

The Child's Journey



A guide to help you understand frontline children's services



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Welcome

This document has been designed to help you understand and see the child's journey with Slough Children's Services Trust (SCST).



The journey will, of course, be different for each child, dependent on their needs and risk of harm.

Most children and their families will only experience our edge of care services but others will cross the 'threshold' into statutory care.

We have included visual explanations of roles as well as a narrative to 'walk you through' the processes which are in place and to explain the points of transition for children.

Throughout this booklet, you'll see lots of hands. These are taken from our tree logo. We use the hands as a visual representation to explain how our service works. The green hand is the child, young person and their family and, as you'll see from our diagrams, it is at the centre of everything we do.



The frontline structure





Our systemic 'whole approach' social work model

At SCST, we work in a systemic way, which means a holistic approach to the whole family, in terms of behaviour, relationships, circumstances, locality and other 'systems' around the child.

We call our approach 'safe, secure and successful'.

A defining element of family therapy is that problems are often embedded within relationships; that is, problems are understood as being *interpersonal* rather than *intra-psychic* (within the individual).

Interpersonal relationships can extend to those the family has with schools, their community and, indeed, with us.

This shift in emphasis towards a relational framework and away from an intra-psychic one can, we believe, have a liberating effect on the children, young people, parents and carers we work with.

For example, a child in a foster placement who is behaving in a challenging way towards their carer, and towards their teachers at school, is freed from the stigma of being seen as 'the problem', as the issue is understood as being embedded within their *relationships* at home and at school.

In a similar way, the worker is liberated from searching for a way in which to fix the 'problem child' by focusing on, for example, a disrupted



Our systemic 'whole approach' social work model

early attachment relationship and, instead, can focus on working with the 'systems' in which the child is located. The problem is shared between the members of these systems and so each member has a role to play in resolving the problem.

Research evidence suggests that when systemic ideas and practice are applied within the context of children's social care, positive outcomes can be achieved across a range of commonly presented difficulties such as childhood physical abuse and neglect, conduct problems in childhood and adolescence, including behaviour and problems with attention and over-activity (Carr, 2000).

Further evidence suggests family therapy has

proven effectiveness and covers a wide range of difficulties (Stratton, 2005).

We believe that our systemic approach, used throughout our services (both below and above the statutory threshold) can clearly help tackle problems before they become more difficult to reverse.

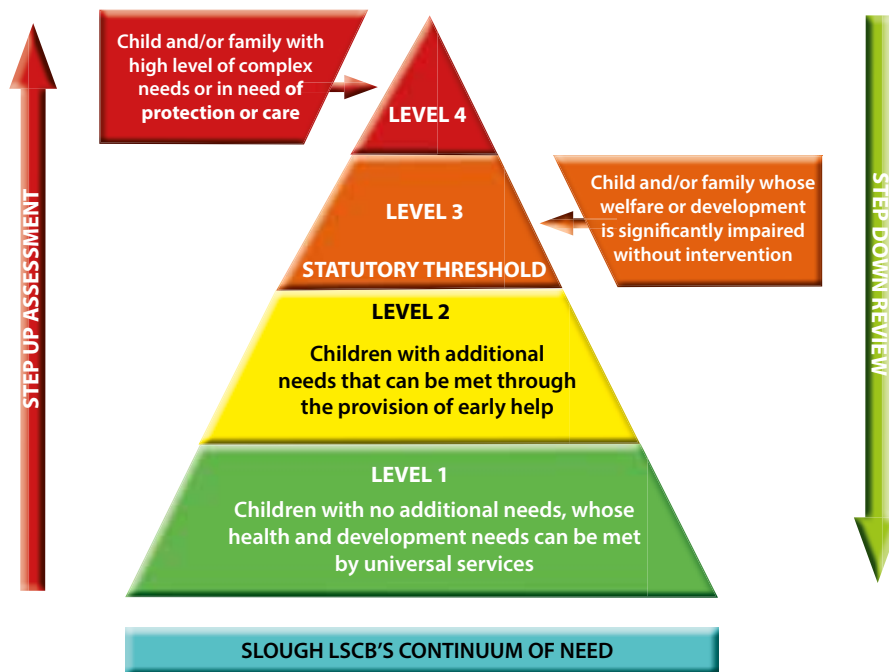
It not only prevents more children from coming into care but help those who do move out of the care system more quickly and allows us to concentrate on those who remain in our care.

In essence, everyone we work with has the ability to be safe, secure and successful. It's our job to help make that happen for all.



LSCB's continuum of need

Slough Children's Services Trust works in accordance with the LSCB's continuum of need and the accompanying threshold document.





First Contact/MASH

(generally referred to as THE FRONT DOOR)

First contact is the 'front door' for children's services. It is, as the name implies, where initial concerns about a child's wellbeing and/or safety are first raised and where contact with the service begins.

Demand can vary from a minimum of 150 contacts up to 280 per week. The front door works hard to minimise the number of contacts converted into statutory referrals and to prevent those who can safely remain with their own families being taken into care unnecessarily.

Decisions are made in this hub on where best to refer a child. This is done in close partnership with the Slough MASH (Multi-Agency Safeguarding Hub), where professionals with specialist training in this area make decisions.

Referrals divide into Early Intervention referrals (as described on the next page) and the more traditional

social work cases which cross the threshold and require child protection-type intervention to safeguard children who have suffered harm or are at risk of significant harm.





First Contact/MASH

(generally referred to as THE FRONT DOOR)

Anyone with a concern about a child should call the First Contact team on **01753 875362**. You can also look for further details on our website: www.scstrust.co.uk

The MASH (Multi-Agency Safeguarding Hub) enhances the service through additional sharing of information.

This helps us identify risks to children and adults at the earliest possible point and then to offer or signpost to the most effective interventions.

This might be information & advice, identifying and reducing harm, crime or anti social behaviour, or it may be escalation into children's services.

The MASH can be contacted via First Contact.

In an emergency, an electronic multi agency referral form (MARF) should be sent to:

Child.Protection@slough.gcsx.gov.uk

*If the child or young person requires immediate protection please call the First Contact team and send the MARF to the secure email address above.

Early Intervention

The Early Intervention Hub works with cases at Levels 1 and 2 where there is no *immediate* risk of significant harm. The hub will work with the whole family for at least 12 weeks to complete a whole family assessment and action plan.

The hub, which consists of social workers (all levels), family support workers and has access to specialists, such as clinicians and multi-agency staff from health, substance misuse and other services. It offers help,



Early Intervention Hub

guidance and support which is tailored to individual child and family needs.

It may be that, after assessment, or if further information comes to light, a case may need to be escalated into statutory care but the majority of Early Intervention cases can be dealt with through intensive intervention.

Innovation Hub

(incorporating Slough PAUSE - see p12)

The Innovation Hub is an extension of the Early Intervention Hub and, we believe, a future model for multi-agency practice.

This hub has fewer social workers, more family support workers and specialist workers from partner agencies e.g. police officer, worker from the Department of Work





Innovation Hub

(incorporating Slough PAUSE - see p12)

and Pensions, a domestic abuse co-ordinator and worker and a drugs and alcohol specialist support worker.

While the bulk of the hub's work has a domestic abuse component, through the Inspiring Families programme, it is often other multi-faceted problems which have brought children and their families into the hub's remit.

This hub does relatively short term but high impact intensive work to change behaviours so that the child and family do not need to be escalated into child protection or even taken into care.

Hub work includes a focus on changing parenting behaviour, treatment of anti-social and criminal behaviour as well as seeking to reduce addictive behaviour which affects safe parenting.

It is sometimes referred to as the 'edge of

everything' meaning edge of child protection, edge of care proceedings, edge of removal from school and so on.





Slough PAUSE

The Innovation Hub incorporates Slough PAUSE team, which works with women who have experienced, or are at risk of, having children removed from their care under child protection proceedings.

These women are typically young, disadvantaged and living with intersecting and numerous social, emotional, environmental and health-related challenges.

The numbers of women may be relatively small, but their children's life courses and outcomes are significantly marginalised. These children are often born with short and long-term physical and emotional difficulties and many become vulnerable adults requiring significant interventions from public services throughout their lives.

PAUSE has been found to improve the lives of those

it works with by increasing engagement with other services, including healthcare, and tackling issues of self-esteem and trauma. Most significantly though, it reduces the number of children entering care.

In a relatively short space of time (from July 2017, when it was launched), Slough PAUSE has become the fastest growing PAUSE project in the current tranche nationally.

Women who meet the criteria but are not engaged with PAUSE and currently pregnant will most often be cases which need pre-birth assessments to evaluate risk and to decide if their babies will be safe to be discharged from hospital with them.

SCST is working to reduce the number of such assessments by working innovatively, through projects such as Slough PAUSE, which has better outcomes for the women and their children.



Child Protection

This area of the service is for child protection cases and children deemed to be 'in need', which is defined as those children who may not reach the usual childhood milestones without additional support .

It's where most of the statutory engagement with families takes place and where we find children who have a clear, ongoing risk of significant harm.

That significant harm is usually attributable to acts of commission and omission by parents and can result in emotional, physical, psychological and educational under development of the children affected.

Here, social workers are engaged with families for longer, sometimes up to two years, and while a little less intensive than the previous stage of the child's journey, weekly visiting, supported by family support interventions is not unusual.



The intention is to have the same impact i.e. to change parenting behaviour, to protect the child, to develop the child's resilience to behaviours and situations in the family home which may continue while the child is on a Child Protection (CP) plan.



Child Protection

The ultimate contingency is that if the work is not meeting the success criteria set out in the Child Protection plan, a formal letter is written to the parents under Public Law Outline (PLO) which entitles them to obtain legal aid. The Trust's lawyers will set out what the social worker requires to stop, start and continue in order to satisfy the hub that it is not necessary to take the case to Court to have the children removed.

In most cases initiating PLO generates enough of a crisis to cause the family to come together, sometimes under the auspices of a Family Group Conference (FGC), and things improve.

Not all children in this part of the service are on Child Protection Plans. Some may be on Supervision Orders (for up to 12 months), where they live with their family but where social workers work alongside

the family to ensure things don't slide backwards and that the children continue to develop and thrive.

Sadly, or fortunately for the children in a few cases, there is no alternative but to issue proceedings to remove the children, for their own safety. In these cases, further assessments are undertaken and the court will sometimes order independent psychological and psychiatric testing as well as a gamut of drugs and alcohol testing (such as hair strand and urine sampling).

Court proceedings run along a 26 week timescale, so we continue to work with families during this time. Sometimes the children can remain with parents, sometimes with a 'connected person' and sometimes they will be taken into foster care.

During this time the child/ren may be on an Interim Care Order (which gives us shared parental



Child Protection

responsibility) until a final decision can be made and a Full Care Order granted.

It is usual, once we have legal responsibility for the child/ren that we'll introduce them to a new social worker in the Children Looked After hub, who will become their long-term worker.

A Child in Need of Services (CiN) case can be held in any of the hubs in the Trust, depending upon need.

The definition of a CiN case is a child who is unable to achieve the usual childhood milestones without support.

All cases are different and can often be due to poor parenting skills, poverty or parents with no recourse to public funds, or children with disabilities.

Sometimes short interventions are needed but often we'll work alongside the family.

Children With Disabilities

Children With Disabilities covers children and young people with disabilities including mental health and learning difficulties who also need access to social care.

This is a specialist hub, which helps children with disabilities, almost all of whom live with their parents.

This hub, alongside the Trust's respite care residential and home from home (family-based) services, provide a round the clock assessment and treatment service which has to be supplemented by Direct Payments and a whole range of voluntary sector agency partners.

The hub has social workers with expertise in complex multi agency assessments and planning and they develop good quality relationships with health, Special Educational Needs (SEN) and transition into



Children With Disabilities

adult services. They offer a 'whole journey response' including parent /carer assessments and young carer assessments (for children who look after adults with disabilities).

We work to secure permanency within the family, community or, where necessary, through court processes after which we consider alternative permanency arrangements, such as long-term fostering, adoption or a Special Guardianship Order (SGO).

Again, we work systemically, offering a whole family approach including siblings of children with disabilities. We link with adult services for a smooth transition.

Children Looked After/ Care Leavers

This is the 'core' area of statutory children's services, where we work with children and young people who are in permanent care.

We have more children looked after who are under 18 years old than care leavers (18+), with a ratio of about two thirds to one third.

The service carries out duties to ensure the safety and welfare of children in the care of the Trust.

This involves regular visits to the children, their families, foster placements and children's homes by social workers with the objective to ensure children are safe and doing well.

The social workers also help children deal with any emotional and psychological impact they may experience by being away from their birth families. The CLA service also has clinicians who support



Children Looked After/Care Leavers

social workers to work systemically with children and families to address some of the complex emotional issues some of the children and young people have to deal with.

The children looked after hubs always look to reunite families and have returned children home to their families with support packages in place.

However, where this is not possible, they look for stable and permanent new arrangements and hold regular permanency planning meetings, which involve senior management and the family placement service (fostering and adoption).

The social workers work closely with the Virtual School (see pages 18-19), real schools and education departments to ensure that the children and young people in their care are receiving the right educational support they require.

As part of this work, children are offered regular reviews where they contribute to their own plans. Social workers encourage children and young people to attend and to make sure their voices are listened to – and heard.

The hub has personal advisors who support care leavers (as young people about to leave care or who have left care are called), helping them settle into their independent accommodation and also obtain places in recognised colleges and universities.

The service also helps young people with employment opportunities, further training or apprenticeships.

Personal advisors are there to offer encouragement, help with life skills and support, to help young people overcome obstacles and go on to lead happy, fulfilled lives.



Children Looked After /Care Leavers

A change in the law (under the Children and Social Work Act 2017) means that, from April 2018, we will open our leaving care service to all care leavers up to the age of 25, for advice and support when needed. Previously, this was only offered to those in full time education and offers of support ended for other care leavers at 21.

This now gives all care leavers a level playing field and offers access to support which can help young people get through the ups and downs of early adulthood, knowing we're there, if they need us.

Virtual School

The role of the Virtual School headteacher became mandatory in 2014. Slough's Virtual School sits within Trust arrangements.

As with all Virtual Schools, the key role is to support the educational attainment of all children looked after by Slough wherever they attend their 'real' school. The Virtual School offer a service from birth to age 25.

Two Personal Education Plan (PEP) meetings are mandatory for every child looked after of school age. We record ours on an electronic form, hosted on the internet.

In addition to this, we offer one PEP meeting a year from birth until the child starts in any Early Years setting. From that point on - all the way to age 16 - we carry out a PEP meeting 3 times a year to coincide with school terms.

Between the ages of 16-18 they have 2 PEPs a year.



Virtual School

PEPs are attended by the child/young person and foster carer. The children have an engaging section to fill in to hear their views.

There are sections on the care status of the child; attendance and any exclusions; any SEND needs, including extra support; attainment and progress since the last meeting and the emotional health and wellbeing of the children. From this, targets are reviewed and reset.

Virtual Schools have direct government funding, Pupil Premium Plus, to support raising attainment for CLA. In Slough, we use the funds led by needs identified by SMART targets in the PEPs.

Beyond 18 there is educational support, for example through university bursary funding.

Slough Youth Offending Team

Slough YOT also comes under the SCST umbrella. The service works to 'help everyone live positively' through:

- Supervision of young offenders who are sentenced to any kind of Order by the Court (i.e. Youth Rehabilitation Order, Referral Order etc.)
- Acting as the appropriate adult during police interviews when a parent is not available
- Supplying bail information and support services
- Conducting substance abuse assessments and referrals
- Preparing reports for the Courts
- Providing through care and post-release supervision to those sentenced to custody
- Offering young people leisure activities to enable



Slough Youth Offending Team

them to use their free time constructively

- Assisting young people who are of school age and who are not in school to re-enter school, or find an alternative arrangement to meet their educational needs
- Offering parental and family support through individual and group work
- Liaising with victims in order to obtain their opinions and give them an opportunity to participate in restorative conferencing
- Giving support to young people who are remanded into care or custody.



Who is involved in a child's care?



Social worker

Every child looked after - and often those not in care but with safety concerns or at risk in other ways - will have a social worker. The social worker is the key worker in the

child's life and prepares the child's plan, for short or long term intervention and help.

The social worker visits regularly and is there to listen to the child or young person and make sure they are part of the decision-making process. They explain why, when and how things will happen. They monitor the plan and actions, to make sure the plan is working and that, where possible, a child can be reunited safely with their family.



Family support worker (FSW)

The family support worker provides practical support to children, young people and their families/carers with a range of complex needs. The FSW assesses, monitors, supports and reviews

needs and will coordinate provisions of interventions such as advice, guidance and direct support as guided by social workers and clinicians. The FSW organises and maintains confidential records, reports assessments and prepares standards reports as required.

The FSW will liaise and work in partnership with SCST professional care groups and external agencies such as GPs, health agencies and emergency services as appropriate.



Who is involved in a child's care?



Foster carer

Foster carers are members of the public who choose to look after children who are not their own.

They are trained professionals and get paid to do this and they are self-employed.

Foster carers come from all different backgrounds and are different ages with different levels of experience. Some foster carers have children of their own and others don't. Some will have more than one foster child at a time while others may not. SCST, which operates as an Independent Fostering Agency (IFA) has a mixture of in-house foster carers and other IFA placements, depending on what is best for the child.



Clinician

The clinician works in ways which are sensitive to and appropriate for the wide range of children's and families' abilities to understand the therapeutic process. It requires the use of fine judgments that are responsive to each individual in a family and to the family as a whole, whatever their background and experience.

The clinician helps prevent family or placement breakdown by assessing and providing evidence-based therapeutic interventions that are timely enough to have the best outcome. The clinician supports colleagues through consultation, expertise and respectful challenge to practice in order to bring about effective change.



Who is involved in a child's care?



Designated teacher

This is, as the name implies, a teacher at the child's real school who has the job of making sure that children looked after in that school are getting on well. Designated teachers are specially trained and liaise frequently with the Virtual School over the child's ePEP (Personal Education Plan) and other professionals involved in the child's case.



Advocate

The Trust commissions NYAS to act as a child's advocate, if they want this service. The advocate not only checks that the child is part of decisions being made about them (and that they have a say about what is going on) but can accompany children to meetings, make a

complaint on their behalf or sort out something that's important to the child. They advocate on a child's behalf and makes sure the child feels safe when talking to professionals.



Independent reviewing officer

The independent reviewing officer is sometimes shortened to IRO. This is the person who checks that the social worker is doing what

he/she said they were going to do, who can ask for changes to be made to a child's plan and who ensures that the child knows and understands what is happening.



Who is involved in a child's care?



Key worker

Every child or young person who lives in a residential unit has a key worker and it's their job to make sure that the care plan is being followed and that the child is happy and settled

where they live.



Independent visitor

If a child looked after doesn't see their family often, then we will appoint an independent visitor to see them on a regular basis.

They will be there for the child to talk to about things, they may take the child out for a meal or to the cinema or for a day out, as well as offering help and advice.



Specialist nurse

The specialist nurses are part of a health team who organise health assessments for children and young people looked after. They can also offer support and advice about the child's health.



Personal advisor (PA)

A PA provides advice and support for older children looked after (from 15½ into adulthood) and makes sure the young person's voice is heard.

The PA will help the young person prepare for their future, including helping them find employment, accommodation and further education or training.

They keep in regular contact with the young person and work with them to help them reach their full potential.



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St Martins Place, 51 Bath Road, Slough, SL1 3UF

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