BRENT COUNCIL TRANSITION TEAM OPERATIONAL POLICY

What is the Transition Team?

The Transitions Team provides services to young people aged 14 to 25 years old with disabilities to increase their independence and help them plan for the future.

The Transitions Team in Brent Adult Social Services supports young people with disabilities aged 14 to 25 years old, to make the journey between childhood and adulthood as smooth as possible.

Where a young person with disabilities does not meet the Statutory Adult Social Care eligibility criteria for services when they reach 18, the team will help identify this at an earlier age, from 14, and social workers will work with young people to help signpost them to alternative services. This model of starting young people’s transition journey as early as 14 years is underpinned by the principles and processes of effective transition in line with both the Children and Family Act 2014 and the Care Act 2014. Both Acts being outcome and wellbeing focused for children and young people. The Transitions Team in Brent aims to focus on:

- Early planning for children and young people preparing for adulthood
- Holistic assessment, planning and review working towards defined outcomes
- Active involvement of young people and their families in the planning and decision process concerning their future
- Raising aspirations and focusing on key life chances such as employment, independent living, community participation and relationships, health and wellbeing.
- Provision of information and advocacy if required to ensure that young people are able to express their views and supported to engage in decision making.
- Flexibility in transfer arrangements i.e. arrangements may need to continue over a period of years
- Integrated streamlined assessment and planning processes across all agencies. Joint commissioning and personal budgets such as the education Health and Care planning process.

The Transitions Team therefore works with young people and their families to implement plans in a bid to preparing for adulthood. The focus is on a young person’s transitional journey and Customer journey; for those over 18, supporting them to be as independent as possible while ensuring that their assessed eligibe
needs are met to achieve their desired outcomes. The team will provide person centred preparation and support for disabled young people with complex needs moving into adulthood

**Team Details**

Brent Transition Team operates from Monday – Friday from 9am to 5pm; outside of office hours urgent issues are addressed by the Emergency Duty Team.

The Team Consists of;

1 x Team Manager  
1 x Senior Practitioner  
5 x Social Workers  
2 x Care Assessors  
1x Paediatric Occupational Therapist.

**The Voice of the Child**

The views, wishes and feelings of the young person are central in the future planning of the young person’s life as an adult and should be evidenced in all the support considered and offered; with the young person and their family involved in every step of the process, sharing knowledge and information to enable them to make informed decisions about the future.

**The Aims of the Transition Team are:**

To plan for the future and provide a smooth, seamless transition for young people to adulthood. These plans will be personalised and tailored to every individual’s needs and goals.

Working with children, young people, their families and relevant professionals to safeguard and provide services to children and young people. The Transitions Team further aims to support children young people and their families during the transition process to provide information and advice support to maximise their potential in achieving positive outcomes.

The Transitions Team also aims to work with young people placed outside the borough, their families and professionals to bring them back to Brent when it is deemed to be in their best interest.

- To ensure that the views, aspirations and feelings of the young person are central, so that they have maximum choice in planning their own future into adulthood supporting them to achieve desired positive outcomes.
- To promote increased independence by setting goals for young people to achieve so that they are able to fulfil and maximise their potential

**The Pathway**

- As the young person turns 14, a new transitions worker will be allocated to them and a letter will be sent regarding these changes.
A transitions assessment and plan will then be completed. This will be reviewed regularly during the transitional journey. These plans will set goals for individual outcomes to be met over the years ahead. If young people do not meet the adult eligibility criteria, their transitions worker will work with them to signpost to alternative services beyond the age of 18.

Eligibility Criteria

14 – 17

Children and young people are eligible for an assessment from the Transition Team when they:

- Live in/originate from Brent
- Have turned 14 years of age
- Are identified as a disabled young person with severe and complex needs, whose support into adulthood and transfer to adult social care requires careful co-ordination.
- It also includes children who have complex health needs and who may have palliative life limiting or life threatening conditions.
- Children who have mild to moderate disabilities i.e. those that do not require on going specialist support and children with emotional and behaviour difficulties, not as a result of their learning disabilities, are not normally eligible for services from the Transitions Team; subject to an assessment against eligibility and consideration of the impact of their disability on daily life. Individuals who do not meet the threshold will be signposted to other sources of support.
- In such an event children, young people and their families are provided with a local ‘information and advice offer’ known as the local offer including support available to children and young people to help them to prepare for adulthood.
- The provisions in the Care Act relating to transition are not only for those who are already known to the local authority, for example children in need receiving services, but apply to anyone who is likely to have needs for adult
care and support after turning 18. A Child Needs Assessment (CAN) will therefore be required for those young people who are likely to have needs for care and support after they reach 18 to determine what adult social care a young person might be eligible for so that they can make informed choices.

The care Act also highlights that Local authorities should consider how they can identify young people and carers who are not supported by children’s services but who are likely to have care and support needs as an adult.

Please see link below for eligibility criteria for both Transitions Team and Children with disabilities

https://brent.gov.uk/media/1066766/children_with_disabilities_eligibility_criteria.pdf

18 – 25 (and still in education)

- In Brent the assessment of eligible needs, Prioritisation of Needs, is undertaken at the point of referral
- Needs are assessed first, then possible solutions to those needs considered

The eligibility in each section is based on the assessed unmet need and it is encouraged that existing support networks or solutions continue and promote independence where ever possible.

Eligibility consideration must be recorded as a case note in Mosaic confirming whether an individual is eligible or not eligible; if not eligible evidence of signposting must be recorded and communicated to the young person and their family. In terms of signposting it should be recorded under documents where the referral should be uploaded, case note indicating that the referral was completed

Referrals:

The majority of young people the Transition Team work with are transferred from the Brent Children with Disabilities Team 0-13 at their 14th birthday as a continuation of service. Referrals are also received from other children’s teams within the council, while new referrals are received via the Brent Family Front Door, who create a new contact and refer to the Transitions Team for action.

The team can also receive external referrals from a number of sources including health, education, self referrals from families made via Brent Customer Service for
the adult referrals 18 years onwards and Brent Family Front Door for children 0-18 years old.

**Adults: Customer Services**

Contact number 02089374300

All referrals will be responded to in writing within **2 working days** using a standard letter template and telephone contact to either the referrer or the family. (see Appendix One)

**Assessment (14 – 18)**

**The Transitions** assessment process is underpinned by the legal framework and statutory guidance under the Children Act 1989, Children Act 2004, Working Together to Safeguard children policy guidance 2013, Child and Family Act 2014, Human rights Act 1998 and Care Act 2014. The Disability Discrimination Act (DDA) 1995 aims to end the discrimination that faces many people with disabilities. The Transition Assessments therefore take into account the following key requirements of the Care Act 2014:

- **Person-centered throughout**
- **Ensure that the wellbeing of each young person or carer is taken into account**
- **A carer’s assessment is offered to be completed alongside the child and young person’s Transition Assessment and plan. Include any other person who the young person or carer wants to involve**
- **A carer’s Assessment is completed for all carer’s post 18 with eligible carer’s needs as a result of their caring role.**
- **Assessments will always be appropriate and proportionate to the complexity of the person’s needs**

- **In so doing the process must establish:**
  - **Current needs of the young person and how these impact on wellbeing**
  - **Whether the young person or carer is likely to have eligible needs**
  - **The outcomes the young person or carer wishes to achieve**
  - **Post-referral assessment episodes for young people aged 14 - 17 should be completed promptly for all young people eligible for the Transitions Service and no later than 45 working days from receipt.**

If a new referral is received, a Child and Family Assessment will be completed within **45 working days.** However, a child has to be seen within the **first 10 working days** initial information is gathered, the case is reviewed and a managerial decision with a risk assessment is recorded within the first 10 working days. If an individual is transferred from the Children with Disabilities Team a Transition and assessment plan will be completed. Transition Assessments and plans are also completed within **45 working days.**
Assessments should be carried out in partnership with the young person and/or their family/carers, as appropriate, using an approach and setting that the young person is comfortable with. All efforts should be made to find ways to communicate with the young person to ascertain their views and feelings.

Where the young person’s view cannot be ascertained this should be recorded and should include:

- Why the persons views/wishes could not be captured
- What methods/attempts have been made
- How have representative views been sought and from whom

All outcomes identified from the assessment should consider the young person’s wishes/aspirations and assessed eligible needs which should then inform the support planning for the young person. The assessment should identify which needs and related outcomes are already being met and those that are unmet.

The assessment should assess risks using the signs of safety model to address any safeguarding concerns.

Where there is possible sex exploitation concerns the Child Sex Exploitation screen tool should be used.

Where a young person has an Education Health and Care (EHC) plan the outcomes and associated agreed support should be incorporated into the single EHC plan.

**Assessment (18 – 25)**

Young adults, in education, that are likely to have care and support needs will be offered an Adult assessment of Need to determine their eligible needs which will be completed no later than **28 days** from allocation, using the Supported Self Assessment Questionnaire (SSAQ) (see Appendix Three). Following on from the assessment a support plan will be identified and agreed.

A Mental Capacity assessment (MCA) should be undertaken to establish the young person’s ability to make decisions in relation to specific needs of their lives and contribution to future planning.

If the young person is deemed to have the capacity to make decisions, their views should be taken into account and they should be supported in the process with relevant information, advice and choices to enable them to make informed decisions.

In a situation where the young person is deemed not to have capacity to make a specific decision, Parents or carers should be advised to apply for powers of Attorney (PA) to be able to legally make decisions on behalf of the young person.

In an event where there is conflicting views between the parents/carers with professionals regarding making decisions in the best interest of the young person, a best interest meeting needs to be convened to discuss the issues.
Support Planning

The Support Plan should identify the support required to meet the outcomes identified in the assessment phase, this should include both informal and formal support and identify how it is planned that outcomes will be met either informally through an individuals caring networks or through formal ‘commissioned’ support.

The support plan should identify the assessed eligible need, the desired outcome, the support in place to meet that outcome and the cost and funding source.

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<tr>
<th>NEED</th>
<th>DESIRED OUTCOME</th>
<th>SUPPORT</th>
<th>COST</th>
<th>FUNDING SOURCE</th>
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| Education Health and Care (EHC) plans

The threshold for when a child or young person requires an EHC plan remains the same as that for the SEN statement under the Education Act 1996. Under the Child and Family Act 2014 SEND reforms all young people with Special Education Needs Statement will be converted to EHC plans by 2018. This is an introduction of a new single assessment process, an education, health and care (EHC) plan and personal budgets for children, young people and families with SEND. Therefore, it is proposed in this plan that all children and young people who are subject to SEN statement and who would have continued to have one under the current system will have an EHC plan.

In light of the changes Brent Connexions help young people with information and advice about further education, identifying colleges that my be suitable for them and completing application forms. The Learning Disability Assessments is no longer needed as it has been replaced by EHC plans under SEND reforms which came into effect in September 2014. The expectation is that young people who wish to continue in further education or training will be assessed and made subject to an EHC plan. The Transitions Team will contribute to the EHC plan under the social care section.

SEND takes the lead of the EHC plan process.

Reviews

All support plans for young people will be reviewed initially at:
- 6 weeks
- 3 months
- 6 months

For young people aged 14 – 18

Support will then be reviewed a **minimum of 6 monthly**

**Looked after Children and Young people:**

Looked After Children (LAC)
All young people aged 14 and upwards who:
- have respite care/short breaks for 17 days or more consecutively
- have 75 days or more respite/short breaks in a year
- are in a foster placement on S20 CA, 89 (accommodated with parental agreement) or on a full care order under S31 CA 1989.
- are in a residential placement (including residential education)

The Transitions Team works under the relevant legislation mentioned above and the guidance of the National Institute of Excellence guidelines (PH28 SCIE) 2010 -2017 in relation to Looked after Children and young people which recommends the following for looked-after children and young people, their families, prospective adopters and other members of the public.

The focus of the guidance is on how organisations, professionals and carers can work together to help looked-after children and young people reach their full potential and enjoy the same opportunities in life as their peers.

The recommendations cover local strategy and commissioning, multi-agency working, care planning and placements, and timely access to appropriate health and mental health services. In particular, they aim to:

- **promote stable placements and nurturing relationships**
- **support the full range of placements, including kinship placements**
- **encourage educational achievement**
- **support the transition to independent living**
- **meet the particular needs of looked-after children and young people, including those from black and minority ethnic backgrounds, unaccompanied asylum seekers, and those who have disabilities**
- **places looked-after children and young people at the heart of decision making**

All looked after children under the Transitions Team have a LAC plan which outlines their needs and how they would be implemented in light of statutory duties of the Local Authority towards them. The LAC plan is reviewed at 6 monthly subsequent LAC review meetings chaired by an Independent Reviewing Officer (IRO)

The initial LAC review takes place within **20 days** from when the child and young person has been placed or accommodated. The LAC plan is devised within **7 days** of the child or young person becoming looked after. The first LAC review is within **3 months** and there after every **6 months**.

The allocated social worker’s statutory visits are to see the child or young person within **7 days of placement, after two weeks and 4 weeks** which ties in with the first LAC review that takes place within 20 days. At the first LAC review the LAC plan is discussed and recommendations are made depending on the young person’s situation and stability of the placement. The statutory visits are undertaken and recorded within every 6 weeks of the first year of the placement except for various
reasons when the LAC plan requests more regular timescales. After the first year of placement, LAC visits become three monthly.

A LAC medical is completed annually and outcomes followed up. It should be booked or completed by the first LAC review. The BAAF form has to be completed within 5 working days of the placement and sent to:

LNWH-tr.lookedafterchildren-BCS@nhs.net

Health routine checks such as dental, optical and ear examinations should be checked and recorded regularly in the correct way on Mosaic using the correct drop down on the child’s front page (not only in case notes). The LAC medical will normally address and make recommendations to be included in the LAC plan.

A Personal Education Plan for 14-16 year olds should be completed every 6 months to monitor the educational progress and learning of the young people. Brent has an e-PEP and the process is facilitated by the virtual school. However in some situations depending on the young person’s needs and LAC plan the Annual Education Review is regarded as sufficient and PEP is not required. Allocated social workers from the Transitions Team should attend educational annual review meetings for young people and EHC review plans for cases allocated to them. The EHC reviews can be done together with the annual reduction review.

After the Young Person has been in care for over 12 months the LAC visit can reduce to up to 12 weeks depending on the stability of the placement and the young person’s LAC plan and needs. Unannounced visits can also take place if there are safeguarding concerns or concern about stability of the placement is raised. 

6 monthly Statutory LAC reviews take place chaired by and Independent Reviewing Officer.

LAC Children 16+ will have pathway plans to reflect their needs at the stage of development and equipping them for independent skills preparing them for adulthood.

Consultation documents to evaluate the care received by children and young people are sent to the young people, the carers/placement and family members with parental responsibility prior the LAC review to ascertain their views in relation to the care given to the young person. The documents are given to the IRO who addresses the matters arising either in the LAC review meeting or outside the meeting.

CARE LEAVERS:

Young people leaving care from the Transition Team are supported as relevant children and access support depending on the pathway they have decided to take for their adulthood.

All transitions Looked after children and young people have a pathway plan from their 16th birthday as an outcome of their 15.5 years LAC review meeting. The young
people’s pathways plan would specify a desired pathway and the process should be initiated prior to their 18th birthday.
Care leavers are supported under different categories such as: Eligible, Relevant and former Relevant:

**Eligible Children:**

An ‘eligible child’ is a young person aged 16 or 17 who is looked after and has been looked after for at least 13 weeks which began after they reached the age of 14 and ended after they reached the age of 16. The 13 weeks can be a continuous period or a series of episodes. In calculating the 13 weeks, both pre-planned short breaks amounting to less than 4 weeks and cases where children return to their parents or someone with parental responsibility are excluded.

**Relevant Children:**

A ‘relevant child’ is a young person aged 16 or 17 who was an ‘eligible child’ but is no longer looked after. A child who is detained, or in hospital on their 16th birthday, and looked after for at least 13 weeks which began after they reached age 14 and is looked after at the point of being detained, or entering hospital is also a relevant child. As above, in calculating the 13 weeks, both pre-planned short breaks amounting to less than 4 weeks and cases where children return to their parents or someone with parental responsibility are excluded.

**Former Relevant children:**

Former Relevant Children are defined under Section 23C (1), (6) and (7) of Schedule 2 to the Children Act 1989. They are young people who were previously an ‘eligible’ child or a ‘relevant’ child. They are aged 18 to 21, or still on the education or training programme set out in the pathway plan and being undertaken on their 21st birthday. The Transitions team will record and provide information relating to former relevant children about the activity and accommodation on their 19th, 20th or 21st birthday. This data is used to monitor the Government’s objective that all children leaving care, should, on reaching adulthood, participate fully in society.

Those young people and their families, who choose to continue with further education following their 18th birthday, are supported by their social worker within the Transitions Team, who acts as the personal assistant, Special Education Needs Department and Connexions to identify suitable colleges. As long as they remain in fulltime education, the young people remain under the Transition Team prior to their 25th birthday.

Care leavers who do not wish to continue with further education and assessed to have care support needs are ex relevant young people. Their transition and pathway plan should be very clear about their long-term plan and will be transferred to the appropriate Adult service either The Adult Learning disability and Support Planning Team or Adults with physical Disability team following a process outlined within the transfer protocol between Transitions Team and other Adult Teams.
Young people may choose to have an EHC plan when they remain in fulltime education post 18 years and this is implemented as part of their transition plan and SEND takes the lead.

Care leavers who’s needs are assessed not to be eligible for care and support post 18 are referred to the leaving care planning team to access personal assistant (PA) services to support them integrate in the community and plan for the future as recorded within their pathway plan.

CHILDREN MISSING OR ABSENT FROM HOME OR CARE

**Missing:** A child who is not at their placement or the place they are expected to be (e.g. school) and their whereabouts is not known

**Absent:** A child whose whereabouts is known but who is not at their placement or place they are expected to be and the carer has concerns or the incident has been notified to the local authority or the police

Guidance for the, ‘Children Missing from Home or Care Protocol’ can be found on the Brent LSCB website http://www.brentlscb.org.uk/main/article.php?tag=policies&name=role&sector=Home
Since April 14 it has been a statutory requirement to report on both Missing and Absent LAC

For young adults aged 18 -25 (in education)
All support plans for young adults will be reviewed initially at:
- 6 weeks
- 3 month
- 6 months

Support will then be reviewed a **minimum of annually**

Where a support plan has been transferred from a Transition or EHC plan to a Supported Self Assessment Questionnaire (SSAQ). This is an assessment of the Young person’s needs that informs the support plan as to how the needs will be met. With no changes this will be reviewed a **minimum of annually**

**Should amendments be made to a support plan due to a change in need the Team Manager will record when the next review should be held as this may need to be sooner than either 6 or 12 months.**

**Case Closure/Transfer**

All case closures/transfers must be signed off by the line manager and have a closing summary which identifies:

- Reasons for involvement and work completed
- What is working well
- What isn’t working well
- Young Person’s wishes
- What are we worried about
- What needs to happen next
- Any outstanding issues
- Any history of safeguarding
- Any previous complaints
- Work completed
- Reason for closure or referral or transfer
- When the child was last seen and spoken to
- There are case transfer protocols from Children with disabilities to Transitions Team and from Transitions Team to Adults with Learning disabilities and Adults with Physical Disabilities.
- There is a Transitions case closure process and check list which is adhered to prior to closing the case.

**Case Recording**

All case records should be recorded on Mosaic and include:

- Transition Assessment and plans
- Chronology
- Assessment (including risk assessment)
- Support or EHC Plan
- Review
- Funding Approvals (as appropriate)
- Case Summary
- Accurate and up to date case notes
- Evidence that child’s views/wishes have been sought and included
- Where the voice of the child could not be captured clear recording of why not and who the child’s perspective was sought from
- Evidence at the point of review of how young person’s life has been improved/have wishes been met?
- Record of management decisions
- Transfer Summary (prior to case closure and referral to adult services)
- Family composition and relationships
- Genogram
- Ethnicity
- Default care package
- Intervention at all stages through the customer Journey
Child Protection and Adult Safeguarding

Child Protection and S47 enquiries

The Transition Team holds a monthly complex case discussion meeting chaired by the head of Service which will discuss young people who are considered to be potentially at risk but below the threshold for a S47 enquiry to ensure regular monitoring and management oversight.

A S47 enquiry must always be commenced immediately when:

- There is reasonable cause to suspect that a child is suffering or likely to suffer significant harm in the form of physical, sexual, emotional abuse or neglect;
- Following an Emergency Protection Order or the use of police powers of protection is initiated.

Where a child is suspected to be suffering, or likely to suffer, significant harm, the local authority is required by s47 of the Children Act 1989 to make enquiries, to enable it to decide whether it should take any action to safeguard and promote the welfare of the child.

Responsibility for undertaking s47 enquiries lies with LA children's social care in whose area the child lives or is found. 'Found' means the physical location where the child suffers the incident of harm or neglect (or is identified to be at risk of harm or neglect)

The threshold criteria for a s47 enquiry may be identified during an early assessment, but may be apparent at the point of referral, during the multi-agency checks or in the course of the assessment.

A Child and Family Assessment should be initiated following referral and should continue whenever a s47 enquiry has commenced. This is completed within 45 working days.

Brent along with other London boroughs operates under the pan London Child Protection procedures. Keeping young people safe is at the core of all the team do and both the safety of the child and/or extended family in line with 'Think Family' should be central to all Transition Team activity. The standards and process for S47 enquiries are laid out in the policy below.

http://www.londoncp.co.uk/consultation/A_contents.html

Strategy Meeting/Discussion
Whenever there is reasonable cause to suspect that a child is suffering, or is likely to suffer, significant harm, there should be a strategy meeting / discussion.

The strategy meeting / discussion should be co-ordinated and chaired by the Transition Team Manager or Senior Practitioner. The strategy discussion with CAIT official determines the progression of the investigation whether it is a joint investigation between social care and the police in which case the police take the lead or it is a single investigation whereby social care takes the lead.

A strategy meeting / discussion should be used to:

- Share available information between agencies involved with the family
- Agree the conduct and timing of any criminal investigation;
- Decide whether an assessment under s47 of the Children Act 1989 (s47 enquiries) should be initiated, or continued if it has already begun;
- Consider the assessment and the action points, if already in place;
- Plan how the s47 enquiry should be undertaken (if one is to be initiated), including the need for medical treatment, and who will carry out what actions, by when and for what purpose;
- Agree what action is required immediately to safeguard and promote the welfare of the child, and / or provide interim services and support. If the child is in hospital, decisions should also be made about how to secure the safe discharge of the child;
- Determine what information from the strategy meeting / discussion will be shared with the family, unless such information sharing may place a child at increased risk of significant harm or jeopardise police investigations into any alleged offence/s;
- Determine if legal action is required to convene a Legal Planning Meeting.

**Relevant matters include:**

- Agreeing, or reviewing how the assessment under s47 of the Children Act 1989 will be carried out - what further information is required about the children and family and how it should be obtained and recorded;
- Agreeing who should be interviewed, by whom, for what purpose and when.
- Agreeing, in particular, when the child will be seen alone (unless to do so would be inappropriate for the child) by the social worker during the course of these enquiries and the methods by which the child's wishes and feelings will be ascertained so that they can be taken into account when making decisions under section 47 of the Children Act 1989;
- In the light of the race and ethnicity of the child and family, considering how these should be taken into account and establishing whether an interpreter will be required; and
• Considering the needs of other children who may be affected (e.g. siblings and other children, such as those living in the same establishment, in contact with alleged abusers).

Outcome of S47 Enquiries

The Transition Team Manager is responsible for deciding how to proceed with the enquiries based on the strategy meeting / discussion and taking into account the views of the child, their parents and other relevant parties (e.g. a foster carer).

During the enquiry the scope and focus of the assessment will be that of a risk assessment which:

• Identifies the cause for concern;
• Evaluates the strengths of the family;
• Evaluates the risks to the child/ren;
• Considers the child’s needs for protection;
• Evaluates information from all sources and previous case records;
• Considers the ability of parents and wider family and social networks to safeguard and promote the child’s welfare;
• Considers how these risks can be managed.

It is important to ensure that both immediate risk assessment and long term risk assessment are considered.

The outcome of the s47 enquiries may reflect that the original concerns are:

- Not substantiated; although consideration should be given to whether the child may need services as a child in need;
- Substantiated and the child is judged to be suffering, or likely to suffer, significant harm and an initial child protection conference should be called.

Timescales

Strategy meetings / discussions should be convened within 72 hours of child protection concerns being identified, except in the following circumstances:

S47 investigations should be completed within fifteen working days and the concerns are substantiated and there is an ongoing risk of harm and danger posed to the children a CP conference should be requested.

Child Protection Conference should be convened within 15 working days of the initial strategy meeting/discussion.

Under the following circumstances the strategy meeting/discussion must happen on the same day as the receipt of the referral.
For allegations / concerns indicating a **serious risk of harm** to the child (e.g. serious physical injury or serious neglect)

- For allegations of penetrative sexual abuse if this is required to ensure forensic evidence;
- Where immediate action was required by agency, the strategy meeting / discussion must be held within one working day;
- A Child Protection medical examination should take place at the earliest opportunity to ensure that it is completed within the forensic window which is maximum 2 days.
- Therapeutic support to be provided where needed for children and young people who are viewed to have experienced traumatic experiences as part of the safeguarding process.

- In such cases that involve criminal investigation, the police will take the lead to undertake Achieving Best Evidence interviews with the child and young people. The outcome is for informing enquiries under Section 47 and any subsequent actions to safeguard and promote the child’s welfare, and possibly the welfare of other children;
- Informing any subsequent childcare proceedings and evidence gathering used in criminal proceedings.
- Informing any disciplinary proceedings against adult carers

**Complex referrals**

Where the concerns are particularly complex (e.g. organised abuse / allegations against staff) the strategy meeting / discussion must be held within a maximum of **five working days**, but sooner if there is a need to provide immediate protection to a child.

All allegations against staff are reported to the Local Authority’s Designation Officer (LADO) who takes the lead in this investigation and chairs the meetings.

**Case Recording**

It is the responsibility of the Team Manager/Senior Practitioner (chair of the strategy meeting / discussion) to ensure that the decisions and agreed actions are fully recorded using an appropriate form / record following the Mosaic CP workflow process. All agencies attending should take notes of the actions agreed at the time of the meeting/discussion.
The allocated social worker is responsible for recording the outcome of the s47 enquiries. The outcome should be put on the child’s electronic record with a clear record of the discussions, authorised by the line manager.

Where the concerns are not substantiated, the Transition Team Manager must authorise the decision that no further action is necessary, having ensured that the child, any other children in the household and the child's carers have been seen and spoken with.

Recording of s47 enquiries should include:

- Agency checks
- Content of contact cross referenced with any specific forms used
- Strategy meeting / discussion notes
- Details of the enquiry
- CP Medical (physical and sexual abuse)
- Body maps (where applicable)
- Assessment including identification of risks and how they may be managed
- Decision making processes
- Outcome / further action planned
- Consent from the parents to interview the children unless the parents are the perpetrators and requesting for consent will jeopardise the investigation or put the child at more risk.
- Views of the young person and for young people with communication difficulties, what communication aids and support has been implemented to promote communication and ascertain their views.

At the completion of the enquiry, the Transitions Team Manager should ensure that the concerns and outcome have been entered in the recording system including on the child’s chronology and that other agencies have been informed.

Disputed S47 Enquiry Decisions

Where it is concluded that threshold for an initial child protection conference is not met but the concerns are substantiated and professionals in other agencies remain seriously concerned about the safety of a child, these professionals should seek further discussion with the allocated social worker, their line manager and/or the designated safeguarding professional lead. The concerns, discussion and any agreements made should be recorded in each agency's files.

A child in need plan can be implemented to monitor the situation in a bid to safeguard the children and support the family to minimise the identified risks. However, in an event where the support is given to the family and a CIN plan is
implemented and there is no evidence of change, if the concerns persist the case can be escalated back to CP conference with more evidence to meet threshold

**Adult Safeguarding 18-25**

**Safeguarding** vulnerable adult: Pan London procedures are applied and the Local Authority’s safeguarding policy. The Adult Safeguarding Team takes the lead when a safeguarding matter arises.

If a Young Person is over 18 then the Pan London Safeguarding procedure should be followed with an initial alert raised with the Adult Safeguarding Team (safeguardingadults@brent.gov.uk)

http://intranet.brent.gov.uk/hcc.nsf/FWI%20Safe%20Guarding%20Adults/LBB-105

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**Team Meetings/Liaison with Children’s/Adult Services**

Transition Team Meeting – monthly chaired by Team Manager (HoS to attend quarterly)

Complex Case Discussion – monthly – chaired by Head of Service

Children with Disabilities Liaison – CWD Team Manager/Transition Team Manager

High Needs Student Meeting – monthly- chaired by Education

CAMHS liaison – bi-monthly – chaired by CAMHS professional

Senior Management Liaison – Operational Director, Social Care, Children/Head of Support Planning and Review, Adults

Team Managers Meeting – all Team Managers, Adults – chaired by Head of Service

Service Area Meeting – all Support Planning and Review Team Managers/Senior Practitioners – chaired by HoS

Children’s safeguarding Board (LSCB) – attended by Head of Support Planning and Review

LSCB sub groups attended by Team Manager and/or Head of Service
- Voice of the Child
- Vulnerable Persons Group
- Quality Audit and Outcomes
- Policy Group

**Governance**

The Team Manager and Senior Practitioner should ensure a timetable for periodic case audit, ensuring each young person’s case is audited utilising the Signs of Safety audit framework (see Appendix Four) a minimum of 3 **monthly**; either as part of Supervision or as a separate exercise to determine whether all key documents/Mosaic episodes are in place.

The audit should check (as appropriate)

- Evidence of Reason for Referrals
- Chronologies/Genogram
- Assessments of eligibility;
- Support Plan/EHC;
- Review
- Evidence of approval for funding for support
- Evidence that the voice of the child is central to all recording
- Person centred case note recording which shows purposeful contact with clear outcomes

The team will hold a central list which identifies all the Child Protection/Adult Safeguarding /LAC in and out of borough young people which will be updated monthly.

**PERFORMANCE**

There are a number of Performance Indicator’s currently reported for children and adults that the Transition Team will need to capture and report on.

- Number of Child and Family Assessments completed and whether the child was seen and spoken to in 10 working days.
- Total LAC of Statutory School Age ( excluding those in secure/YOI, and new LAC without provision
- Total Number of PEP outstanding
- Completed PEP Outstanding PEP%
- Current PEP completion Rate%
- Percentage increase in the No. of Carers assessments
- Percentage increase in the No. of Direct Payments
- Percentage of adults in receipt of a personal budget
Process for reviewing performance data

The performance data will be reviewed quarterly at the Transitions Team meeting by the Head of Service and Team Manager.

FUNDING

Team manager approval for social care funding

The Senior Practitioner and Team Manager can agree funding if the total cost of the package is up to £250 per week (£13,000 per annum)

Quality Assurance Meeting (QAM) approval for social care funding

Approval for support funding exceeding £250/week must go to QAM for approval. A QAM episode needs completing in Mosaic and should evidence:

- what the assessed need is
- the outcome being sought by commissioning support
- what other options have been considered
- the cost of the support being requested

All funded support must be reviewed a minimum of annually

Key review and approval of social care funding should be completed promptly for all young people eligible for the Transitions Service.

Budget Monitoring/Recording

The Team Manager will be involved with the Head of Service and Finance Lead in all budget monitoring meetings (usually monthly). These meetings will include:

- Checking monthly forecasts to ensure that they are as accurate as possible and explanations (including any corrective actions required) recorded for all significant variances.
- Education, health and social care funding to be recorded as separate lines within the support package so that funding streams are transparent total
- Periodic reviews to confirm that only valid and accurate purchase orders are open for individuals receiving a direct payment or direct service.

Workforce Development

- All staff must attend Signs of Safety Training and any associated updates
- All team members to have an individual performance agreement with clear objectives which will be reviewed a minimum of six monthly
- All staff to have monthly supervision and Signs of Safety headings to be used for case discussion
- Team development plan to be agreed based on individual appraisal outcomes
Ensure each team meeting has at least one ‘learning from practice (including serious case review recommendations etc.)

Complaints:

All complaints to the Transition Team are responded to following the LA complaints procedure and time scales. Complaints are responded to by the Team Manager/Senior practitioner but have to be seen by the Head of service who signs them off before they are sent to off and recorded on I-Grasp

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