

PROCESS FOR EARLY HELP TRANSFERS

June 2019

(Review June 2020)

1. PURPOSE OF THIS DOCUMENT

This document identifies the various processes involved in transferring cases from/ to Early Help.

The child's journey is one that all partner agencies wish to ensure is as smooth and time limited as possible. The aim is to ensure every child receives the right service at the right time that they need it.

Wirral's Children's Transfer (Step Up/Step Down) procedure aims to:

- Ensure children and families receive timely interventions
- Ensure Children and families receive the appropriate level of service based on identified needs.
- Enable information sharing to prevent children/families from retelling their story.
- Ensure practitioners are clear about when and how cases are transferred.

Wirral Children Safeguarding Board have an agreed Threshold Document that defines the four levels of need in the continuum. (<https://www.wirralsafeguarding.co.uk/multi-agency-thresholds/>) The Safeguarding Children Board website provides a number of tools which support professionals to describe levels of need, monitor if and how levels of need change, and thus be able to identify the appropriate threshold level for safe and effective support. (<https://www.wirralsafeguarding.co.uk/tools-for-professionals/>)

This transfer (step up/step down) approach describes the way in which a family can be supported by different services and interventions depending on their level of need. At the lower end of the spectrum, needs and additional needs can be met by universal services (level 1) or by a single agency providing extra support (level 2).

The transfer process is intended to support children to have their needs met through lower, less intrusive, levels of intervention. 'Early Help' support provided at levels 2 and 3 should aim to identify and meet needs in an effective manner to prevent escalation, and, as importantly, to be available to support families to maintain positive change as levels of need de-escalate.

2. EARLY HELP PRINCIPLES

- Transfer to Early Help should be completed within 2 weeks unless an alternative transfer point has been agreed.
- Consultations should take place with Early Help, to identify transfers and any remedial actions required to facilitate the transfer
- Prior to the formal transfer date, the new worker and current worker should plan introductions to family and professionals and should also write to all confirming transfer has occurred. This letter should include the new workers team and contact details.
- A Case Transfer Summary should be authorised on LCS by the manager prior to the transfer taking place
- Assessments, reviews and care plans will usually be required (it is acknowledged there may be occasions when there are some exceptions which will need agreement by both transferring and receiving Team Manager)
- The receiving team will take responsibility for updating LL with the new worker and team.

3. UNIVERSAL SERVICES

3.1 Threshold of Need Level 1 and 2

Universal (level 1) services are provided to all children. This includes services such as education, access to a GP and dentist, and many more provisions. Most of the population will be effectively supported by these services for the greater proportion of their childhood.

If a child requires additional support, as described at level 2 in the Threshold Guidance, this should be provided either by the agency identifying the need (through their own resource) or sourced from a secondary service which can provide the required resource or expertise.

Please visit [the WSCB website](#) for details of the Early Help Offer.

3.2 Threshold of Need Level 3

When there are multiple needs, or there is an increase in the complexity of need (as described in the Threshold Document) it may be necessary to step up to level 3. Level 3 interventions requires an EHAT, Professionals identifying the need for a level 2 or 3 intervention should undertake an EHAT assessment and initiate a Family Plan or if a multi-agency response is required engage a 'Team Around the Family' to enable support to be provided. Having completed the EHAT and subsequent family plans the Key Worker or Lead Professional should submit the document to: earlyhelpteam@wirral.gcsx.gov.uk

The EHAT will be stored securely on the Early Help children's system and outcomes from the intervention recorded. EHAT's will be quality assured by the Early Help QA group.

If the professional identifying the level 2/ 3 need is not able, or not appropriately placed to undertake the EHAT they should submit an Early Help Request for Service form to the Early Help team earlyhelpteam@wirral.gcsx.gov.uk, indicating the need for a level 2/3 intervention. The Request for Service should always be discussed with the child, young person and family, with their consent clearly indicated on the form.

Where there are concerns for L3/4 risks a Safeguarding Request for Service should be completed with consent from parents, to Integrated Front Door IFD@wirral.gov.uk. All referrals will be reviewed by a social workers and they will make a decision whether these will go straight to social care for assessment, require a MASH assessment, or whether these will be sent to Family Matters or Early Help Community Matters. In the case of Early Help Community Matters, the Community Matters Early Help team will be responsible for identifying a lead professional and providing advice and support to the Key Worker /Lead Professional.

Tools to support Key Workers and Lead Professionals to undertake EHAT and family plans are available through the Wirral [Safeguarding Children Board Website](#)

3.3 Threshold of Need Level 4- Step Up

Any Step Up (transfer) to Children's Social Care is only agreed when children's needs cannot be met at the lower level of the continuum. Child Protection processes are only invoked when a child is believed to have suffered, or be at risk of suffering, significant harm. Making a child subject to a Child Protection Plan is a very serious decision, and the child should only remain subject to that Plan whilst there is an active likelihood of significant harm occurring to him or her.

Where Early Help interventions are not progressing or needs are escalating, the case can be reviewed at the weekly Allocations Meeting. Key Workers and Lead Professionals should discuss their concerns/difficulties with CM EH Team 608.6510 and, where appropriate, submit Stuck Case Pro-forma to the team who will then book in the Key Worker/Lead Professional to attend and discuss their concerns at the next available meeting. The Allocation Meeting will consider the case and where appropriate additional resource, support and advice will be provided to maintain the child and family at level 3. Where the multi-disciplinary group agrees that a referral to Children's Social Care is required, the IFD Advanced Social Work Practitioner attending the Allocation Meeting will note agreement and details of the case discussed will be provided to Children's Social Care to support their assessment of need.

Cases allocated to Family Matters requiring step up to Level 4 will have family managers oversight and a decision will be added to EHM by the manager that this requires stepping up to Level 4. The Family Worker will submit a MARF to the IFD.

In all cases which are being stepped up to Level 4, consent must be gained from the young person and family. Unless, the consent will put the child at greater risk or if the family will not consent and there are child protection concerns.

At any point during an EH intervention, if concerning information about the safety of a child/young person is received, or where the family situation deteriorates such that there are child protection concerns, a referral should be made to the Integrated Front Door using the Request for Service form, clearly setting out the concerns and including the evidence for these. Additional information contained in the EH plan/minutes would be helpful in providing context of the work carried out so far. It is the expectation that the family is aware of the referral, unless to do so would place the child or young person at immediate risk of harm.

(Wirral Safeguarding Children Board requires that referrals to Children's Social Care are accompanied by appropriate tools such as the Graded Care Profile, Brook Traffic Light Tool, etc. (<https://www.wirralsafeguarding.co.uk/tools-for-professionals/>))

On receipt of the Request for Services form the IFD will triage the case and if it is clear that level 4 needs are met the case will be forwarded, as a referral to the appropriate Children's Social Care Team for either a S.47 enquiry or a Social Work Assessment (SWA). It is important that the relationship between the EH Professional is maintained as this will support a smooth transition when the case is ready to transfer.

Family Matters workers who escalate to level 4 will continue to be involved with the family up to 6 weeks.

If a service request to Children's Social Care is not accepted by the IFD as meeting the Level 4 threshold, the professionals should continue as before, although a further request should be made if concerns escalate in future. These cases will be reviewed by the Head of Service in Family Matters who will determine the next course of action. case note will be added to the EHM case file to reflect the decision taken by the Head of Service.

STEP DOWN

Children's social care should always aim to reduce their involvement as the children / family's needs become met. Families, children and young people identified by Children Social Care for potential step down to early help will be identified at the earliest opportunity as part of ongoing case reviews.

Social workers will consider all options for step down, including universal service providers. The [Safeguarding Board Website](#) hosts a directory of such services (entitled CAMHS- Early Help Resource Information Pack). Step downs will only be accepted into early help where the level of need has been reduced to meet the criteria as set out in the Wirral Threshold of Need Policy.

4.1 COMPONENTS OF AN EARLY HELP STEP DOWN

Once a decision to step down has been made, Early Help Step Down Must include:

- Consent of the family to work with Early Help Service must be sought by the allocated CSC Social Worker.
- A joint visit with the appropriate professional i.e. youth offending, health visitor, early help worker.
- Child (REN) being seen and spoken to alone
- Consent obtained for information sharing
- A Transfer Plan. The Transfer plan must include:
 - what the aim of the Intervention is and the expected outcome
 - Identification of a contingency plan should Intervention be decline
 - If/when the Case will close to Children's Services (the views of partner agencies must be obtained at the meeting).

Once the above have been completed, and a final meeting has taken place, the step down will be completed within the Liquid Logic system within 5 working days.

4.2 Step Down from a Social Work Assessment of Need to Early Help.

Not all children and families will need additional support following a Social Work Assessment. Where there is no additional identified need, children will continue to access universal services. If there is additional support required there are a number of options to consider.

4.2.1 Options

4.2.1.1 Lead Professional

The social worker must identify a lead professional within the partnership and have a conversation with them to agree the associated timeframes. If this is agreed the step down is sent to the Community Matters inbox for coordination and the case can be closed to social care.

- Social Workers should also consider what services and support is offered via the partnership. A directory of services can be found on the WCSB- **Link to be added** If following conversations within the partnership a lead professional cannot be identified, the social worker must speak to the Partnership Manager and representative from Family Matters who will be present in Cheshire Lines every Wednesday morning.

The aim of this discussion is to determine if the case should be presented to the weekly allocation meeting, chaired by the Partnership Manager for a lead professional to be identified.

Discussions should take place between the necessary Team Manager and Partnership Manager for any case that is not deemed appropriate to present to the allocations meeting. It is the responsibility of the Social Work Team to determine case closure in these circumstances. A clear rationale should be recorded on the child's file.

○ Family Matters

- Family Matters consists of Targeted Family Support Teams, the Pre-Birth and Infant Team, the Family Group Conference Team and the Adolescent Response Team. These teams provide targeted support and deliver a number of interventions aiming to complete such interventions within a six-month period. A consultation with the appropriate Team Leader must have taken place, prior to a step down to the Family Matters Team.

4.2.1.2 Early Childhood Service (ECS) Family Work

- ECS family workers work with families who have a child under five years, offering early intervention help and support. Family Workers can support families at the earliest point of intervention, by way of a direct referral to ECS as a single agency response, or as part of a multi-agency plan/support package when needs have been escalated through the Integrated Front Door (IFD). The length of the support package offered will be dependent on the needs of the family.
- Assessment of need and development of appropriate action plan is a joint process between the family worker and family. The assessment is key in identifying the right level and type of support needed by completion of an Early Childhood Assessment (ECA) or where needed an Early Help Assessment (EHAT), to broaden out the partnerships needed in meeting the child/family's needs.

4.2.2 Social Work Assessment (SWA)

Access to Early Help via Family Matters can be considered during the assessment. The following criteria will apply for each of the Teams.

- **Adolescent Response Team (ART)** – Targeted Intervention with the adolescent will be undertaken to reduce risk and prevent CLA. ART work with 12-18-year olds who are at risk of becoming CLA. This service will work at Child Protection and CLA if the plan is rehabilitation.
- **Pre Birth and Infant Team(Pre-BIT)**- The service will mainly be targeted to women in the gestation of between **16 to 28 weeks**. They may have had previous new-born/infants removed and therefore be known to Wirral's Children's Services. They may be mums or fathers who themselves have been a looked after child. They may have a recognised learning difficulty. They may have a history of exposure to the key factors that will present

as a risk to a new-borns well-being, such as domestic abuse, substance misuse and mental health as example.

- **Family Group Conference (FGC)**- This service will undertake a FGC at any stage of the Social Work involvement, however, this is not a step down service and the Social Worker will need to keep the case open until the FGC has been completed. This service will also offer Family Meetings which will assist in addressing some of the conflict families encounter. Again, this is not a step down service and the case must remain open with the Social Worker until the meeting has been completed.
- **Targeted Family Support**-This Service will provide intense targeted family support to prevent children requiring level 4 statutory service. This Service will work with families following the completion of the assessment when it is identified targeted family support work is required and the case will be stepping down from Level 4.
- Team Managers must consider at key review points (5 and 15 day) of any SWA what support is required for the family. The Social Worker or Team Manager must undertake a case consultation with the Family Matters Team Leader. If the request is appropriate the following must apply
- Social Worker will be advised to complete a case transfer to Family Matters and put this into the tray for the appropriate team on EHM.
- the Social Worker must be clear in the transfer document what support/ intervention is required.
- Consent must be given by the family/ young person that they will agree to work with Family Matters
- Agree a joint visit, also invite to CIN meeting if one is being convened.
Clear contingency plans if the Family do not engage with Family Matters.

4.3 Step-Down from Child Protection Plan to Early Help

- All children will now Step Down from a Child Protection Plan to a Child in Need Plan for a period of three months. As part of the Child Protection Planning process consideration should always be given to a Family Group Conference. The Adolescent Response Team will provide targeted interventions to adolescents within Child Protection to reduce risk and prevent escalations to CLA.
- Targeted Family Support Team will work with families who step down from Child in Need if it has been identified a piece of targeted family support is required.
- The Pre-Birth Infant Team will work with pregnant women between 16-28-week gestation.
- Requests for any of the Family Matters Teams will require a consultation with the Team Leader of that service. A referral form will then be completed on LL and sent to the tray on EHM of the appropriate team. The exception is when a case is closing to CSC and a step down has been agreed, the Social Worker will complete a case transfer to the appropriate team.

4.4 Step Down from Level 2/3 to Universal services

It is the responsibility of individual agencies to decide the appropriate timing of step down from additional support to universal services. This decision should be based on the child's needs having been met through the additional support service. Agencies should undertake their own quality assurance to ensure that the services provided