

**CHILDREN
& FAMILIES**

Children and Families Service Practice Standards

June 2026



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Hackney Children and Families Service Practice Standards

At a Glance: Timescales for Key Tasks

MASH	
Initial decision upon receipt of a new contact	Usually within 2 hours of receipt, but always within 24 hours
Red (RAG) rated social care screening	Within 4 hours of receipt
Amber (RAG) rated social care screening	Within 48 hours of receipt
Green (RAG) rated social care screening	Within 72 hours of receipt
Responding to information requests	Within 10 days of receipt

Family Help Assessment	
Allocation record completed on Mosaic	Within a maximum 72 hours of allocation
Visit to a child	First visit within 5 working days of allocation and then at a minimum of every 15 working days during the assessment period
Supervision of Family Help Assessment, including review of allocation record	Within 20 working days of allocation
Family Help Assessment completed and sent to Team Manager	Within 35 days of allocation
Family Help Assessment to be signed off by Team Manager	Within 40 days of allocation (any extension to be reviewed by Service Manager and case noted on file)

Family Help Planning & Review	
Family Help Initial Meeting, held face-to-face	Within 15 working days of the completion of the Family Help Assessment
Visit to a child supported through a Family Help Plan	Minimum of every 20 working days
Family Help Review Meetings	A minimum of every 12 weeks from the Initial Meeting until closure
Family Help Plan reviewed by Service Manager	After plan has been in place for 6 and 9 months
Family Help Assessment updated for every child supported through a Family Help Plan	A minimum of every 12 months
Family Help Plan reviewed by Head of Service	After plan has been in place for 16 months

Section 47 and Child Protection Conferences

Strategy Discussion	Usually within 24 hours of referral, incident or accumulation of concern, depending on risk
Visit to a child following decision to initiate a Section 47	Within 24 hours
Completion of a Section 47 investigation	Within 15 working days
Initial Child Protection Conference (ICPC)	Within 15 working days of the Strategy Discussion that agreed to initiate the Section 47 investigation
Report to the ICPC shared with the family and the Child Protection Lead	At least 2 working days prior to the conference
Core Group Meeting, face-to-face unless agreed by a Service Manager	First meeting within 10 working days of the ICPC and thereafter a minimum of 6 weekly (30 working days)
Visit to a child support through a Child Protection Plan	Minimum frequency of 10 working days
Chronology of significant events maintained and updated	Minimum every 6 months, and at any significant event
Review Child Protection Conference (RCPC)	Within 3 months of the ICPC and at a minimum of 6 monthly intervals thereafter
Report to the RCPC shared with the Team Manager and Child Protection Lead for review and approval	At least 10 working days prior to the conference
Report to the RCPC shared with the child and family and their views recorded	At least 5 working days prior to the conference

Missing Children

Strategy to locate a missing child agreed with Police Missing Persons	Within 24 hours of child going missing
Missing Child Discussion	For any child missing for more than 3 days (72 hours)
Completion of a Need to Know Briefing using relevant Mosaic work step	For any child missing for more than 10 days
Missing Child Record completed and child offered a return home interview	Within 72 hours of child returning after a missing episode

Pre-Proceedings and Care Proceedings

Letter of intent to parents or carers following agreement to enter Pre-Proceedings	Within 5 working days of agreement at the Children's Resource Panel
Legal Tracker meeting held after Pre-Proceedings or Care Proceedings have been agreed	Within 5 working days of agreement at the Children's Resource Panel
Booking a Permanency Planning Meeting	To take place following the first Case Management Hearing (CMH), or within 4 weeks of the initial Public Law Outline (PLO), with additional PPMs arranged as needed
Review Pre-Proceedings Meetings	At intervals of a maximum of 6 weeks, unless child is unborn
Completion of Pre-Proceedings process	No longer than the third Pre-Proceedings Review Meeting (18 weeks), unless child is unborn
Application to Court following decision within the Pre-Proceedings process to initiate care proceedings	No longer than 10 working days of the decision

Supervision Orders

Visits to a child who is the subject of a Supervision Order	Every 10 working days for the first 3 months, then a decision is made by the Service Manager at the 3-month review as to whether visits can reduce to every 20 working days
Network Meetings to review the Supervision Order	Every 6 weeks for the first 3 months, then a decision is made by the Service Manager at the 3-month review as to whether the meetings can reduce to every 12 weeks
Service Manager reviews the progress of the Supervision Order	After the Supervision Order has been in place for 3 months and 9 months

Children Looked After	
Settling In Meeting	No later than 5 working days after the child moves to their new care arrangement
Visit to child who becomes looked after, experiences a change in carer or where any significant incident occurs	The same day, and again within one week
Visits to children looked after under an Interim Care Order or Section 20	A minimum frequency of 4 weekly (20 days) until transfer to the Corporate Parenting Service
First Looked after Review	Within 20 working days of a child entering care
Referral for an initial health assessment for a newly looked after child	Within 24 hours of the child entering care
Where age appropriate, first Personal Education Plan (PEP) meeting for a newly looked after child	Within 20 working days of the child entering care
Report to the Looked After Review shared with the child where appropriate, their carer, their parents (where appropriate) and submitted to the Independent Chair	At least 5 days prior to the review
Completion of a Pathway Plan for a 16 or 17-year-old looked after child	Before the child's 16th birthday, reviewed at least every 6 months

The Aims and Purpose of our Practice Standards

These practice standards have been developed to ensure that our organisational values are reflected in all aspects of our work with children and families.

They are intended to support the delivery of a confident professional, and respectful service. One that always places children at the centre of everything that it does, and is committed to continually improving the work we do for the children and families in our community.

As a service we place a high value on the professional expertise of our practitioners and these standards should not be seen as replacing sound professional judgements.

There may be times when the needs and situation of a particular child require us to take actions that are not consistent with these standards. These situations should be rare and in all instances where a decision is made not to act in line with these standards, line manager agreement must be sought and the decision and rationale for this should be clearly recorded.

These Practice Standards are designed to provide:

- A shared understanding of our roles and responsibilities, as practitioners and managers.
- Consistency in our approach to practice to ensure that we deliver high-quality professional services to children and families.
- Standards against which we can hold ourselves and each other to account.
- Clarity about our basic expectations of practice and management.
- An agreed set of standards against which we can quality assure ourselves and measure performance.

These practice standards aim to set out our minimum expectations of practice in key areas, they are not intended to be fully comprehensive and should be read in conjunction with our [policies and procedures](#).



‘STAR’ Our Practice Model

- We recognise that children and families in Hackney are part of a wider set of systems and relationships
- We think about what’s happened to people, not what’s ‘wrong’ with them – we seek to build trust, maximise psychological safety and empower children and families
- We work through relationships to address inequities, including racism, and seek to dismantle systems of whiteness
- We do this by being curious, compassionate, collaborative and reflexive, centring the voices of our children and families
- We engender strengths based values and behaviours in our workforce and practice
- We centre human rights to create change in the wider systems that affect our children and families

Systemic

To be systemic is to recognise that we are all part of wider systems and that these impact upon family’s experiences and function and their relationship to the support that we may offer. We focus on relationships (families, networks and communities) through applying curiosity about lives, contexts and experiences. We appreciate that there are multiple voices and truths. We focus on language and that this creates meanings and narratives. We understand power and how this impacts on our interactions. We are reflective and reflexive about what we bring to relationships and interactions.

Trauma-informed

To be trauma informed is to purposefully consider psychological safety and wellbeing. We consider the impact that individual and organisational traumatic experiences can have on children, families, communities and colleagues. We seek to understand what has happened, for example the trauma that has led to a particular behaviour or presentation, rather than simply focusing on the behaviour itself. Kindness and compassion is central to being trauma informed.

Anti-Racist

To be anti-racist is to understand that ‘race’ is a social construct created to subjugate Black and Global Majority peoples. Racism is structural and institutional and leads to both everyday experiences of racism and disproportionate outcomes. To be anti-racist is to be proactive in thought and action, not being comfortable with systems of whiteness and constantly challenging oneself and others.

Our Anti-Racism Statement

Hackney's Children and Education Directorate is committed to eradicating systemic racism, inequality and injustice throughout our work. We recognise, however, that being truly anti-racist goes beyond 'not tolerating' racism. It requires us to acknowledge the impact of existing and systemic racism in all its forms. Being proactive in tackling existing systems and structures that perpetuate and embed racism in our profession, organisation, and the wider community.

This means that anti-racism forms a foundation that underpins our practice. In applying our antiracist principles in our interactions and decision-making processes, we actively demand the same from our partners.

We are committed to calling out racism, anti-semitism, islamophobia, and all forms of discrimination, exclusionary behaviours and microaggressions, ensuring that they are addressed at all levels and ensuring that children, their families, and the workforce are listened to, supported and valued.

We will work to ensure that all voices are represented and heard and that our workforce reflects the diverse community we serve. By actively working towards anti-racism, we can create a better future for everyone.

Additionally, we will actively work with schools and settings to ensure children's cultural identity is reflected through a diverse and insightful curriculum, underpinned by culturally appropriate teaching resources that support anti-racist interactions and decision-making with pupils, parents/carers, and staff.

We will challenge the harm and impact of racism on our staff and children and families that we work with, acknowledging that experiences of racism can differ between Black and global majority ethnic groups.

We are committed to providing support to colleagues who experience work-based racism, exclusionary behaviours and microaggressions; and strive to ensure that our workforce adequately reflects the community that we serve.

These Practice Standards should be read in conjunction with our [Anti-Racist Practice Standards](#).



Our Core Practice Principles

The child's daily lived experiences, wishes and feelings are at the centre of our work. We know their views about what might make life better for them. They know the reasons for our involvement and our plan of support for them.

Our core values are driven by systemic, attachment-aware, trauma-informed principles. We work collaboratively with children and families who are understood as part of a wider set of systems and relationships.

Assessments of need, harm and risk, and capacity to change take full account of historic patterns. Past events inform current and future planning.

The strengths and protective factors in a child's life are recognised and built upon.

The issues a child and family are facing are considered in the context of their identity, history, relationships, and experiences (including social, financial, and environmental factors), as well as the support they have available to them.

[Intervention goals are set in collaboration with the child and family, with a focus on what needs to change in order to reduce risk and improve outcomes for the child.](#)

We use a contextual safeguarding approach to understand and respond to children's experiences of significant harm beyond their families, recognising that the different relationships they form in their neighbourhoods, schools and online can feature violence and abuse.

Interventions are offered in line with what we know works, to support the change we want to see and reflect a 'doing with' rather than a 'doing to' approach.

Where the child is a victim of domestic abuse, we use a [domestic-abuse-informed, perpetrator-pattern-based approach](#), in line with the [Safe and Together model](#), in order to improve safety and child and family functioning.

Timescales for achieving change are set in line with the level of concern and the child's age and stage of development. Appropriate action is taken if timescales are not met.

Any escalation of concern is responded to with timely decision-making about the most appropriate next steps.

The Senior Management Team has a clear line of sight on practice where there are matters of high risk that relate directly to the child and/or family. These children are brought to the attention of senior managers via the Need to Know briefing process, during which the Director will add comments and any additional actions required.

The [language we use](#) when speaking to children, young people, their families, and carers will be considerate and respectful. For example, We will not talk about children as 'cases' or where they live as 'placements' – we talk about children and their homes or care arrangements.

What is Family Help?

Whatever their circumstances, children and families should not be left waiting to access help and support when issues arise. The system of help, support and protection should respond flexibly and wrap support around families at the point of need. These are the principles that underpin Family Help, which aims to improve the outcomes of children by understanding and responding to their needs, and to the circumstances of the family, as early as possible.

Family Help brings together targeted Early Help and statutory Child in Need support and services into a single offer. While families may move between targeted Early Help and Child in Need within Family Help, this should feel seamless, with minimal disruption – supported by greater consistency in lead practitioner, and the use of single assessment and plans, helping families retain relationships and trust in the system.



Family Help support will be delivered by neighbourhood-based teams in the heart of our communities, bringing together local services under a combined, multidisciplinary practice approach and service offer. It will be underpinned by:

- Centering of family-expertise and family led decision making;
- providing intensive, skilled and well-evidenced support to the family at the earliest opportunity;
- ensuring consistency of relationships between children, families and their lead practitioner;
- adopting one plan that will stay with families but adapt as needs change.

As children and families' needs continue to change, support and services will respond accordingly. If there are concerns that a child is suffering or at risk of suffering significant harm, Child Safeguarding Team (Hackney's name for what is referred to by the Department for Education as a Multi-Agency Child Protection Team) will come alongside the Family Help system and be responsible for the child protection process, alongside responsive support from the Family Help team. Children and families will stay rooted in Family Help, even if child protection action is necessary, with the Family Help team continuing their relationship and maintaining responsibility for direct practice and co-ordinating support across the system.

Child Centred Practice

Engaging and establishing a relationship with the child is key to supporting them and enabling change. There should be a balance between child and parent-focused work. The wellbeing of the child remains paramount.

We understand the child's perspectives, strengths and preferences should be listened to and recognised as a starting point for intervention and to build resilience.

We work with older children during adolescence as assets, understanding their development (particularly perception, autonomy, aspiration, and skills) and draw on strengths to build confidence and resilience.

All staff members should be able to confidently answer these questions, which should form the basis of all our discussions about children, and be clearly answered throughout all our recording, planning and assessments:

- How does the child feel, what do they want, and what is day-to-day life like for them?
- Is the immediate safety of the child assured?
- What needs to change for us to be less worried, and are changes happening quickly enough?
- Are we putting the right interventions in place to support the change we need to see?
- What strengths can we build upon and what outcomes do we need to see?
- What needs to happen if things do not change?

Every child must have:

1. Their views, wishes, feelings, and daily lived experiences are heard and clearly recorded.
2. An up-to-date Family Help Assessment and Plan, which is regularly reviewed and has been quality assured and signed off by a manager.
3. A chronology of significant events that includes changes in circumstances; interventions that have been undertaken; any changes in risk and protective factors that is updated at least every 6 months.
4. Within the first four weeks of the case being opened, supervision will take place and be recorded on Mosaic. Thereafter, best practice would be supervision every four weeks, particularly where there are safeguarding concerns or significant complexities regarding a particular child and family. The maximum time frame for case supervision will not exceed eight weeks for all other children and families.
5. This supervision will be recorded on the child's record on Mosaic within five working days of the discussion taking place.
6. Visits that are undertaken in line with expected standards, including where practicable that the child is seen and spoken to alone.

Respectful Partnerships with Families

Practitioners will work in partnership with families in a respectful way that is transparent, strengths-based, and trauma-informed to facilitate and enable positive change.

Practitioners will listen to, and support families at the heart of the person-centred intervention and consider their needs as a whole.

Practitioners will encourage families to identify their skills, knowledge, strengths and resilient factors. This will affect positive change in their lives to support their children's wellbeing.

Practitioners will explore with parents from the very first telephone call onwards who is in the wider network of family, friends, neighbours, faith and community groups, completing an eco-map to support families and their networks to come up with their own solutions to address needs and risks.

Communication with families will be clear, jargon-free, sensitive, transparent, and tailored to each family's needs.

Practitioners will be culturally sensitive and abide by the anti-racism practice outlined in these standards to ensure that the families' ethnicity, race, and culture are respected.

Parents/carers should be seen and respected as partners in the intervention. They are a significant source of information on their children.

Parents/carers must be consulted in all decision-making and should be informed on matters relating to their child unless it puts the child at significant risk (see Hackney's Child Wellbeing Framework and MASH process).

Consent is not intended to be a one-off event and should be reviewed throughout the support offered. Family Help is a voluntary approach, requiring the family's consent to receive support and services.

If a family does not consent to receive Family Help support, practitioners will seek to understand why this is the case and provide reassurance to the family about their concerns. Any resolute

refusal to receive Family Help will be respected and, in such instances, practitioners will consider how the needs of the child could otherwise be met, for example, through provision by universal and community services that the family already engages with.

If parental consent needs to be overridden to enable concerns about significant harm to be explored, decisions to do so will be made by a manager and the rationale for this clearly recorded on the child's file. Where information about a child or family is shared with partner agencies without consent, a record will be kept on the child's file of what has been shared, with whom and for what purpose. Family functioning and dynamics, including wider networks, fathers, and significant others, are explored to understand who else can support families and their plans and sustain change.

Every parent/carer (including non-resident parents with parental responsibility) should know:

1. When an assessment is initiated and how they will be included
2. What the agreed plan of support is and who is responsible for that support.
3. Who their child's lead practitioner is and how to contact them, as well as the contact details for their manager.
4. How they can raise any concerns they may have about the way their child is being supported.
5. What might make us more worried about their child and what could happen as a result.
6. What needs to happen for us to feel less concerned about their child and by when.

*Unless they present a risk to the child or another family member, for example by threatening or perpetrating harm.

Management Standards

Practice Standards	
Point	Standard
M.1	<p>When staff join Children and Families Service an introductory discussion around supervision, the timeframes, roles and responsibilities should be held within 2 weeks of someone starting. Please see the Supervision Policy for details.</p> <p>New starters will receive supervision fortnightly for the first month. For practitioners the first supervision will be about them and joining the service, so the Personal Supervision template will be used. Following this, the relevant Child's case supervision template will be used for the second supervision and then both used from here on in accordance with the Supervision Policy. All staff should receive personal supervision (in addition to case level supervision for practitioners) at least every 8 weeks, or every 4 weeks for staff who do not have case level supervision.</p>
M.2	<p>Family-facing Team Managers will hold case supervision with practitioners on a 4 weekly basis. During these supervisions, children, families and carers will be discussed on either a 4, 6, 8 or 12 weekly basis. The frequency of the discussion relating to the child, family or carer will depend on the nature of CFS involvement and status of the plan. Please see full Supervision Policy for more details.</p> <p>Newly allocated children and families will be the subjects of a case supervision conversation within 20 days of allocation.</p> <p>Newly Qualified Social Workers will receive weekly supervision for the first six weeks, then fortnightly supervision for the first 6 months, then monthly supervision for the remainder of the first year.</p> <p>Supervision is provided to business support staff on a monthly basis using the Personal Supervision template.</p>
M.3	<p>Children's case supervision (Individual Case/Reflective Group Supervision template) will be shared with the supervisee and saved on the child or carer's file within 3 working days.</p> <p>Group Supervision for Practitioners will be saved on the child's file or carer's file within 3 working days.</p> <p>A record of Personal Supervision will be shared with supervisees within five working days.</p>
M.4	<p>Ad-hoc supervision is provided as and when necessary to respond to any developing needs of the children and carers receiving support from CFS. This will be recorded via Case Notes on the child's, young person's or carer's file within 24 hours.</p>
M.5	<p>All permanently employed staff and those on fixed-term contracts for 12 months or more receive an annual appraisal which includes a review of achievements from the last 12 months and actions required to support or address development needs, setting overarching goals for the coming year.</p>
M.6	<p>Work allocated to staff is commensurate with their knowledge, skills and experience.</p>
M.7	<p>Performance data relevant to the Team or Service should be reviewed by the Team Manager at a minimum weekly and be discussed with Service Managers regularly (no less than monthly). This is used to highlight strengths and address issues for improvement.</p>

Recording Standards

Practice Standards	
Point	Standard
R.1	A visit to a child will be recorded on Mosaic (visits tab and case note) within 48 hours.
R.2	Supervision about children, families and carers is recorded on Mosaic in the Children and Family Supervision work step within 3 working days, capturing a summary of the discussion, key themes and agreed actions.
R.3	Group supervision is recorded on Mosaic in the Children and Family Supervision work step within 3 working days, capturing a summary of the discussion, key themes and agreed actions.
R.4	Records of Strategy Meetings – including agreed actions – will be distributed within 48 hours.
R.5	Records of any other professional or network meeting – including any plan or actions agreed – will be distributed within 5 working days.
R.6	In response to a significant incident for a child or family, a record of this and any corresponding management direction will be recorded on the child’s file on the day of the event.
R.7	Any changes in a child’s legal status – including with respect to Youth Offending Orders – will be reflected on a child’s file within 24 hours.
R.8	A child’s case summary will be recorded on the child’s file every 6 months. This will be before the summer break and again before the winter break.



Our Standards For All Children

Every child must have:

1. Their views, wishes, feelings and daily lived experiences clearly recorded. Be clear that you have actively explored issues and record how the child or parent has responded to this exploration (so avoid recording simply '[child] expressed no concerns').
2. An up to date assessment or plan, which is regularly reviewed and has been quality assured and signed off by a manager.
3. A chronology of significant events that includes changes in circumstances; interventions that have been undertaken; any changes in risk and protective factors that is updated at least every 6 months.
4. A record of Child and Family Supervision, taking place on either a 4, 6, 8 or 12 weekly basis depending on the nature of CFS involvement and status of the plan, will be recorded on their files within 3 working days of the discussion taking place.
5. Visits undertaken in line with expected standards, including where practicable the child seen and spoken to alone.

Every parent/carer (including non-resident parents) should know:

1. What needs to happen for us to feel less concerned about their child and by when.
2. What might make us more worried about their child and what could happen as a result.
3. Who their child's lead worker is and how to contact them, as well as the contact details for their manager.
4. How they can raise any concerns they may have about the way their child's social work intervention is being managed.



1. Contacts & Referrals

Key Guidance & Protocols

The [Hackney Child Wellbeing Framework](#) is a core Partnership document outlining the tiers of need that children may experience and how we respond to support these needs. Importantly it outlines the requirement for consent and the need to work in partnership with families – doing with and not to in order to achieve best outcomes for children.

The [MASH Operational Protocol](#) outlines the role of the Multi-Agency Support Hub (MASH) as the single point of contact for members of the public and professionals who are seeking advice and information, and/or who want to make a referral for a child in Hackney.

Practice Standards		
Point	Standard	Responsibility
1.1	Referring agencies are expected to seek the consent of parents/carers (and children where appropriate) to make a request for support on their behalf, other than where it is felt doing so will increase the risk of immediate harm to the child. MASH will challenge referrers on their responsibility to do this if consent is not sought appropriately.	MASH Manager
1.2	Upon receipt of a new contact, an initial decision on the most appropriate next steps will usually be made within 2 hours but always within 24 hours.	MASH Manager
1.3	If further social care screening is required, the MASH manager will RAG (Red/Amber/Green) rate the contact in line with risk to indicate the timescale of completion of MASH screening. Red screening for completion within 4 hours, Amber screening to be completed within 48 hours and Green screening to be completed within 72 hours. If the timescale is exceeded due to gaps in information, the rationale for exceeding the timescale will be clearly recorded.	MASH Manager
1.4	Information requests will be completed within 10 working days of receipt of the contact.	MASH Manager
1.5	Referrers will be informed of the final decision following screening, unless it is deemed inappropriate to do so, in which case the reasons for this will be recorded on the Contact and Referral Record.	MASH Manager

2. Family Help Assessments

Key Guidance & Protocols

The [Local Assessment Protocol](#) sets out arrangements for how we assess, plan and respond once a child is referred to Hackney CFS.

Our [Assessment Practice Guide](#) breaks down key aspects of assessment and provides practitioners with questions or prompts for specific assessments and specific areas of assessment.

The [No Recourse to Public Funds Protocol](#) outlines our approach to assessing the needs of children living within families that are subject to immigration controls, as defined by the Immigration and Asylum Act 1999.

The [Private Fostering guidance](#) outlines our legal responsibilities and internal procedures in relation to private fostering.

The [DCS policies and procedures](#) and [Safeguarding Disabled Children Practice Guidance](#) set out how the Disabled Children Service operates.

The [Safe and Together Model Summary and Resources](#) outlines the domestic abuse informed model and the related practice tools.

Practice Standards		
Point	Standard	Responsibility
2.1	Allocation record to be completed on Mosaic within a maximum 72 hours after allocation for a Family Help Assessment.	TM
2.2	Family Help Assessments will be completed and sent to the Team Manager within 35 days of allocation and signed off by the Team Manager within 40 days of allocation. Any extension to these timescales to be reviewed by the Service Manager and case noted on file.	FHP/SW/TM
2.3	Supervision of Family Help Assessment, including review of allocation record, by Team Manager no later than 20 working days from the point of allocation. The outcome will be recorded on the child(ren)'s file as a supervision record.	TM
2.4	Consent for information gathering during the assessment – especially with respect to liaising with multi-agency partners for the purpose of sharing information – will be sought from a child's parent/carer. Where the level of concern determines this consent should be overridden in order to safeguard a child, this will be clearly recorded by the appropriate manager.	FHP/SW
2.5	The child will be visited within 5 working days from the point of allocation and at least every 15 working days during the assessment period.	FHP/SW
2.6	A Family Help Assessment is a holistic and continuous process that helps to build up an overview of the child's lived experiences and ensure the best interests of the child remain the greatest priority. Family Help aims to provide the right support, at the right time. The main focus is to improve outcomes for each child and prevent any situation from escalating, or further problems arising.	FHP/SW/ TM/SM
2.7	The assessment process should support the child and their family to identify what areas of their life are going well and which areas they may need support to improve or change. It should also encourage involvement of wider family, friends, fellow faith members and community partners around the family to support them to come up with their own plan, in addition to which professional support can be added. This is a collaborative approach with families and encourages a more positive way of working together to prevent harm; giving families more control and choices for their Family Help to achieve positive change.	FHP/SW/ TM/SM

2.8	The assessment promotes an understanding of any worries or concerns in relation to the wider family which may impact on poor outcomes for a child, such as; the child's health, development, or behaviour, how they're doing at school, or if there are any special educational needs or disability. It may be that the parent/carer is worried about money or housing and how that is affecting their family functioning.	FHP/SW/ TM/SM
2.9	The child(ren) will be seen and spoken to alone. Their views, wishes and feelings will be recorded clearly. Where the child is not seen and spoken to alone the rationale for this will be recorded on the child's file.	FHP/SW
2.10	The assessment takes into account the views of the child, parents/carers including proactive engagement with partners, significant males, and other extended family members or support networks who are not living in the household but are significant people in the child or family's lives. Refer to Practice Guidance on Working with Fathers .	FHP/SW
2.11	The assessment should, with consent, include the views of other relevant agencies and professionals in the child's life, including but not limited to health visitors, speech and language therapists, school, and midwives so the child and family only have to tell their story once.	FHP/SW
2.12	A chronology of significant events and a genogram will be completed or updated during the course of the assessment. In addition, children at risk of extra-familial harm will have a peer map and Network Safety Plan on file. All children who have been the subject of a Strategy Discussion will have a safety plan on their file unless it's explicitly agreed by management that it's not necessary and the reason clearly evidenced on file.	FHP/SW
2.13	At the conclusion of the assessment the child(ren) and family will be spoken to in order to inform them of the outcome. A copy of the assessment will be shared with the child(ren) and family.	FHP/SW
2.14	The contents of all assessments and plans will be in clear and easy-to-understand language and shared with the family (and child where appropriate). Families will be given the opportunity to challenge or agree with the information recorded about them and have their views about their assessment and plan recorded.	FHP/SW
2.15	Where a child is allocated for a Private Fostering assessment, a home visit to meet with both the child and their carers will take place within 7 working days. During the course of the assessment contact will be made with the child's parents and a DBS check of the carers will be completed. If the arrangement is deemed suitable following assessment, it will need to be presented to the Stability Panel to be ratified.	SW

2.16	Where a Family Help Assessment is undertaken within the Disabled Children's Family Help Team and concludes that a disabled child is eligible for a care package, the child will be presented to the Care Package Panel to agree a package of support within 2 weeks of the assessment completion. Thereafter the child's care package will be reviewed at least once every 2 years to ensure it is still meeting the needs of the child, unless a significant change in circumstances requires an earlier review.	Disabled Children's Family Help Team
2.17	Where a child is referred due to being at risk of homelessness and/or destitution due to their parent/carer having no recourse to public funds, in the absence of overriding safeguarding concerns, the child will be allocated to the Migrant Children and Families Team to undertake a Family Help Assessment.	Migrant Children and Families Team

3. Strategy Discussions

Key Guidance & Protocols

The [London Safeguarding Children Procedures](#) set out how agencies and individuals should work together to safeguard and promote the welfare of children and are underpinned by [Working Together to Safeguard Children 2026](#).

The [CHSCP Strategy Discussions – Hackney Protocol](#) and accompanying [video](#) provide a practical guide for professionals and supplement the statutory guidance set out in Working Together to Safeguard Children and the London Child Protection Procedures.

[Working in Partnership with Police in response to Significant Harm and Crimes Against Children](#) sets out the remit of relevant police teams, how best to contact them and how to book a Strategy Discussion.

The [Children Missing from Home and Care Policy and Procedure](#) outlines for practitioners the support available for children who go missing from home or care and the procedures that need to be followed.

The [Safe and Together Model Summary and Resources](#) outlines the domestic abuse informed model and the related practice tools.

Hackney's [Extra-Familial Risk Panel](#) coordinates safeguarding intervention in cases where a child, or a group of children, is at risk of or already experiencing harm by people outside their family, or is at risk of or already causing harm to young people outside their family.

Practice Standards		
Point	Standard	Responsibility
3.1	Strategy Discussions will take place at the earliest possible opportunity. Should there be a concern that a child has experienced significant harm within the last 24 hours or is at immediate risk of harm, a Strategy Discussion will take place no later than 24 hours after a referral, incident or accumulation of concern (including intra or extra-familial harm).	TM
3.2	Strategy Discussions should be attended by the police and health and all other key professionals involved in the child and family's life, for example, education and other relevant partner agencies who have involvement in the child and family's life.	TM

3.3	If a child has been injured and admitted to hospital for treatment, the Strategy Discussion must take place prior to the child's discharge from hospital. This should consider the immediate safety plan upon discharge and identify a trusted adult to engage and support the child including consideration of support in relation to trauma caused by the experience of harm.	TM
3.4	The meeting must determine actions required to ensure the immediate safety of the child and whether the threshold is met to initiate a Section 47 investigation, led either by the Local Authority or jointly undertaken with the police.	TM
3.5	The record of the Strategy Discussion will be shared with all partner agencies within 48 hours.	TM
3.6	When a child goes missing from home or care an immediate strategy to locate the child must be agreed with the Police Missing Persons Unit within 24 hours. If the child is missing for 72 hours a Missing Child Discussion as part of a Strategy Meeting must be held with the Police, parent/ carer and worker. Where a child who is missing is supported through a Child Protection Plan, or Section 47 enquiry, a Strategy Meeting must be convened within 7 days at the latest if the child has not returned.	TM

4. Children Missing from Home & Care

Key Guidance & Protocols

The [London Safeguarding Children Procedures](#) set out how agencies and individuals should work together to safeguard and promote the welfare of children and young people and are underpinned by [Working Together to Safeguard Children 2026](#). Work with missing children in Hackney is also supported by our [local policy and procedure](#).

Practice Standards		
Point	Standard	Responsibility
4.1	Immediately upon receiving a report of a missing child – typically from the parent or carer, the Children's Rights Service, Emergency Duty Team or the Police – Children's Rights Officer, Social Worker or Family Help Practitioner opens a Missing Child Record and within it keeps an up-to-date record of all reasonable steps being taken to locate the child. The missing episode remains open until either the child returns or is located and taken home.	CRO/FHP/SW
4.2	An immediate plan is agreed between the allocated Social Worker or Family Help Practitioner and the Police to try and locate the children, and involved professionals and agencies are notified of the missing episode (see Missing Children Required Actions).	FHP/SW

4.3	If a child remains missing for over 3 days (72 hours) or there are significant concerns about their safety prior the 72 hour missing period, a Missing Child Discussion should take place including, at a minimum: the child’s Social Worker or Family Help Practitioner, the Missing Police from the Borough the child was reported missing from, and the parent, carer or care provider. Details of this discussion should be recorded using Template – Missing Child Discussion . Review discussions are held at least monthly until the child is found, but can be more frequent depending on risk and vulnerability.	FHP/SW
4.4	For any child who has been missing for over 10 days, the Social Worker, Family Help Practitioner or Team Manager completes a Need to Know Briefing using the relevant Mosaic work step.	FHP/SW/TM
4.5	Where a child who is missing is living at home, and is either supported by a Child Protection Plan or the subject of a Section 47 enquiry, in addition to the Missing Child Discussion a Strategy Discussion must be arranged within 7 days of the child being reported and remaining missing. The Strategy Discussion must include representatives from both the Police Missing Persons Unit and the CAIT, as well as other practitioners involved with the child, including health and education colleagues. (See Strategy Discussion Guidance).	TM
4.6	Children’s Rights Officers will lead in contacting all children when they return/are found to make a direct offer of an independent return home interview using thoughtful, age-appropriate language to maximise engagement. The Children’s Rights Officer will then undertake all return home interviews unless a child expresses a clear preference to have a conversation with their allocated Social Worker or Family Help Practitioner, or another trusted adult.	CRO
4.7	When a child returns or is found the Missing Child Record must be completed, and the child offered an independent return home interview within 72 hours.	FHP/SW/CRO
4.8	Missing episodes in relation to children not allocated to CFS should be managed using the process outlined in the Missing from Home Process – Not Allocated to CFS .	FHP/SW
4.9	A safety plan will be put in place for any child who goes missing repeatedly.	FHP/SW

5. Section 47 Investigations

Key Guidance & Protocols

The [London Safeguarding Children Procedures](#) set out how agencies and individuals should work together to safeguard and promote the welfare of children and young people and are underpinned by [Working Together to Safeguard Children 2026](#).

Practice Standards		
Point	Standard	Responsibility
5.1	The child(ren) will be visited within 24 hours of the decision to initiate the Section 47 investigation. The child(ren) will be seen and spoken to alone. Their views, wishes and feelings will be recorded clearly. Where the child is not seen and spoken to alone the rationale will be recorded on the child’s file.	SW
5.2	A Strategy Discussion will need to make a decision about whether threshold is met for an Initial Child Protection Conference. If the Strategy Discussion cannot yet make a decision about threshold for an Initial Child Protection Conference then a decision needs to be made within a maximum of 5 working days of the Strategy Discussion that initiated the Section 47 investigation based upon the information gathered.	TM
5.3	The Section 47 investigation will usually be completed within 15 working days of being initiated. In some exceptional circumstances – for example, in relation to sexual harm and/or extra-familial harm – it may be necessary for a Section 47 investigation to take longer than 15 working days. If so, a review Strategy Discussion will be held.	TM
5.4	During the course of a Section 47 investigation, the allocated Social Worker will carry out a home visit; speak to any other children in the household and all those with Parental Responsibility; undertake full multi-agency checks; and consider the need for a Child Protection medical and ABE interview (where appropriate).	TM
5.5	The child(ren) will be seen and spoken to alone. Their views, wishes and feelings will be recorded clearly. Where the child is not seen and spoken to alone the rationale for this will be recorded on the child’s file.	TM

6. Initial Child Protection Conferences

Key Guidance & Protocols

The [Child Protection Conference – Guidance for Professionals](#) and [Child Protection Conferences – A Guide for Parents and Carers](#) and accompanying [video](#) explain the purpose, process and expectations relating to child protection conferences.

Practice Standards		
Point	Standard	Responsibility
6.1	An Initial Child Protection Conference will be held within 15 working days of the Strategy Discussion that agreed to initiate the Section 47 investigation.	SW/CPL
6.2	A genogram or eco-map must be available to share at the Conference to that a clear understanding of the family network and support available can be understood, as well as an understanding of any individuals who pose a risk of harm	SW
6.3	If the Initial Conference needs to be split to facilitate parental participation – for example, if there are multiple parents within a blended family, concerns in relation to domestic abuse or issues with certain information being shared with particular parents – the allocated Social Worker and Child Protection Lead will follow the Split Child Protection Conference Guidance , including the completion of a Split Conferences – Preparation Plan .	SW/CPL
6.4	Where the child is a victim of domestic abuse, a perpetrator-pattern-based approach should be used to determine safe arrangement of meetings and conferences. In most cases, it may be safer for parents to attend and participate in the meeting separately. This also aids assessment of how each parent separately is contributing to or detracting from child safety and wellbeing. The decision as to whether conferences should be split should be based on what is known about the pattern of coercive control used by the person causing harm as it relates to the involvement of services.	SW/CPL
6.5	The chronology of significant events will be up to date at the time of the Initial Child Protection Conference.	SW
6.6	The report to the Initial Child Protection Conference will be completed and shared with the family and shared with the Child Protection Lead via Mosaic at least 2 working days before the Conference. Sharing the report with the family means having a conversation, talking through the report and including the family's views, not simply emailing the document to them.	SW
6.7	The Child Protection Lead and the allocated Social Worker will have a discussion at least 3 working days before the Conference to ensure that children (age appropriate), parents and professionals are sufficiently prepared for the meeting and all required information ready to share.	SW/CPL

6.8	The Child Protection Lead will meet with family members before the Conference to talk about how it will run and how they might best participate.	CPL
6.9	The Decisions and Child's Plan agreed at the Conference will be circulated within 24 hours of the meeting taking place.	CPL
6.10	A record of the Conference (containing the summary of discussion, social work report and other professionals reports) will be circulated as a bundle within 15 working days of the Conference.	CPL
6.11	The core group membership will be agreed at the Initial Child Protection Conference and the date of the initial Core Group and next Conference set.	CPL
6.12	Any child referred for an Initial Child Protection Conference who has previously been subject to a Child Protection Plan (whether this was in Hackney or another Local Authority) should be discussed with the relevant Head of Service and a record of this discussion placed on file.	SW/CPL/HoS

7. Child Protection Planning & Review

Key Guidance & Protocols

The [London Safeguarding Children Procedures](#) set out how agencies and individuals should work together to safeguard and promote the welfare of children and young people and are underpinned by [Working Together to Safeguard Children 2026](#).

Practice Standards		
Point	Standard	Responsibility
7.1	All children aged over 5 years who are made subject to a Child Protection Plan will automatically be offered advocacy support through the Children's Rights Service.	Children's Rights Service
7.2	The first core group meeting will be held within 10 working days of the Initial Conference, and thereafter a minimum of 6 weekly (30 working days), face-to-face unless agreed by a Service Manager.	SW
7.3	The child(ren) will be visited as set out in the Child Protection Plan with a minimum frequency of 10 working days. Visits will include a combination of announced and unannounced visits. For a child who is experiencing neglect, or where there are concerns about neglect, every 3 months the visit will be undertaken alongside an experienced practitioner who is not allocated to the family.	SW
7.4	If over the age of 5, the child(ren) will be seen and spoken to alone regularly. Their views, wishes and feelings will be recorded clearly. Where the child is not seen and spoken to alone the rationale will be recorded on the child's file.	SW

7.5	A chronology of significant events will be maintained and updated at least every 6 months.	SW
7.6	All children who have been the subject of a Strategy Discussion will have a safety plan on their file unless it's explicitly agreed by management that it's not necessary and the reason clearly evidenced on file. In addition, children at risk of extra-familial harm will have a peer map and Network Safety Plan on file.	SW
7.7	A contingency plan will be in place for each child supported on a Child Protection Plan, should risk increase. This will be recorded in the Child Protection Plan.	SW
7.8	All Children at risk of significant harm including intrafamilial, extra-familial and risk of family breakdown will be offered a Family Group Conference/ Family Network meeting or equivalent to develop a family plan to reduce the risk of harm.	SW
7.9	The first Review Conference should take place within 3 months, and as a minimum at 6 monthly intervals thereafter.	SW/CPL
7.10	If the Review Conference needs to be split to facilitate parental participation – for example, if there are multiple parents within a blended family, concerns in relation to domestic abuse or issues with certain information being shared with particular parents – the allocated Social Worker will follow the Split Child Protection Conference Guidance , including the completion of a Split Conferences – Preparation Plan .	SW/CPL
7.11	Where the child is a victim of domestic abuse, a perpetrator-pattern-based approach should be used to determine safe arrangement of meetings and conferences. In most cases, it may be safer for parents to attend and participate in the meeting separately. This also aids assessment of how each parent separately is contributing to or detracting from child safety and wellbeing. The decision as to whether conferences should be split should be based on what is known about the pattern of coercive control used by the person causing harm as it relates to the involvement of services.	SW
7.12	For Review Conferences, the Social Worker report for the conference will be shared with the Team Manager and Child Protection Lead for review and approval at least 2 weeks prior to the conference.	SW/TM/CPL
7.13	Social Worker reports to Review Conferences will be discussed (preferably in person) with the child and family and their views recorded and sent to hackneycypsreports@hackney.gov.uk no less than 5 working days before the meeting. Sharing the report with the child and family means having a conversation, talking through the report and including the child and family's views, not simply emailing the document to them.	SW
7.14	The Child Protection Lead and the Social Worker will have a discussion 15 working days before the Review Conference to ensure that children (age appropriate), parents and professionals are sufficiently prepared for the meeting and all required information is ready to share.	SW/CPL

7.15	The Head of Family Help Service for the respective neighbourhood team must give prior authorisation for a Child Protection Plan to end at 3 months.	HoS
7.16	The Child Protection Lead will conduct a Midway Oversight Review between Child Protection Conferences. This will consist of a file review and, if required, a discussion with the Social Worker and Team Manager to monitor progress of the plan for the child.	CPL
7.17	Once a Child Protection Plan has been in place for 8 months, it will be reviewed by the Service Manager in the operational social work service.	SM
7.18	Once a Child Protection Plan has been in place for 12 months, it will be reviewed within the Child Protection Lead's supervision to consider any escalation required.	CPL/SM for Child Safeguarding Team
7.19	Once a Child Protection Plan has been in place for 13 months, it will be reviewed by the Head of Family Help Service for the respective neighbourhood team.	HoS

8. Family Help Planning & Review

Key Guidance & Protocols

The [Chronology guidance](#), [good practice guidelines](#) and [chronology template](#) support practitioners to produce robust chronologies.

Practice Standards		
Point	Standard	Responsibility
8.1	A Family Help Review Meeting will take place within 15 working days of the completion of the Family Help Assessment, except where the Family Help Plan is a step-down from a Child Protection Plan, in which case a Family Help Review must be held within 6 weeks of the Child Protection Conference.	FHP/SW
8.2	Family Help Review Meetings will take place at a minimum of 12 weekly thereafter.	FHP/SW
8.3	Family Help Review Meetings will take place in person – this could be at the family's home, at a Children and Family Hub, a local Children's Centre or School, or other community space if preferred by the family and identified within the network.	FHP/SW
8.4	If not taken up by the family during the assessment, the opportunity to support the family and their network in a Family Network Meeting or Family Group Conference should continue to be offered throughout the period of a Family Help Plan being in place.	FHP/SW

8.5	Where the child is a victim of domestic abuse, a perpetrator-pattern-based approach should be used to determine safe arrangement of meetings and conferences. In most cases, it may be safer for parents to attend and participate in the meeting separately. This also aids assessment of how each parent separately is contributing to or detracting from child safety and wellbeing. The decision as to whether meetings should be split should be based on what is known about the pattern of coercive control used by the person causing harm as it relates to the involvement of services.	FHP/SW
8.6	A child supported through a Family Help Plan must be seen at least once every 20 working days, but usually more often in accordance with their needs. For a child who is experiencing neglect, or where there are concerns about neglect, every 3 months the visit will be undertaken alongside an experienced practitioner.	FHP/SW
8.7	A child supported through a Family Help Plan will be seen and spoken to alone regularly. Their views, wishes and feelings will be recorded clearly. Where the child is not seen and spoken to alone the rationale will be recorded on the child's file.	FHP/SW
8.8	A child supported through a Family Help Plan will have their Family Help Assessment updated at a minimum of every 12 months.	FHP/SW
8.9	Any Family Help Plan that has been in place for over 6 months will be reviewed by a Service Manager, and again after 9 months. Where concerns relate to neglect of the home environment, a manager must undertake a home visit with the allocated social worker. The manager must also consider chairing a Family Help Review Meeting where there is professional challenge or anxiety or where the case is particularly complex.	FHP/SW/SM
8.10	Any Family Help Plan that has been in place for over 16 months will be reviewed by the relevant Head of Service and, unless the child(ren) is subsequently escalated, the next Family Help Review Meeting will be chaired by a manager.	HoS
8.11	Where the child is a victim of domestic abuse, their plans should be perpetrator-pattern focused and measure specific behavioural change from the person using abusive behaviour. The effective development of a child's plan starts with a thorough assessment of the pattern of coercive control on the part of the person using abusive behaviour and actions taken to harm the child. This baseline helps determine the focus of behaviour change expectations and provides the best chance of determining real behavioural change. Any interventions with people using abusive behaviour ideally occur in conjunction with partnership with the domestic abuse survivor around safety and wellbeing.	FHP/SW
8.12	A chronology of significant events will be maintained and updated at least once every 6 months.	FHP/SW
8.13	An up-to-date genogram will be maintained. All children who have been the subject of a Strategy Discussion will have a safety plan on their file unless it's explicitly agreed by management that it's not necessary and the reason clearly evidenced on file. In addition, children at risk of extra-familial harm will have a peer map and Network Safety Plan on file.	FHP/SW

8.14	A child in a private fostering arrangement will be visited at least every 6 weeks for the first year after the point of notification to us of this arrangement. After the first year, visits will take place at least every 12 weeks.	FHP/SW
8.15	Private fostering arrangements will be reviewed every 12 months and recorded in an Annual Review of the Private Fostering Arrangement episode. Once completed, this episode will be reviewed by a Service Manager, who will record on file that they are in agreement for this arrangement to continue, or management directions about what needs to happen next if they are not.	SW/ Service Manager

9. Legal Processes

Key Guidance & Protocols

The [Supervision Order Policy](#) provides guidance to all practitioners working with children and their families when the court has made a Supervision Order.

Practice Standards		
Point	Standard	Responsibility
9.1	Other than in an emergency situation, all decisions to initiate Pre-Proceedings or care proceedings for a child will be made at the weekly Children's Resource Panel (CRP), chaired by the Director.	Director
9.2	Where Pre-Proceedings have been agreed at CRP, a letter of intent outlining our concerns and expectations will be shared with the child's parent/carer within 5 working days of this decision being made. This letter will provide the parent/carer with formal notice for the Initial Pre-Proceedings Meeting which will take place within 10 working days. The Child Protection Lead will also be notified.	SW
9.3	All Pre-Proceedings Meetings will be chaired by a Service Manager.	SM
9.4	Review Pre-Proceedings Meetings should be scheduled at intervals of a maximum of 6 weeks.	SW
9.5	Exceptions to the above (9.4) would be where the child is unborn and assessments cannot start 6 weeks prior and post birth.	SW
9.6	Minutes of Pre-Proceedings meetings will be recorded on the child's file and shared with attendees within 5 working days.	SW
9.7	The Pre-Proceedings process should be concluded by no longer than the third Pre-Proceedings Review Meeting (18 weeks). Except where the child is unborn (see 9.5).	SM
9.8	Where a decision has been made within the Pre-Proceedings process to initiate care proceedings, an application to Court should be made no longer than 10 working days from that decision, unless the application is urgent.	SW/SM

9.9	Where a decision has been made by CRP to initiate care proceedings, an application to Court should be made no longer than 10 working days from that decision, unless the application is urgent.	SW/SM
9.10	All initial evidence for Court is signed off by a Service Manager. All final evidence and Care Plans are signed off by a Head of Service.	SW
9.11	Children subject to an Interim Supervision Order (ISO) or Supervision Order (SO) should be seen every 10 working days by the Social Worker for the first 12 weeks. After 12 weeks, the ongoing frequency of visits should be reviewed with a Service Manager. If any change in visit frequency is made, the rationale should be recorded on Mosaic by the Service Manager. Visits should continue at a minimum of every 20 working days. For a child who is experiencing neglect, or where there are concerns about neglect, every 3 months the visit will be undertaken alongside an experienced practitioner who is not allocated to the family.	SW/SM
9.12	In exceptional circumstances, where it is agreed that the Child Protection Plan continues alongside the ISO/SO Plan, the RCPC should be held as planned. Where Core Group Meetings and ISO/SO Plan review meetings are both being held these should be aligned, until such time as either the ISO/SO Plan ends or the CP Plan ends.	SW/SM/LCPP
9.13	Network meetings to review the Supervision Order Plan will take place at a minimum of every 6 weeks for the first 12 weeks of the Order. Thereafter Network meetings can occur at a minimum of every 12 weeks, if agreed at the Service Manager's 3-month Review.	SW
9.14	The progress of Supervision Orders that have been in place for 9 months will be reviewed by the Service Manager. If the threshold is met for renewal of the Order, a Legal Planning Meeting will be convened.	SW/SM
9.15	Within 12 weeks of an Adoption Order being granted, a lifestory book and later life letter for the child will be completed.	SW
9.16	Where the outcome of proceedings is a Full Care Order or Special Guardianship Order, a later life letter will be completed within 4 weeks.	SW

10. Children Looked After – Entering Care

Key Guidance & Protocols

The [Hackney Promise](#) is our promise to children and young people in the care of the local authority.

The [Looked After Child Procedures](#) sets out the steps to be taken when a child first becomes looked after.

The [Children in Temporary and Unregulated Care Arrangements \(Regulation 24/25\) Policy](#) sets out our process for temporarily approved fostering and connected care arrangements.

The '[Our Reviews, Our Choice](#)' – [Looked After Review Guidance](#) aims to ensure all professionals have an understanding of our child-focused Looked After Reviews.

The [Permanency Planning Process](#) outlines our process for achieving and maintaining permanence for children.

The [CFS Language Guide](#) incorporates the [Real Talk – Language](#) when talking to children, which sets out the Hackney Children in Care Council’s review of and suggestions for language use when talking about children.

The [Quality Assurance Framework for Externally Commissioned Care Arrangements](#) sets out how we ensure externally commissioned care arrangements meet the standards we expect for our looked after children and care leavers.

Additional [Children Looked After Policies and Procedures](#) can be found on the intranet.

Practice Standards		
Point	Standard	Responsibility
10.1	All children will receive a Settling In Meeting prior to them becoming Looked After or after a change of carer, or no later than 5 working days from the date the child moves to their new care arrangement.	SW
10.2	Children will be visited on the first day of becoming looked after or experiencing a change in carer or where any significant incident occurs, and again within one week. Children who are looked after under an interim order (prior to Final Orders being made), or under section 20 if not agreed in their long-term plan, should be visited at a minimum frequency of 4 weeks (20 days) unless agreed with a Team Manager and recorded on Mosaic. Children who are Looked After under section 20 should be visited at a minimum of 4 weekly (20 days) until they are transferred to the Corporate Parenting Service). They should then be visited at a minimum frequency of 6 weekly thereafter. Visits will be recorded on the child’s file within 72 hours.	SW
10.3	The first Looked After Review will take place within 20 working days of a child entering care.	SW/IRO
10.4	A referral for an initial health assessment will be completed within 24 hours of the child’s entry into care.	SW
10.5	The initial health assessment will take place within 20 working days of the child’s entry into care.	Looked After Children Health Service
10.6	Visits to children looked after will include seeing them in their homes at least every other visit.	SW
10.7	Where the child is of appropriate age, the first Personal Education Plan (PEP) meeting will take place within 20 working days of entry into care.	SW/VS
10.8	The child’s care plan will be prepared 5 days before their Looked After Review. Where a child is over 15½, the Develop Pathway Plan can be used in place of the Care Plan.	SW

10.9	The social work report for Looked After Reviews or Pathway Plan will be shared with the child where appropriate, their carer, their parents (where appropriate) and submitted to the IRO at least 5 days prior to the review.	SW
10.10	Where a child is moving to a connected carer, a Viability Assessment must be completed and approved by the Head of Service for Corporate Parenting prior to the child's move, and no later than 48 hours after the placement start date where the move is completed as an emergency.	SW/Head of Service for Corporate Parenting
10.11	A full assessment must be completed and ratified via the Fostering Panel or Court within 16 weeks of the child's move to a temporary approved connected carer (or 24 weeks if an 8-week extension is granted via the Fostering Panel).	SW
10.12	16 and 17 year olds sentenced to custody, if they have been remanded for more than 13 weeks, are no longer Looked After but are relevant children and will remain so until their 18th birthday when they will become former relevant. They are therefore Care Leavers, see section 12.	SW
10.13	Eligible Looked After Children accommodated under section 20 (for 13 weeks or more) who return home post 16, become relevant for 6 months and then qualifying. They must therefore remain allocated to their current team and 8 weekly visits and a review of their Pathway Plan is required by the end of the relevant period to review the need for ongoing support.	SW

11. Children Looked After – Planning & Review

Key Guidance & Protocols

The [Hackney Promise](#) is our promise to children and young people in the care of the local authority.

The [Children Looked After Procedures Flowchart](#) sets out the steps to be taken when a child first becomes looked after.

The '[Our Reviews, Our Choice](#)' – [Looked After Review Guidance](#) aims to ensure all professionals have an understanding of our child-focused Looked After Reviews.

The [Matching for Looked After Children with Long Term Foster Families Guidance](#) and [Permanency Planning Process](#) outlines our approach and processes for achieving and maintaining permanence for children and young people.

[Real Talk – Language when talking to children and young people](#) sets out the Hackney Children in Care Council's review of and suggestions for language use when talking about children and young people.

The [Quality Assurance Framework for Externally Commissioned Care Arrangements](#) sets out how we ensure externally commissioned care arrangements meet the standards we expect for our looked after children and care leavers.

Additional [Children Looked After Policies and Procedures](#) can be found on the intranet.

Practice Standards

Point	Standard	Responsibility
11.1	All Children Looked After will have an up to date Care Plan which is reviewed at least once every 6 months.	SW
11.2	The first Looked After Review will take place within 20 working days of a child becoming Looked After, the 2nd Review will take place in less than 3 months and all subsequent reviews in less than 6 months thereafter.	SW/IRO
11.3	The Social Worker must prepare the child for each of their Reviews, at least 2 weeks beforehand, and support them to choose the venue, attendees and any activity to be undertaken as evidenced in the social work report for Looked After Reviews.	SW
11.4	The Independent Reviewing Officer will speak to the Social Worker no less than 15 working days before the review to ensure that the child, carer and parents are prepared, to agree what activity to undertake and ensure that reports are completed in time to share with the child, carer and parents in advance of the review.	IRO
11.5	The social work report for Looked After Reviews or Pathway Plan will be submitted to the Independent Reviewing Officer at least 5 days prior to the review.	SW
11.6	Clear efforts should be made by Social Workers and IROs to engage both mothers and fathers as part of each Review process (including Paper Reviews) at a minimum and Review paperwork should clearly document these efforts.	SW/IRO
11.7	The Independent Reviewing Officer will meet with the child(ren) before each Looked After Review.	IRO
11.8	Looked After Review Decisions should be shared with the Social Worker within 5 working days and Looked After Review Minutes must be distributed within 20 working days of the review.	IRO
11.9	Where children have been in a settled care arrangement for over a year, consideration will be given – in line with their wishes and feelings – to reducing the frequency of social work visits to no less than 3 monthly.	SW/IRO
11.10	Visits to looked after children will include seeing them in their homes at least every other visit	SW
11.11	Looked After Reviews can take place annually for children in long-term settled care arrangements if there is agreement between the Independent Reviewing Officer and all parties and this is in line with the child's wishes and feelings. If so, the decision will be documented on the child's Mosaic file and the Independent Reviewing Officer's worker relationship changed to 'Independent Reviewing Officer (Annual)'.	SW/IRO
11.12	Where the child is of appropriate age, the first Personal Education Plan (PEP) meeting will take place within 20 working days of becoming Looked After.	SW/ Virtual School

11.13	The child's PEP will be reviewed no less than 6 monthly, in line with local guidance .	SW/ Virtual School
11.14	Once it has been agreed that a child will remain looked after long term, the Participation Officer for Hackney of Tomorrow (our children in care council) will be in touch with them to share a Coming Into Care information pack and encourage them to join Hackney of Tomorrow.	Hackney of Tomorrow Participation Officer
11.15	By the time of the second Looked After Review the child will have a plan for permanence included within their care plan.	
11.16	The social work report for Looked After Reviews will be submitted to the Independent Reviewing Officer within 5 days prior to the review. For children aged over 15½ the Develop Pathway Plan can be used in place of the Social Work Report. Please see 12.2 below.	SW
11.17	A Pathway Plan will be completed for all Looked After Children by the time of their 16th birthday. For young people aged over 15½ the Pathway Plan can be used in place of the Care Plan. Post 18 plans must be discussed from the child's 16th birthday.	SW
11.18	Where there are concerns about the stability of a care arrangement, a Stability Meeting will be convened with the child, carer, child's Social Worker and supervising Social Worker as a minimum.	SW
11.19	If there is a plan for a child to move into supported accommodation which has not yet been registered with Ofsted or received a quality assurance visit by Hackney CFS within the last 3 months, the Placement Management Team will undertake a quality assurance visit prior to the child's move.	Placement Management Team
11.20	Looked After Children will have an annual Dental Check.	SW
11.21	Looked After Children must have an annual Review Health Assessment and immunisations will be kept up to date as recommended within this assessment.	SW
11.22	Foster carers will be supported by the Social Work Team to complete an annual Strengths and Difficulties Questionnaire, two months prior to the annual Review Health Assessment, for children aged between 4 and 16.	SW

12. Care Leavers

Key Guidance & Protocols

The [Staying Put Policy](#) provides guidance for practitioners working with care experienced young people and foster carers on the ‘Staying Put’ arrangements for former relevant children.

The [Quality Assurance Framework for Externally Commissioned Care Arrangements](#) sets out how we ensure externally commissioned care arrangements meet the standards we expect for our looked after children and care leavers.

The [Guidance for Supporting Hackney Care Leavers Post 21](#) clarifies our statutory duty to care leavers and explains how we ensure this is met.

[Leaving Care Policies and Procedures](#), including our [Corporate Parenting Strategy](#) and [Guidance on Life Story Work](#), can be found on the intranet.

Practice Standards		
Point	Standard	Responsibility
12.1	All children looked after must have a completed Pathway Plan by their 16th birthday. After this, their Pathway Plan should be reviewed at least every 6 months. This should be completed on the My Pathway Plan for 16 or 17 Year Olds workstep.	Children Looked After SW
12.2	All Pathway Plans should be written in collaboration with the young person, with input from key members of their personal and professional networks and quality assured by a Team Manager before sign off.	Children Looked After SW
12.3	Where a child looked after is eligible for Adult Social Care, they must be referred to the Preparation for Adulthood and Transition Panel within a month of their 16th birthday by completing the Mosaic workstep.	Children Looked After SW
12.4	At a child’s penultimate Looked After Review, the Independent Reviewing Officer will ensure that arrangements are being made for the child and their Social Worker to meet with their buddy Leaving Care Team to introduce them and discuss the Hackney Local Offer , before their final Review. At the final Review, the Independent Reviewing Officer needs to be satisfied that the child has been signposted to the Local Offer and made aware of their rights and entitlements as a care-experienced young person.	Children Looked After SW/ Leaving Care Managers
12.5	The child’s Independent Reviewing Officer must receive a copy of the child’s final Pathway Plan at least 4 weeks prior to the child’s 18th birthday and contact the child to ensure that they are satisfied with everything in their plan. If there are any issues to be resolved, a further final Looked After Review should be convened.	Children Looked After SW/ Independent Chair
12.6	Prior to their 18th birthday, all children with leaving care rights will be provided with a Health Summary by the Looked After Child Health Team.	Children Looked After Health Service

12.7	After their 16th birthday, all children with leaving care rights should be supported to gain copies of their Birth Certificate, National Insurance Number and Passport so that this is received in time for making an advanced Universal Credit claim for their 18th birthday.	Children Looked After Health Service
12.8	As soon as possible after their 18th birthday, every care leaver will be supported by their Leaving Care Social Worker to join Hackney Council's Housing Register should they wish to do so.	Leaving Care SW
12.9	Within 6 weeks of a care-experienced young person turning 18, a later life letter will be shared with them by their Child Looked After Social Worker.	Children Looked After SW
12.10	At the final Looked After Review, a transitions check in date will be agreed approx 6 months after the young person turns 18 – this will be a 3 way catch up including the care leaver, their Personal Adviser and their Independent Reviewing Officer (and Children's Rights Officer if applicable) ideally in person and at our Bocking Street Care Leavers Hub.	SW
12.11	Between the ages of 18 and 21, all care leavers should continue to have a Pathway Plan that is reviewed with them at least every 6 months, for as long as they want to continue to receive a Leaving Care Service. This should be completed on the My Pathway Plan for 18+ Young People workstep.	Leaving Care SW
12.12	Where a young person aged between 18 and 21 does not engage in the review of their Pathway Plan, their Plan still needs to be reviewed in their absence at least every 6 months. This plan should clearly record their reasons for not engaging in the Pathway Planning process and our ongoing efforts to engage them.	Leaving Care SW
12.13	All care leavers will be visited by their allocated practitioner or Social Work Team at least every 8 weeks. However, the frequency of visits should be based on the care leaver's needs, feelings and wishes. This visit will be recorded on the visit tab of their files within 3 working days of the contact taking place. Care leavers should be visited at their accommodation at least every 6 months to inform their Needs Assessment.	Leaving Care SW
12.14	If a care leaver moves home on an emergency basis, they should be visited by a Leaving Care practitioner within a week of their move and their Pathway Plan should be reviewed with them within a month of the move.	Leaving Care SW
12.15	Between the ages of 21 and 25, care leavers are able to continue to access a Leaving Care Service as and when they feel they need our support, in accordance with relevant statutory guidance . All care leavers allocated to a Social Worker or Personal Adviser should have a Pathway Plan, which (if open for this long) should be reviewed at least every 6 months. The Pathway Plan should focus on the area of identified need and be completed on the My Pathway Plan for 21+ workstep.	Leaving Care SW

12.16	All Unaccompanied Asylum Seeking Children (UASC) who do not yet have a favourable Home Office decision will remain supported by the UASC unit post 18, so that they continue to receive specialist support. If and when they are granted Leave to Remain, they will transfer to a Leaving Care Team.	Migrant Children and Families Team
12.17	Young Parents who are care leavers will be supported by their Leaving Care worker to attend meetings and access services and also be supported with their parenting skills. This fulfils the role of Corporate Grandparent and ensures the care leaver's child's needs are also prioritised.	Leaving Care SW
12.18	Care Leavers in custody need to be visited as soon as possible when remanded to update their Pathway Plan. They should be visited every 2 months and, a month prior to their release, there needs to be a meeting to agree a resettlement plan.	Leaving Care SW

13. Independent Reviewing Officers

Key Guidance & Protocols

The [IRO Handbook](#) is the statutory guidance for Independent Reviewing Officer and the local authority on their functions in relation to case management and review for looked after children.

The '[Our Reviews, Our Choice](#)' – [Looked After Review Guidance](#) aims to ensure all professionals have an understanding of our child-focused Looked After Reviews.

The [Resolution Protocol](#) is designed to advise service managers and senior managers where problems in care planning or safeguarding are identified by the IRO.

The [Annual Looked After Child Review Guidance](#) provides guidance for Independent Chairs when a child is in a long term placement and has an annual Looked After Child Review.

Practice Standards		
Point	Standard	Responsibility
13.1	The first Looked After Review must be held within 20 working days of a child coming into care.	IRO
13.2	The second Looked After Review must be held in less than 91 calendar days of the first Review.	IRO
13.3	Subsequent Reviews must be held in less than 183 calendar days of the previous review.	IRO
13.4	Looked After Review decisions must be shared with the allocated Social Worker and uploaded to the child's file within 5 working days and the minutes must be distributed within 20 working days.	IRO
13.5	Child(ren) over the age of 5 must be spoken to alone in advance of their review.	IRO

13.6	The allocated Social Worker must be spoken to within 15 working days of the Review to ensure that the child and other participants have been appropriately prepared for the review, to clarify what activity the child would like to do and who they would like present and to confirm that the Social Work Report 'My Looked After Review and Care Plan' or 'My Pathway Plan' is completed and shared at least 5 working days prior to the review.	SW/IRO
13.7	Looked After Reviews will be a child focussed process, engaging the child or young person through an age appropriate activity or discussion whilst keeping adult attendees to a minimum in accordance with the child's views. The Preparation for My Looked After Review should have been completed by the child with the support from their Social Worker to aid this preparation.	IRO
13.8	If the Independent Reviewing Officer has concerns about practice or the Care Plan for the child, this should be discussed with the Social Worker and the operational Team Manager. If concerns are not resolved, the Independent Reviewing Officer should initiate a discussion via the Mosaic workflow to the relevant line manager. If the escalation is not successfully resolved at management level, it should be sent up the line management hierarchy up to Chief Executive level if necessary. The escalation should be resolved within a maximum of 20 working days, in line with our Independent Chairs Oversight and Escalation Policy and our Resolution Protocol .	IRO/TM
13.9	The Independent Reviewing Officer will conduct a Midway Oversight Review between Looked After Child Reviews. This will consist of a file review, and if required a discussion with the Social Worker and Team Manager, to monitor progress of the plan for the child.	IRO

14. Fostering

Key Guidance & Protocols

The [Placement Stability and Extended Moving On Reflection Guidance](#) sets out the process for supporting placement stability and when, following a placement breakdown, an Extended Moving on Reflection meeting might be needed.

The [Matching for Looked After Children with Long-Term Foster Families Policy](#) outlines the protocol for a short-term foster family becoming a long-term foster family.

[Real Talk – Language when talking to children and young people](#) sets out the Hackney Children in Care Council's review of and suggestions for language use when talking about children and young people.

Practice Standards

Point	Standard	Responsibility
14.1	All foster carers will have an up to date enhanced DBS. Additionally, all household members over the age of 18 and support carers to the foster carer will also have an up to date enhanced DBS.	FSW
14.2	A Settling In Meeting should take place, prior to the child coming to live with the foster carer, or no later than 5 working days after the child has moved to the foster home.	FSW
14.3	Foster carer supervision visits will take place every 6 weeks (for long term carers, if agreed at the carer's review, supervision visits will be held every 3 months). The supervision visits will be recorded on the same day if urgent information has come up or otherwise within 3 working days of the visit. Non-primary carers will attend every other supervision (minimum twice a year). These will be recorded within 5 days.	FSW
14.4	<p>Foster carers will receive an annual review within a 12-month period. Children's views are to be obtained by the FSW as part of the annual review process using this feedback tool.</p> <p>The review will be signed off by a manager with a copy provided to the carer and Fostering Independent Reviewing Officer within 5 days before the annual review meeting.</p> <p>All approved foster carers in the household must attend their annual review each year. Minutes from the review should be provided to the Fostering Service Manager within 15 working days.</p>	FSW/IRO
14.5	Each carer will receive a minimum of one unannounced visit in every 12 month period. This will be recorded within 5 working days following the visit.	FSW
14.6	A Health and Safety checklist will be completed as a minimum once every 12 months. This will normally occur as part of the annual review and will be attached to the review report.	FSW
14.7	The safer care policy check will be completed as a minimum once every 12 months. This will normally occur as part of the annual review and will be attached to the review report.	FSW

15. Permanency

Key Guidance & Protocols

The [Children in Temporary and Unregulated Care Arrangements Policy](#) sets out the process for supporting temporary approved carers and carers where the temporary approval becomes unregulated.

The [Permanency Service Transfer Checklist](#) sets out what documents are needed before the child(ren) can be transferred to the Permanency Unit.

Practice Standards		
Point	Standard	Responsibility
15.1	A Permanency Planning Meeting (PPM) will be booked to take place following the first Case Management Hearing (CMH), or within 4 weeks of the initial Public Law Outline (PLO), to agree the final care plan and consider any significant events that might require a change of care plan, with additional PPMs arranged as needed (for example, if expert assessments are received which require oversight).	SW
15.2	Where a child's allocated Social Worker is directed to undertake a Special Guardianship Assessment, prior to a child living with the prospective carers in a temporarily approved arrangement, they must inform the Team Manager of the Permanency Team immediately by emailing the Permanency Team duty (special.guardians@hackney.gov.uk).	TM/duty worker
15.3	The Permanency Team duty worker will begin arrangements for a Special Guardianship preparatory session within 48 hours of allocation.	Permanency Team duty worker
15.4	Where the plan is for a looked after child to live with a prospective Special Guardian or Connected Carer, a Viability Assessment must be completed before the child has moved, or within a maximum of 48 hours after they have moved.	HoS
15.5	The Head of Service will review the Viability Assessment within 24 hours and following approval under Reg 24 will notify the Team Manager the Permanency Team.	HoS
15.6	On notification of the temporary approved (Reg 24) carer, the Permanency Team Manager will allocate the carer to a Social Worker in the Team within 48 hours.	Permanency TM
15.7	Temporarily approved carers will be visited a minimum of 6 weekly and 4 weekly if the arrangement becomes unregulated.	Permanency TM
15.8	If a temporarily approved or unregulated carer is granted a Special Guardianship Order, the Permanency Team Manager will make a decision within 5 days about whether the carer needs to remain allocated to the Permanency Unit for a further period of support, or whether the carer will be deallocated from their worker.	Child's TM/ Permanency TM

15.9	If a Special Guardianship Order is granted to a carer who is not already open to the Permanency Team as a temporarily approved carer, the child's Social Worker must arrange a transfer meeting with the Permanency Team. These meetings are offered weekly.	PSW/ Child's Team
15.10	The Permanency Team will send each new Special Guardian carer a welcome pack within 3 working days of the transfer meeting. (Special Guardianship welcome letter template available here .)	Permanency TM
15.11	Where a carer is allocated for consideration of Adoption Support Fund (ASF) support, an Assessment of Need should be completed within 4 weeks.	PSW
15.12	Where appropriate, an ASF application should be completed within 4 weeks of the completion of the assessment of need.	PSW
15.13	The carer should be closed within 1 week of the ASF application being made and SG informed that they are currently on an ASF waiting list and will be contacted when the intervention can be started.	PSW
15.14	Once a Special Guardian is allocated to a Social Worker in the Permanency Unit for case work support, a home visit will take place within 5 working days.	PSW
15.15	A Permanency Support Planning Meeting will be convened within 10 working days of a carer being allocated to the Social Worker in the Permanency Team. A Permanency Support Plan will be agreed at this meeting.	PSW
15.16	Signed consent will be sought from all Special Guardians at the beginning of an intervention, which will enable the Permanency worker to work in partnership with the professional network around the child and the Special Guardian. (Consent form template available here .) If at any time the family no longer wish to engage with support and cannot be persuaded to do so, then the Permanency Team will need to consider with the referrer/MASH or the Family Help team that transferred the case whether there are safeguarding concerns that need to be addressed through the relevant processes.	PSW
15.18	The Permanency Support Plan will be reviewed within 3 months of the start of the plan, at a follow up network meeting. Following the review, a decision will be made as to whether the plan needs to be extended for a maximum of a further 3 months by the Permanency Team Manager, or to close to the service.	PSW/TM
15.19	All Special Guardians who are allocated to the service for case work support should be visited at least on a 4 weekly basis.	PSW

16. Private Fostering

Key Guidance & Protocols

The [Private Fostering Statement of Purpose](#) outlines policy and practice with private fostering arrangements within the borough of Hackney, including how private fostering arrangements will be assessed and monitored and how advice and support will be offered to private foster carers, privately fostered children and their parents.

Practice Standards		
Point	Standard	Responsibility
16.1	<p>Within 7 working days of a notification of a private fostering arrangement being received, a Social Worker must carry out the following:</p> <ul style="list-style-type: none"> • visit the home of and speak with (both of) the actual or prospective private foster carer(s) about the care arrangements for the child; • speak with the child alone; • make (if possible, face-to-face) contact with everyone with PR for the child to establish consent for the private fostering arrangement; • ascertain the views of all other members of the household of the private foster carer(s) about the care arrangement for the child. 	SW
16.2	Where the case is already allocated within the service, notify the Private Fostering Team Manager so the child can be co-allocated, and reflect the child's status on Mosaic.	SW/Private Fostering Team Manager
16.3	A Private Fostering Assessment will be completed within 45 days of the notification of the arrangement being received by MASH. The Assessment will include the views and wishes of the child(ren)'s parents or those with parental responsibility and the outcome of DBS checks and checks with the professional network.	SW
16.4	If the arrangement is approved but difficulties occur which prevent it being presented to the Stability Panel for ratification within 45 days of the notification, these difficulties should be escalated to the Service Manager.	SW/SM
16.5	Private fostering arrangements will be presented at the Stability Panel for ratification no later than 10 working days after the completion of the Assessment.	SW
16.6	A privately fostered child should be visited a minimum of every 6 weeks in the first year and a minimum of every 3 months in subsequent years.	SW
16.7	The private fostering arrangement will be subject to an Annual Review by the Social Worker which will be approved by a Service Manager and presented to the Stability Panel.	SW/SM

16.8	When a child in a private fostering arrangement reaches the age of 15½, the Social Worker will initiate a discussion with the child, their family and their carer about whether support will continue to be offered after they reach the age of 16 and, if so, what form it will take. Following this discussion, the Service Manager will ensure the child's file includes evidence of management oversight of any decisions made.	SW/SM
16.9	If there are any significant concerns about an arrangement which would mean the arrangement would need to end this should be discussed with the Head of Service and presented to the Stability Panel.	HoS
16.10	If the arrangement needs to end the Social Worker should present the child at the Stability Panel where the decision can be made to prohibit the placement.	SW

17. Disabled Children

Key Guidance & Protocols

The [Disabled Children Service policies and procedures](#) and [Safeguarding Disabled Children Practice Guidance](#) set out how the Disabled Children Service operates.

Practice Standards		
Point	Standard	Responsibility
17.11	Care package assessments will be completed within 35 working days from the point of allocation.	DCS SW
17.12	The child(ren) will be visited within the first 10 working days from the point of commencing the Care package assessment.	DCS SW
17.13	The Carer's Assessment will be completed within 20 working days.	DCS SW
17.14	Following ratification of the Care Package Assessment at the Care Package Panel the child(ren) will be visited at least every 30 days whilst the support agreed in the Care Package Assessment is set up.	DCS SW

Quality Assurance Standards

Practice Standards	
Point	Standard
Q.1	<p>The Quality Assurance Framework provides insight into the quality of practice and the degree to which this is having a positive effect on children and their families in Hackney. Key to this is measuring impact – it is critical to understand what difference Family Help is making for our children.</p> <p>Outcomes for children are at the centre of our framework, which is driven by our commitment to anti-racist practice and systemic principles:</p> <ul style="list-style-type: none"> • Context: We see the bigger picture. Children and families are part of a wider set of systems and relationships, including race, religion, culture, gender, family stories, and beliefs. • Collaborative: We work with, not to. We want to understand and learn from the people and communities we work with. We understand that our own experiences can affect our views and decisions. • Curious: We always want to understand. We know we cannot always know things for certain; we are continuously curiously creating, testing and creating our thoughts and ideas around the way things are and why. • Relationships: We focus on relationships. The problem is the problem, not the person. By working together, we believe we can find solutions. We do not blame or judge, and we do not focus on labels. • Multiple Voices: We aim to understand all perspectives by working in partnership with families and hearing their viewpoints. This opens up opportunities for dialogue, positive change and helps us to safely manage risk and uncertainty.
Q2	<p>How we will quality measure and assure our standards</p> <p>Guide: Deliver training, policy, and guidance to reach standards</p> <ol style="list-style-type: none"> 1. Workforce Development 2. Workforce Training 3. Evaluation of Training 4. Impact measures.

<p>Q.2</p>	<p>Track: Monitor, audit, gather information and feedback</p> <ol style="list-style-type: none"> 1. Performance data 2. Audits 3. Deep dive reviews of practice 4. Staff Supervision 5. Family feedback 6. Participation 7. Inspections 8. Practice Weeks 9. Learning Visits 10. Rapid Reviews, Local Child Safeguarding Practice Reviews, Domestic Homicide Reviews, Extended Learning Reviews, Near Miss Reports 11. National Learning <p>Analyse: Consider and evaluate the information gathered – what have we learned, what was the impact for children?</p> <p>Improve: Identify actions to continuously improve</p> <ol style="list-style-type: none"> 1. Reporting to Heads of Service, including any recurring themes and gaps in provision 2. Annual service development plan 3. Reporting to the Improving Outcomes for Children Board on a quarterly basis
<p>Q.3</p>	<p>Records should provide an audit trail; decision-making in assessment, planning and review and demonstrate evidence that outcomes have been achieved.</p>
<p>Q4</p>	<p>Audits</p> <p>1. Routine Audits</p> <p>Each Team Manager and Practice Lead will complete one routine audit per month, with moderation undertaken by their line manager</p> <ul style="list-style-type: none"> • The manager will undertake the audits using the routine audit form • The audits are moderated by the auditor’s line manager within the monthly cycle using the moderation section of the audit • Any findings and actions from the audits and moderation will be discussed in supervision • Completed audits will be uploaded on to the child’s file <p>Analysis: Quarterly reports will be completed by the QA hub, analysing audits in each service to establish themes and learning from the routine audits and used to improve practice.</p>

<p>Q.4</p>	<p>2. Learning Conversations</p> <p>3x per year, the QA hub launches Learning Conversation: thematic, service wide audits that are completed by Senior Leaders in CFS. These are mainly qualitative, and focused on exploring practice around a theme</p> <ul style="list-style-type: none"> • QA Hub allocated Learning Conversations to auditors, • Audits are completed and moderated by the auditor’s line managers • Any findings and actions from the audits and moderation will be discussed in supervision • Completed audits will be uploaded on to the child’s file <p>Analysis: Reports are completed by the QA hub, analysing each audit, establishing themes and creating an action plan for improvement.</p> <p>3. Multi Agency Case Audits (MACA)</p> <p>The City & Hackney Safeguarding Children’s Partnership (CHSCP) initiates multi-agency auditing. These are completed twice a year, in April and November, by managers in CFS. Once partners have completed their audits, CHSCP then amalgamates findings from the audits and report on these.</p> <p>4. Dip Samples</p> <p>Dip samples are completed on an ad-hoc basis, where service areas have a particular area of practice they would like to explore. The QA Hub creates the tools in collaboration with each service. All dip samples are analysed in quarterly audit reports, completed by the QA team.</p> <p>In addition, the QA service launches Impact of Audit Dip Sampling 3x per year, which are follow-up dip samples for cases previously rated as ‘inadequate’ or ‘requires improvement’ within the preceding six months, tracking the impact of the initial audit on the child’s outcome. Analysis: Reports are completed by the QA hub, analysing each Impact of Audit dip sample, establishing themes and making service level recommendations to improve practice.</p>
<p>Q.5</p>	<p>Closure</p> <p>A closure summary record will be completed by the allocated practitioner and then quality assured and signed off by their manager.</p>
<p>Q.6</p>	<p>Performance data relevant to the team should be reviewed by the manager on a fortnightly basis at a minimum, and weekly as best practice. Data must be regularly discussed with Service Managers (no less than monthly) to highlight strengths and address issues for improvement.</p>

