with an assigned Eligibility Criteria Tier and Priority (see 2.2) in response to the presenting risks or needs
- The information gathered includes child's name, address, age, ethnicity and name of her/his primary carer, GP, and the name of the child's school if s/he is of school age. Every effort should be made to complete gaps in this information
- Ensure that the referrer is afforded fair access to our and other services

3.2 CONTACT (ADVICE / CONSULTATION) AND REFERRALS

REFERRALS

3.2.1 A distinction must be drawn between referrals and contacts (advice / consultations), which can be described as reception, or initial contacts. Not all initial contacts will go on to become a referral. A request / enquiry for information / advice /consultation which is dealt with, and which does not meet the 1 – 4 Eligibility Tier Criteria, and does not require any follow up action should not be entered as a referral.

3.2.2 Where more than one person has contacted Children's Services, on or around the same time and about the same child only one referral will be counted.

CONTACTS (ADVICE / CONSULTATION) REFERRALS FROM OTHER AGENCIES

3.2.3 Other agencies may make contact with Children's Services when a child appears to be in need and the referring agency is informing you that it believes it cannot meet the need, or it is not appropriate for them to do so.

3.2.4 Upon contact the R&A practitioner will need to determine whether there is a presenting risk or need and how they meet the Children's Service Eligibility Criteria Tiers, and whether this is a contact, which will or will not result in a referral.

3.2.5 If a Children's Services referral process is to commence as a child in need Tier category 1 – 4, then the case becomes a formal referral and appropriate action needs to take place including:

- Prioritisation of the referral 1 – 4 see 2.2
- Fact finding around the referral
- Communicating with relevant contacts and agencies
- Completing the Referral and Initial Information Record
- The Team Manager must record:
    - What action is required to be taken for each child
    - Who is responsible for taking that action
    - When the action must be completed
    - If there is a decision for No Further Action (NFA) – the reason must be recorded
- Logging the case onto the ACCIS system. (Social Services electronic database)

REFERRAL PROCESS

3.2.6 From point of entry and agreement that it is a referral for Children's Services:

- The Social Worker must record the concerns / needs, discussions about the child, decisions made and reasons for those decisions
- The Social Worker must commence or update a chronology
- Agreement must be made with the referrer as to what the child and parents will be told, by whom and when
- All referrals must be acknowledged in writing within 1 working day
- Following the receipt of the referral, the Social Worker and manager should decide on the next course of action within 1 working day
- The Team Manager must ensure further action details, timescales, person responsible and decision to take no further action is recorded on the Referral and Initial Information Record
- In the case where significant safeguarding issues are involved (Priority 1) immediate action must commence and a practitioner be allocated to investigate and safeguard the child. In these cases, full reference must be made to the safeguarding children procedures
- There must be feedback to referrers on the outcome of the referral, undertaken in a way that is consistent with respecting confidentiality, especially where the referral has been received from a member of the public

3.3 ASSESSMENT

3.3.1 Children referred to Children's Services who meet the Eligibility Tier Criteria, as a child in need under s17 Children Act 1989 must receive a needs led assessment undertaken by an allocated worker. The name of the allocated worker must be logged on ACCISS (Social Services electronic database).

3.3.2 A chronology must be started on all allocated childcare cases see 3.4.

3.3.3 The assessments process will be one of two types:

Initial Assessments

3.3.4 An Initial Assessment (Form AF-IA) must be undertaken where a decision is made to gather more information and/or the risk or needs in the case appear low/moderate and are evident and amenable to a routine package of care and support services. It should record:

- Whether the child is a child in need
- Eligibility Tier and Case Priority
- Nature of the services required
- From where and within what timescales
- Whether a Core Assessment is required

Core Assessments

3.3.5 A Core Assessment (Form AF-CA) must be undertaken where the needs / risks in the case are significant / critical and multifaceted and are likely to require an intensive package of care or support.

3.3.6 The decision to undertake a Core Assessment should be made if the following criteria apply:

- The child, under Eligibility Criteria Tier 3, is likely to need additional support, guidance or intervention to prevent a significant impairment to their health, development or life chances, or
- The child, under Eligibility Criteria Tier 4, is likely to have safety needs where services are required to promote their protection, i.e., they are likely to be at risk of, or, have experienced a breakdown in their care arrangements and are facing a dislocated, insecure and unattached childhood, or
- The child, under Eligibility Criteria Tier 4, exhibits behaviour that is likely to be unsafe, dangerous to themselves or others, or the child has committed a serious crime

3.3.7 A Core Assessment must always be started where s47 enquiries (Single or joint - child protection) are initiated, following a planned strategy, or if consideration is being given to looking after a child.

3.3.8 Documentation according to Government guidance must be followed to support both forms of assessment process and conducted according to the 3 inter-related domains of: the child's developmental needs, parenting capacity & family and environmental factors.

3.3.9 With either level of assessment the practitioner is expected to engage relevant professions to participate actively in the process so as to:

- Reach an understanding of the current and future needs and risks to the child
- Make judgements about what actions, if any, should be taken

3.3.10 Following the decision to undertake an assessment – **IT IS ESSENTIAL THAT THE CHILD IS SEEN AND SPOKEN TO**, preferably alone.

3.3.11 Either assessment process may result in a revised categorisation of eligibility and priority, where appropriate, and decisions on service responses. This may be:

- No further action
- Continued services from partner agencies, or
- A plan of Children's Services intervention either alone or in collaboration with agency partners

3.3.12 The Initial Assessment, for all children who meet the eligibility criteria has a requirement and Government target to be completed within 7 working days of referral.

3.3.13 A Core Assessment for those children requiring it has a requirement and Government target to be completed within a further 35 working days.

3.3.14 Feedback must be given to referring agencies on the outcome of assessment using standard letter SL1.

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3.3.15 At any stage should there be a suspicion or allegation about a child's maltreatment and/or concern that the child may be, or is likely to, suffer significant harm there must be a Strategy Discussion and interagency action in accordance with the guidance in 'Working Together to Safeguard Children 1999', and the Isle of Wight Child Protection Procedures.

3.3.16 The s47 Enquiry and Assessment Record should be used to collect and analyse information from the s47 enquiries and should be completed within 24 hours unless there are exceptional circumstances and deferred action has been agreed as part of the Strategy Discussion.

CORE ASSESSMENT - SUMMARY & ANALYSIS

3.3.17 Research, the findings of Inquiry Reports and Social Services Inspectorate (SSI) inspections have frequently highlighted weaknesses in the area of assessment. A great deal of time and effort goes into the information gathering stage. This results in an assessment that focuses on describing what is happening.

3.3.18 Often less attention is given to the analysis of the information gathered. Analysis takes the assessment process beyond surface considerations and explores why particular strengths and difficulties are present. It is the relationship and origin of these factors which will inform the implications for the child and their family as well as decisions to be made on the types of services which would best meet the needs and reduce the risks.

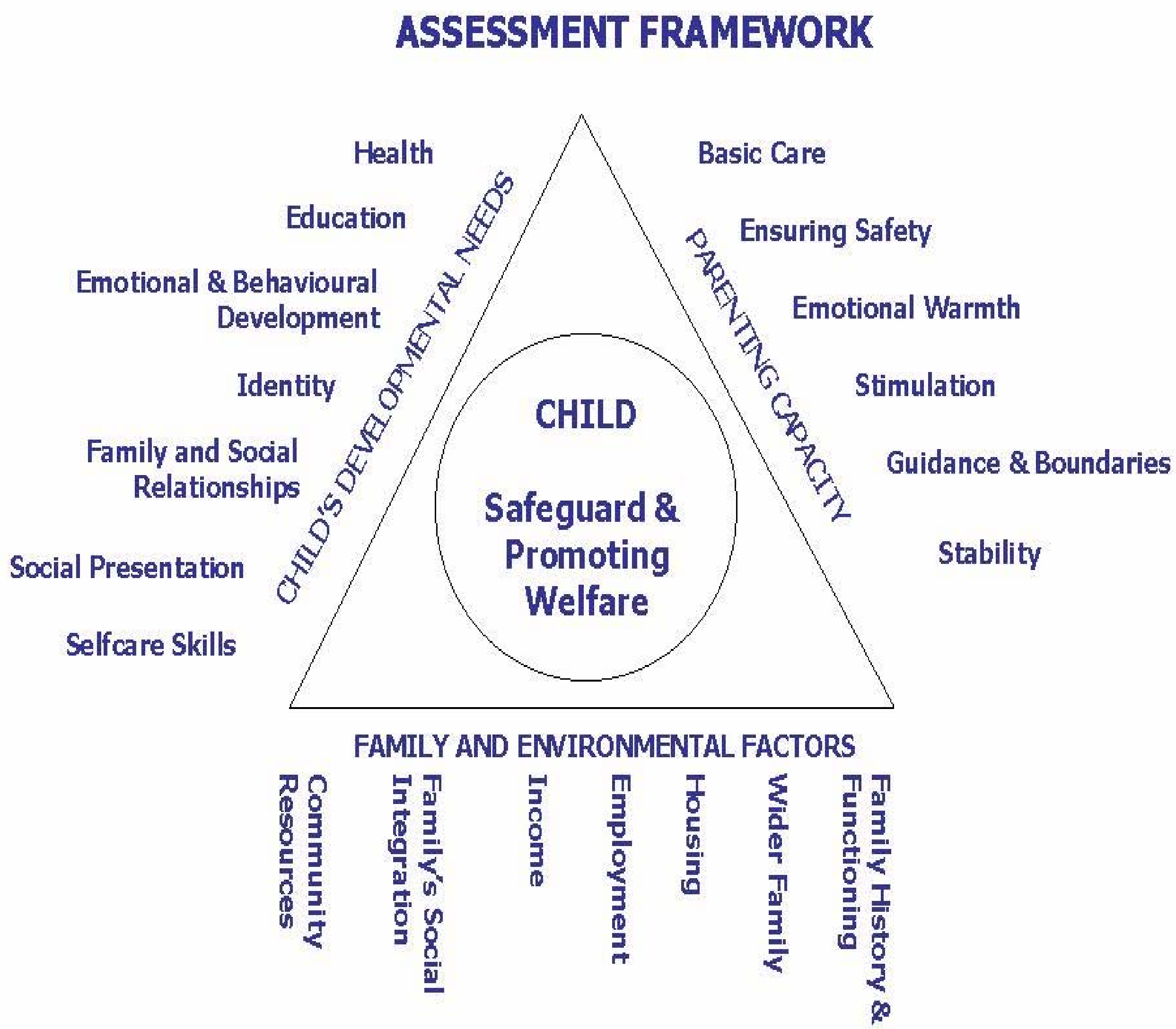
Summary

3.3.19 The second part of the Core Assessment record starts with a summary of the needs, strengths, and difficulties identified in each of the domains. Children, young people and parents/carers are asked for their views. This is important, as it is an opportunity for them to contribute to the assessment summary. Where possible practitioners must encourage and enable these contributions to be obtained and recorded.

Analysis

3.3.20 The next section of the Core Assessment is for practitioners to analyse the significance and consequences of the needs, strengths and difficulties identified in the assessment.

3.3.21 This is a key stage in the assessment process and practitioners should consider the inter-relationship between each of the domains of the Framework for Assessment of Children in Need and their Families.



3.3.22 The use of a list of key protective and stress factors in each domain can be helpful, together with indications of how they relate to those identified in other domains.

3.3.23 Strengths as well as difficulties need to be identified; parental and family strengths should be built on and used to inform the plan. When analysing the information gathered, practitioners should also evaluate the impact on the child and family of any services already provided. They should ensure that the influence of culture and lifestyle is included the impact of racism or discrimination.

3.3.24 Children with disabilities should receive access to the same assessment, and services as a child without a disability.

3.4 CHRONOLOGIES

3.4.1 It is essential that practitioners consider all the events and changes in a chronology to identify patterns and the relationship between events.

3.4.2 A chronology can be a useful way of gaining an overview of events in a child / young person's life. It should be used as an analytic tool to help understand the impact, immediate and cumulative, of events and changes in the child / young person's developmental progress.

3.4.3 It is important for the information obtained from written records to be discussed with the family. This will enable the accuracy of information to be checked and an understanding gained of the child / young person's and family's perception of events. Other agencies are also an important source of information and it is important that permission is obtained from the family before they are contacted.

3.4.4 In some circumstances, consent may not be possible or desirable but the safety and welfare of the child dictates that the information should be shared. It is important that the decision not to seek permission from the parents/carers is fully recorded with the reasons.

3.4.5 Reference should be made to the Isle of Wight Area Child Protection Committee (ACPC) Information Sharing Protocol.

USE OF A CHRONOLOGY

3.4.6 A chronology must be started on all allocated child care cases and updated on all existing open cases.

3.4.7 The chronology must be filed in the front section of the main social work file.

3.4.8 The chronology must contain the following information:

- Changes in the household composition
- Changes in address
- Beginning and end of a looked after period
- Change of placement during a looked after period
- Beginning and end of period on the Child Protection Register
- Any other incident or change of circumstances

3.4.9 If a change of placement is being recorded, the type of placement and the reasons also need to be recorded.

3.4.10 It is essential that the outcome and the impact are recorded with each change.

3.4.11 Chronologies must be recorded on the following forms:

- SWC – Social Work Chronology
- HC - Health Chronology
- EC – Education Chronology

3.5 PLANS

3.5.1 Each child in need for whom services are to be provided must have a written plan, which records the objectives and the actions which are to be achieved to ensure that the all the child's identified needs are responded to appropriately and in a timely manner through :

- Identifying the objectives of future work with the child and family and intended outcomes
- Recording how the objectives are to be achieved, the actions of Children's Services practitioners, other agency contributions and the child and family members together with the record of the agreement of the parties to the plan
- Specifying the services to be provided (from Children's Services and other agencies)

3.5.2 The objectives of any plan should be **SMART: S**-imple, **M**-easureable, **A**-chievable, **R**-ealistic and **T**-ime limited.

3.5.3 Copies of the plan must be given to the child / parents / carers, and any teams or other professionals involved in providing services. This action and the date it was undertaken must be recorded on the plan.

3.5.4 For children who are looked after or those who are placed on the Child Protection Register, their planning documentation will be governed by additional procedures (See 6.13.2).

3.5.5 Plans for children in need who are neither looked after or on the Child Protection Register must be recorded on form AF-CIN Assessment Framework – Plan for use with a Child in Need Case.

3.5.6 Each plan must contain a date at which the overall plan will be reviewed.

3.6 REVIEWS

3.6.1 The purpose of review is to:

- Ensure that the actions proposed in the plan have taken place and that agencies are meeting the needs of the child

- Ensure that the objectives for the child in the plan are still relevant
- Make decisions about future actions with the case

3.6.2 The Child Protection Co-ordinator will review through the process of Child Protection Review Case Conferences children placed on the Child Protection Register within the prescribed time period.

3.6.3 An Independent Reviewing Officer will undertake the Statutory Reviews for looked after children within the prescribed time period – see 6.15.

3.6.4 For children in need a review date must be documented on the plan and should not exceed a 6-month interval.

3.6.5 It must normally be undertaken by the Team Manager where a case is open and allocated to a specific Children's Services team member.

3.6.6 The review should include the child, family members and other agencies when appropriate.

3.6.7 Actions arising from the review including modifications to the current plan should be recorded on ACCISS.

3.6.8 If new events or concerns arise during the life of a child in need plan or at a review, consideration will need to be given to whether a re-assessment is needed, rather than a modification to the existing plan.

3.7 CASE TRANSFER PROTOCOL

3.7.1 The purpose of this transfer protocol is to ensure cases are facilitated to the appropriate designated teams without delay and with priority status of the case identified at an early point of engagement with Children's Services.

3.7.2 With the introduction of SWIFT 'going live' from 15th November 2004 and with the changed remit of the Referral & Assessment team, the need for a clear structured process that captures Team Manager accountability for transferring cases is essential.

3.7.3 The following transfer process came into effect from 13th September 2004:

3.7.4 The Referral & Assessment team will hold cases for the first 7 working days (unless a case is going to Initial Child Protection Case Conference in which case R and A will hold until conference).

3.7.5 A transfer meeting will be held every week on an agreed date by all managers.

3.7.6 It is expected Team Managers from Referral & Assessment, Children & Family Community and Family Resource Service will attend on every occasion. In their absence, their deputy will attend. In the absence of the Team Manager or deputy, a senior practitioner will attend.

3.7.7 If no manager or representative is able to attend then the transfer will go ahead and a Referral & Assessment manager will notify the receiving manager.

3.7.8 An admin worker, provided from CSC frontline teams, will attend the transfer meeting and transfer the ‘receiving’ manager only onto SWIFT at the meeting.

3.7.9 A letter must be sent from the meeting advising families of the change of team and that a Social Worker will be contacting them from the new team within 7 days.

3.7.10 This will apply to cases being transferred from R&A team only into other teams.

3.7.11 Cases transferring between other teams will require the face to face introduction to families between Social Workers.

3.7.12 Allocation of Social Worker or pending the case will be the remit of the receiving Team Manager.

3.7.13 At the transfer meeting other essential issues must be discussed in relation to the transferring of cases. These will include:

- Whether there has been, or there is, an on-going complaint. If a complaint is on-going then the complaint responsibility remains with the transferring manager. If a complaint has been resolved the receiving manager should be made aware of what the complaint was, what the issues were and how the complaint was resolved, or if any issues remain unresolved
- If a case being transferred requires an Initial Child Protection Case Conference, the transferring manager must advise CP admin and arrange a Child Protection Case Conference and invite attendees including the receiving manager and Social Worker. The receiving manager must advise CP admin of the named newly allocated Social Worker before the case conference takes place

- If a case involves a looked after child the receiving manager must receive from the transferring manager a set date of initial/review LAC Meeting, Permanency Planning Meeting date and set date for PEP Review

3.7.14 This process is subject to quarterly review.