

## **Frequently asked questions**

### **1.0 How is a referral regarding a child case made?**

#### **Responsibility of practitioners**

Practitioners who have a concern about a child's welfare have a professional responsibility to determine whether their concern seems likely to meet the threshold for action by Children's Social Care under either Child In Need or Child Protection Guidance, or whether it can appropriately be referred to the Common Assessment Framework process.

All referrals to Children's Social Care should be made through the 3 duty access points:

- 25 St James's Road
- Cottage Street, Brierley Hill
- Great Cornbow, Halesowen

Professionals should consult with colleagues in Children's Social Care to explore the issues about which they are concerned if they are in doubt about whether a referral is appropriate.

Professionals who refer concerns should be aware of the threshold for conducting an Initial Assessment and the definition of child "in need". They should provide as much contextual and evidential information as possible in support of their referral, and thereby positively contribute to the Initial Assessment.

#### **1.1 When to make a referral**

a) Anyone who has concerns about a risk to a child in terms of either

- significant harm, as a consequence of abuse, or
- significant impairment of health or development, as a consequence of a child's needs not being met,

#### **Must make a referral direct to Children's Social Care, without delay**

- the criteria may be met for conducting enquiries under Section 47 of the Children Act 1989,  
or
- the child appears to be "in need" as defined in Section 17 of the Children Act 1989. See "Threshold and definition".

b) Anyone who has a concern about the welfare of a child that does not meet the above criteria should complete a Common Assessment Framework with the family.

They should do this by following the established Common Assessment Framework referral process.

## **1.2 Responsibility of Children's Social Care**

Children's Social Care must accept a referral for Initial Assessment if, on the basis of the information provided, the threshold for Social Care intervention is met.

"When a parent, professional or other person contacts Children's Social Care with concerns about a child's welfare, it is the responsibility of Children's Social Care to clarify with the referrer (including self referrals from children and families) the nature of the concerns, how and why they have arisen, and what appear to be the needs of the child and family". Children's Social Care must do this regardless of whether the concerns are being dealt with in the Common Assessment Framework process.

The views of a professional who works with children and families, and who is making a referral, should be respected in this context unless there is clear reason for countering them. They should not be countered without first discussing the issues with the referrer, and a clear record should be kept of such decisions and the reasons for them.

However, the Common Assessment Framework has been developed to ensure an early and effective response to concerns, and professionals should use the Common Assessment Framework as and when it is appropriate to do so. Sometimes it will be appropriate to refer concerns direct to Children's Social Care – especially if delay would not be in the child's interests, or there is reason to think that the child's situation is complex and that an Initial Assessment and further action under the Child In Need system will be necessary.

## **1.3 Referral flow between children's social care and Common Assessment Framework**

Referrals to Children's Social Care may, with the consent of the family be passed on to the Common Assessment Framework process if it is determined that the thresholds for children "in need" or child protection are not met. This may be:

- following a decision not to carry out an Initial Assessment
- or
- following an Initial Assessment if the outcome is that the threshold for services from Social Care are not met.

Similarly, if the Common Assessment Framework process considers that a concern meets the threshold for action by Children's Social Care, the referral should be passed to the duty team for assessment. The consent of the family for this referral and their consent to share information should be obtained unless to do so would put an individual at risk or there are compelling legal reasons.

Direct and timely contact and discussion between relevant managers and referrers is crucial to ensure that responses are appropriate.

## **1.4 What is an Initial Assessment?**

It is the responsibility of all professionals involved to contribute to the Initial Assessment within the seven day timescale. Whilst Social Workers in Children's Social Care has primary responsibility for completing Initial Assessments they must be assisted in this task in a number of ways. Achieving a multi-agency Initial Assessment within statutory timescales requires a prompt response and proactive involvement by the referring practitioner and all other practitioners involved.

## **1.5 Responsibility of Children's Social Care**

An Initial Assessment must be carried out by Children's Social Care when there is information that suggests that a child is "in need". Children's Social Care must determine the nature of their response within 24 hours of receipt of referral, and complete any Initial Assessment within 7 working days of receipt of referral.

## **1.6 Responsibility of practitioners who refer**

Practitioners who refer a child "in need" to Children's Social Care must use the agreed format and ensure that they provide as much information as possible to facilitate the Initial Assessment. This information may well come from the Common Assessment Framework process and a Common Assessment done in that context. So far as possible, this information should include:

- a basic assessment of needs, and a clear statement of the nature of their concerns. This should be from their professional perspective and if they are able to take into account information from other sources they should do so. Their aim should be to make a comprehensive contribution to the Initial Assessment at the point of referral.
- a basic statement of what they think may need to be done to meet needs, and who may need to be involved.
- The intended outcome for the child as a result of this referral.

While an assessment completed under the Common Assessment Framework is not the same thing as an Initial Assessment it should be sufficiently detailed and comprehensive to contribute substantially to any subsequent Initial Assessment. The 3 dimensions of the Assessment Framework – the child's needs, parenting capacity, and environmental factors – are shared features of Common Assessment Framework, initial and core assessments.

## **1.7 Outcomes of an initial assessment**

There are 4 possible outcomes. A decision must be made at the end of every Initial Assessment as to which applies, and this must be recorded. The action subsequently required is determined by this decision.

1. There is "reasonable cause to suspect actual or likely significant harm" in terms of abuse or neglect – in which case action should be taken under Child Protection procedures.
2. The child is not a Child In Need – in which case it may be appropriate to refer the child and family to the Common Assessment Framework process for any

further assistance they require.

3. The child is a Child In Need – but their needs are not “complex” as defined below.
4. The child is a Child In Need – and their needs are complex, as defined below.

### **1.8 Determining what is “Complex”**

Determining that a child’s needs are complex is a matter of professional judgement by a Social Care Manager in Children’s Social Care.

Criteria for determining whether a child’s needs are complex are outlined in the Assessment Framework, and provide the basis for determining whether a Core Assessment is required. Consideration should be given not only to the nature, range and significance of the child’s needs, but also to whether

- Their needs require a range of inputs from a number of professionals, or
- Significant issues are unlikely to be resolved without sustained support over long periods of time, or
- Significant resources are likely to be required, or
- There is no straightforward or immediately obvious solution; or there is no clear agreement about the nature of the child’s needs, or about what should to be done to address them, or
- It seems likely that the parents may have a limited ability or willingness to take responsibility for identifying or addressing the child’s needs, and/or to work with and take advice from professionals.

Complex needs will always be characterised by being very significant in terms of their impact on a child’s wellbeing and development.

### **1.9 What happens following an Initial Assessment?**

If an Initial Assessment concludes that a child is not a “Child In Need”:

Children’s Social Care should either:

- take no further action beyond simple advice on a “one off” basis, or
- signpost the parent and/or child to another service in the community, or
- pass the case to the Common Assessment Framework process for consideration of other services as appropriate. Children’s Social Care may refer the case directly to the Common Assessment Framework Panel or advise the professional who made the original referral to do so.

All of these courses of action should be done with the consent of the parent, and child as appropriate.

If an Initial Assessment concludes that a child is a “Child In Need”:  
Prompt action must be taken to identify and complete any necessary additional assessment and agree plans to address the needs identified.

The decision to hold such a meeting is a matter of professional judgement by a Social Care Manager in Children’s Social Care. Care should be taken to distinguish between the following meetings. They each have distinctive objectives and characteristics.

## **2.0 Child In Need Planning Meetings**

These are to be used to determine needs, make plans to meet them, and evaluate progress in respect of children “in need” where the threshold is not met for convening a Child Protection Conference. This includes managing situations where the behaviour of children and young people places themselves or others at risk.

Child In Need Planning Meetings should involve all the practitioners who are currently working to support the child and family, or who may have a contribution to make.

### **2.1 Child Protection Conferences**

These are to be held when there is reasonable cause to suspect that the child is suffering or likely to suffer significant harm in terms of abuse or neglect. Guidance about the threshold for convening a Child Protection Conference, and its purpose and conduct, is provided in Child Protection Procedures.

### **2.2 Child in need planning meeting**

Child In Need Planning Meetings are a means of ensuring that practitioners and parents, along with children and other family members, as appropriate, are able to identify and address concerns about a child “in need” – that is, a child whose needs are not being met and whose health or development is, or is likely to be, seriously compromised.

### **2.3 Key objectives**

The key objectives of a Child In Need Planning Meeting are to identify:

- A clear and agreed statement of the child’s needs.
- A clear and agreed Child in Need Plan to address identified needs, or to undertake any further assessment, and to explore potential solutions.
- Clear agreements about who will do what, and by when.
- Clear understandings of what would be considered to be acceptable outcomes.
- Arrangements for reviewing progress.