

# PRACTITIONER GUIDE

## Agency Roles and Responsibilities – Social Care Practitioner (including Social Workers)

Children and families social care practitioners help to establish safe and stable environments for children. They assess risk, protect children, provide support to parents and establish relationships with all family members. Children and families social care practitioners play a key role in improving the lives of families in need.

This guide provides information regarding the role of a children and families social care practitioner in relation to children who are identified as being in need or requiring protection.

### Child in Need

A Child in Need is defined under the Children Act 1989 as a child:

- who is unlikely to achieve or maintain a satisfactory level of health or development,
- or their health or development will be significantly impacted, without the provision of services,
- or a child who is disabled.

Child in Need assessments are carried out under section 17 of the Children Act 1989. In Hampshire, assessments are completed within 15 days of the referral being made to Children's Social Care.



**KEY MESSAGE:** Assessments carried out under section 17 are voluntary. This means that parents/carers may decide not to agree to the assessment being undertaken or any subsequent Child in Need plan.

**KEY MESSAGE:** If an assessment under section 17 or a Child in Need plan is closed due to a lack of parental engagement, other involved agencies should be aware that the closure of the plan does not indicate a decrease in the perceived level of risk/need or indicate progress against the goals on the plan.

For the assessment of the child and family, the social care practitioner will draw together relevant information and history from the child and their family and from relevant practitioners. This may include teachers and school staff, early years workers, health practitioners, the police and adult social care. Information from all agencies will support understanding the level of need of a family and of protective and risk factors for the child. It is the role of the social care practitioner to analyse all the information gathered from the assessment, to decide the nature and level of the child's needs and the level of risk, if any, they may be facing. The assessment will determine what, if any, intervention is required by children's social care and any other services or support that may be required to deliver improved outcomes for the child.

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## What happens following an assessment if the decision is made that there is no role for Children’s Social Care?

If there is no role for children’s social care, then the case will be either be referred to other appropriate services, such as early help and/or closed to the team. The social care practitioner will inform the referrer of what action has been or will be taken, along with informing the family and all relevant agencies of the decision.

## Child in Need Planning Meeting

Where the outcome of the assessment is for continued involvement from children’s social care, a Child in Need plan will be drawn together by the social care practitioner to outline the actions to be taken to improve the child’s outcomes.

### What is included in a Child in Need Plan?

- What is working well within the family;
- what support is required and why;
- which agencies will provide the required services;
- what the family agree to do;
- what the expected outcomes are;
- what the timeframe of the plan is and when it will be reviewed.

A Child in Need meeting will be convened and chaired by the social care practitioner, with the family and professionals to confirm the plan to meet the child and family’s needs as identified in the assessment.

### Review of a Child in Need Plan

The Child in Need Plan is regularly reviewed. The review points should be agreed by the social care practitioner, with other practitioners and with the child and family, to continue evaluating the impact of any change on the welfare of the child. If there are significant changes in the family circumstances, then the social care practitioner will convene an early review meeting.

If it is identified that interventions have not been effective in addressing change, consideration may be made to evaluating whether the threshold of Child in Need remains appropriate or concerns require escalation. A case can be ‘stepped up’ or escalated to child protection procedures at any time during the Child in Need process, if it is believed that the child may be at risk of significant harm. This can be requested by any agency involved and, if agreed by children’s social care, should trigger a strategy discussion. If services or actions are not having the necessary impact the plan should be reviewed to consider what the barriers to change are and if the plan needs adjusting.

### Closure of a Child in Need Plan

Typically, a Child in Need plan is agreed for closure during a Child in Need review meeting, ensuring that all agencies are consulted prior to the decision to close the case by children’s social care. It is recognised that in some circumstances this may not be appropriate or possible. In all cases, decisions for closure should be formally documented and evidenced.

At the point of a Child in Need case being closed, consideration will be given whether early help support and services are needed, with some services continuing to be provided by a single-agency or a range of agencies under an early help plan.

**KEY MESSAGE:** Any changes to the Child in Need plan should be agreed by the allocated social care practitioner and communicated to involved practitioners from partner agencies.

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## Child Protection

If there are reasonable grounds to suspect that a child is suffering or is likely to suffer significant harm, children's social care are required under Section 47 of the Children Act 1989 to initiate enquiries. This is to find out what is happening to the child and whether protective action is required to safeguard and promote their welfare. There may be a need for immediate protection whilst the Section 47 enquiries are carried out. These enquiries may be undertaken jointly with the police, if it is considered that a crime may have been committed.

It is the role of a social worker to lead enquiries under section 47, with the police, health practitioners, teachers and school staff and other relevant practitioners. Section 47 enquiries are carried out by means of a multi-agency assessment and this must be concluded within 15 working days from the date of the referral being received. In practice, section 47 enquiries can be concluded more quickly.

Social workers are responsible for analysing the findings of the section 47 enquiries and the evidence about what interventions are likely to be most effective and deciding what action to take to safeguard the child/ren, alongside other relevant practitioners.



**Where concerns of significant harm are substantiated** and the child is judged to be suffering or likely to suffer significant harm, an **initial child protection conference (ICPC)** is held within 15 working days of the strategy discussion at which section 47 enquiries were initiated.

**Where concerns of significant harm are not substantiated**, the social worker will discuss the case with the child, parents and other practitioners to determine whether support from any other services may be helpful and help secure it. This may include a Child in Need plan.

## The Initial Child Protection Conference

An initial child protection conference brings together family members (and the child where appropriate) with the practitioners most involved with the child and family, to make decisions about the child's future safety, health and development. The aim of the meeting is to analyse, in a multi-agency setting, all relevant information and plan how best to safeguard and promote the welfare of the child, making recommendations on how organisations and agencies work together.

## Outcomes of an Initial Child Protection Conference

Following an Initial Child Protection Conference (CPC), a decision will be made regarding next steps:

**Place the child on a Child Protection Plan** if the child is at continued risk of significant harm.

**'Step down' or de-escalate a case into the Child in Need process**, with a Child in Need Plan written to address identified issues.

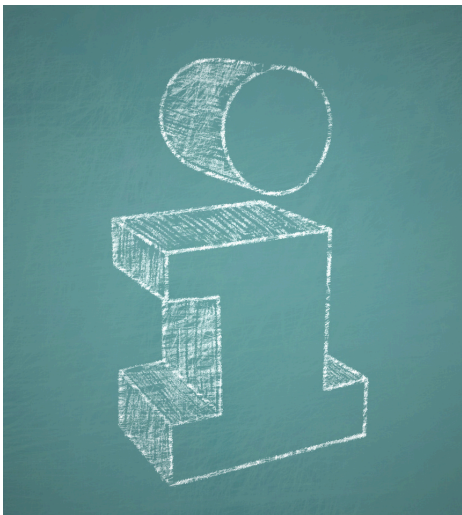
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## A Child Protection Plan

While a child is subject to a Child Protection Plan, a core group of professionals will be identified at the child protection conference. The core group should be made up of professionals from the different agencies involved and is led by the social worker. The core group should meet within 10 working days from the initial child protection conference and is responsible for implementing the child protection plan. The core group takes joint responsibility for carrying out the agreed tasks, monitoring progress and outcomes, and refining the plan as needed to safeguard the child and minimise risk of harm.

**KEY MESSAGE:** Any changes to the Child Protection plan should be agreed by the allocated social worker and communicated to involved practitioners from partner agencies.

The first child protection review conference is held within three months of the initial conference.



## Further information

- [1.2 Assessment Procedure | Hampshire, Isle of Wight, Portsmouth and Southampton \(hipsprocedures.org.uk\)](https://hipsprocedures.org.uk)
- [1.3 Child Protection Section 47 Enquiries Procedure | Hampshire, Isle of Wight, Portsmouth and Southampton \(hipsprocedures.org.uk\)](https://hipsprocedures.org.uk)
- [1.4 Child Protection Conferences | Hampshire, Isle of Wight, Portsmouth and Southampton \(hipsprocedures.org.uk\)](https://hipsprocedures.org.uk)