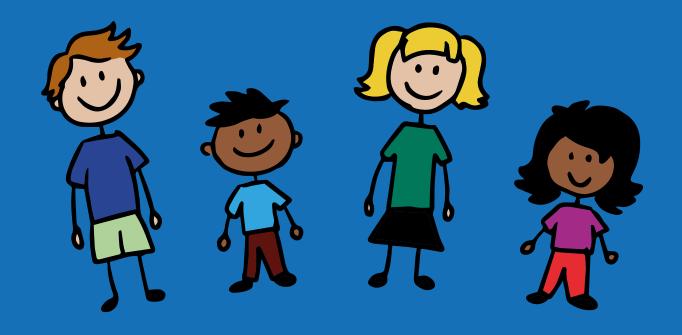
# Tameside's Practice Standards 2022





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### I. Introduction

## Welcome from the Assistant Director and our Children in Care Council

Welcome to our Tameside Children's Services Practice Standards document. I hope that you find these clear and useful in your work with our children and families. In Tameside, we have embraced the Signs of Safety Practice Model as it fits with our ethos and aspiration to work together with children, young people, their families and other agencies to build stronger relationships to keep children safe and remain living with their families and communities. We also want to be at the forefront of child-centred practice and Signs of Safety provides us with an evidenced based framework and easy to use tools to involve children and young people in decision making and planning.

You will be offered, training and support to become competent and confident in working with the Signs of Safety Practice Model and I hope that you find it helpful in working with children and families in a strength-based, compassionate and respectful way that builds upon and utilises their strengths.

This document also provides you with useful information and guides to relevant procedures and guidance, which will support you in developing your practice and the vital work you undertake with children and families.

In Tameside we are committed to developing ways of working that make a real difference to people's lives and to the communities that they live in. We value commitment, passion, empathy, honesty and integrity and believe that these values should be at the heart of everything we do.

Best wishes,



### **Children in Care Council**

We are really pleased that we have been involved in developing these Practice Standards. It means that in Tameside people are serious about listening to the experiences of children and young people (and doing something about it/them). We think it's best when we work together so that you can get to know us as individuals and find out about our lives, families and the things which are important to us. We believe that;

"I am the expert in being me
You are the expert in your field
If we truly join forces and work together as equals
I can be a better me and you would be able to help more young people, which would make you a better you."

https://www.tamesidesafeguardingchildren.org.uk/resources/materials/misc/voice of a child strategy.pdf

These practice standards are based on the things which we have told you are most important to us, like;

- making sure that we are involved in the decisions which are made about us
- that our views are listened to and acted upon
- how when we can't stay at home we would like to still see people and stay in touch with people that we have said are important to us
- and that we are given an explanation of what people are worried about often we already know this better than anyone.

We hope that these Practice Standards will guide and support you to do the best job you can for us.

### Link to Tameside's Policies and Procedures

Welcome (proceduresonline.com)

Care Leavers Offer - Care Leavers (tameside.gov.uk)

Short Breaks Offer - Children with Disabilities Respite Service (tameside.gov.uk)





The Tameside pledge was co-produced with young people who are equal partners in designing our pledge for Cared for children and young people. We strongly believe that that those who use our services are best placed to design it.

While you are in care we are your corporate parents. In Tameside we take this responsibility seriously and we will only promise you things we believe we can do.

### Our Pledge to all our Cared for Children is that we will:

- Prioritise your health and wellbeing
- Listen to what you say and take your views seriously
- Help you understand your journey and what's happening in your life
  - Provide a place for you to live that makes you feel safe
  - $\bullet$  Make a plan with you that will explain how we will look after you
    - Ask you what you think you need
    - Act on what you have told us and get back to you quickly
  - Help you to participate in having your voice heard and in doing so help us make our services better for you
    - Provide opportunities to meet other young people
    - Recruit permanent staff with you so that we are choosing the best workforce for our young people
- Expect all professionals who work with you such as social workers, support workers and Independent Reviewing Officers to give you the time you need to build relationships with them



# 2. Purpose of the Practice Standards

In Tameside we are serious about improving practice in order to deliver outstanding services and support to the children and families that we work with. We are interested in working with families to make a difference to children's daily lives and in finding out what helps them the most – and doing more of that.

These Practice Standards set out how we 'do our business' (expect you to practice) in Tameside. They are designed to guide and support you in your work with families so that you develop a sound understanding of what to do and why you are doing it.

We hope that they will support you into becoming an experienced, confident, curious and autonomous professional who can make sound decisions, assessments and judgements which are based on an informed theoretical evidence base.

This is the workforce we want to grow in Tameside because we know that it is with these skills that will make our organisation stronger and more effective; resulting in those differences which we are serious about making in Tameside for our children and families.

These Practice Standards have been developed collaboratively with staff and our young people about what outstanding practice in Tameside looks like and how it reflects our core philosophy and principles.



### 3. Tameside's Practice Model

In Tameside we have invested in Signs of Safety as our Practice Model. This is because we want to get better at how we work **with** children and families. We know that having a relationship with people makes our work more effective and we know that in order to develop this relationship we need to show compassion and respect and find out about the things which they are good at or that are working well for them.

Signs of Safety is a strengths and relationships based approach which provides an overarching framework for all our work across our organisation. The overall aim is to transform our approach to how we deliver services and support to children and families and that we implement the model across all our services. Tameside believes that the model will provide a clear theoretical framework and methodology to drive practice standards, service delivery and workforce development in line with Tameside's improvement plan and vision for the children and families we are working with.

Tameside has a clear vision that we will empower and enable families to bring about their own change and to require less intrusive levels of intervention. The Signs of Safety Model provides a clear set of skills, values and principles for practitioners and partners to use in their practice with families in order to achieve this.

Signs of Safety will enable professionals to work collaboratively with families to conduct assessments and produce plans; focussing on their strengths and resources. The model provides tools for professionals to build effective relationships with families in order that they develop a clearer understanding of what needs to change and how this can be achieved. It recognises the strengths within families and aims to give them the best chance to bring their own solutions to problems. The approach moves away from the professional adopting the position of expert towards a more constructive culture where families and professionals engage together in addressing concerns.

Child participation is central to the Sign of Safety model and specific tools are available to involve and engage children to ensure their views are understood by professionals and their families. The model can be adapted to be used at all stages of work with children and families from early help, child protection through to cared for children.



# 4. IS your PRACTICE up to the Eight Tameside Standards?

In Tameside we have 8 practice standards that we expect all Children Services staff to be meeting. If we are not meeting these STANDARDs then we need to improve our PRACTICE.

- 1. Children are spoken to alone and worked with by Professionals who have the tools to directly engage with them. ARE YOU SPEAKING TO CHILDREN ALONE? 'This is important because my social worker needs to know how I am feeling as looking happy and saying your happy is not always the truth' (Alicia, aged I3 CICC), I want to share my ideas and opinions with my social worker (Kiera, aged I2,CICC)
- 2. All children will have a Signs of Safety Assessment reflecting, What Are We Worried About? What is Working Well? What Needs to Happen? AND a Safety Scale of 0-10. DOES YOUR ASSESSMENT REFLECT THIS? The assessment will include their voice, their parent's voice and the voice of all the people who are important to them 'I want my social worker to know how I live and understand how this affect me' (Phoebe, aged I2, CICC)
- 3. All children will have a SOS Support/Safety Network which includes all the people that are important to them and who can help them to sort out their worries. DOES YOUR CHILD HAVE A SUPPORT/SAFETY NETWORK? "I want to stay connected to the people who are important to me" (Anon aged I2)
- 4. All children will have a SOS Safety/Success Plan that details how the worries/risks will be managed and reduced and how the child's daily lived experience will change and/ or to address the worries and support the child/young person to reach their success goals. DOES YOUR PLAN EXPLAIN/INCLUDE THIS? "My Social Worker needs to make sure I live in a safe place, have enough sleep, food and money" (Anon, aged I2)
- 5. All children will have a SOS Words and Picture explanation of the reasons why Children's Services are involved in their life; this will be used in direct work sessions. AT the right time this will include the SOS Safety/Support Plan and the work being undertaken to implement their plan? HAVE YOU COMPLETED THE WORD AND Pictures explanation?
  1 want my social worker to answer all the questions which I need answering' (Alicia, aged I3 CICC)
- 6. All case recordings on ICS are analytical, well written and TIMELY SO that everyone can understand significant events that have happened; can see the SOS Assessment and Safety/ Success Plan in place and who is responsible for doing what, when and how. ARE YOUR RECORDINGS WELL WRITTEN, UP TO DATE AND TIMELY? "I want my Social Worker to think about my life, what is important and my future" (Alicia, aged I3 CICC)



- 7. Every child is supported by timely Management Oversight of the Professionals that are working with them. This includes SOS Management Oversight at the Referral/Assessment/ Plan/Review stages to ensure that the work meets the required standards AND that TIMELY SOS Supervision is carried out with all Professionals to ensure that our work is improving the Daily Lived Experience of the Child. DOES YOUR WORK HAVE MANAGEMENT OVERSIGHT/ DO YOU HAVE REGULAR SUPERVISION? "I want someone to ensure that my Social Worker is doing their job correctly and putting my needs first". (Dorothy, aged I6 CICC)
- 8. All Professionals will use the SOS approach to engage with children and their families to improve the children's lives. ARE YOU USING SIGNS OF SAFETY? 'Signs of Safety is when you get lots of help because it's important you feel safe" (Phoebe, aged I2 CICC)

You must take the time to read and fully understand the Tameside Practice Guidance that follows.

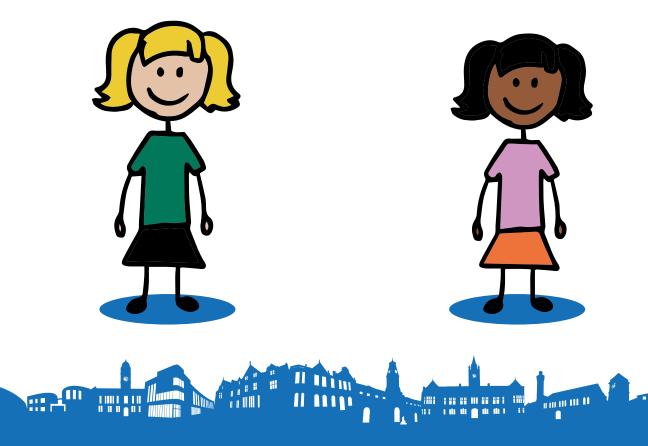


# 5. Social Work England Professional Standards

In Tameside we are committed to ensuring that all our social workers uphold and adhere to SWE's professional standards. This involves an expectation that each social worker understands the standards and how they translate into their day to day practice as a professional social worker.

### Our professional standards are:

- 1. Promote the rights, strengths and wellbeing of people, families and communities
- 2. Establish and maintain the trust and confidence of people
- 3. Be accountable for the quality of my practice and the decisions I make
- 4. Maintain my continuing professional development
- 5. Act safely, respectfully and with professional integrity
- 6. Promote ethical practice and report concerns



# 6. An A- Z of Signs of Safety Terms and Tools:

**Appreciative Inquiry** - A line of questioning that purposefully focuses on what has gone well and brings about an understanding about how this has been achieved through reflective questioning in order to support learning and development for the future.

Turning questions into conversations: **EARS** process - **Appreciative Inquiry** 

Elicit First question	<ul> <li>Tell me about a piece of practice you feel proud of.</li> <li>Tell me when you have used Signs of Safety and it has been useful to you.</li> </ul>
Amplify Behavioural detail: What would you see?	<ul> <li>Who did what, where and when?</li> <li>What happened that made this piece of work important?</li> <li>What made this different?</li> <li>How did you make this happen?</li> <li>What else did you do? What else? and what else?</li> <li>Who else was involved? How did they help to build this success?</li> <li>What would</li></ul>
Reflect	<ul> <li>When you think about this piece of work, what was the most important thing you learned?</li> <li>What is the thing that you feel proudest of in this situation?</li> <li>On a scale of 0-10, where would you rate this practice? Where 0 is 'it was my worst effort ever', and 10 means 'it's as good as I can do'.</li> </ul>
Start over	Begin again looking for more behavioural and meaning detail.

**Bottom line** - A minimum set of conditions set by the social worker and their manager about how the safety, success or wellbeing goal should be achieved.

**Cultural Genograms** - A genogram developed with the family that explores family relationships, history, values and beliefs.

**Danger statement** - A clear, jargon free statement setting out what we are worried about and what will be the likely impact on the child if nothing changes, where there are worries about the child's safety.

**Family Finding** - A set of strategies and tools, values and beliefs developed by Kevin A Campbell. The approach is mandated by United States Federal Law for all children and young people in foster care or at imminent risk of placement in the care system and has been recognised as best practice when using the Signs of Safety approach.

**Family Network Meeting** - A meeting attended by the family's naturally connected network whereby the social worker facilitates the family and their network to develop a safety plan for the child.

**Group Supervision** - A facilitator, supported by an advisor, leads a case holder and a number of observer/participants through the process of developing a genogram, sharing information about the case and developing danger statements, safety goals and best questions. The purpose of this is to reflect, practice skills and develop next steps.



### **Harm Matrix**

A risk assessment tool to help you to analyse the harm by focusing on the domains; behaviour, chronicity, severity and impact. This should be used within your assessment to clarify the harm to the child or young person and use this information as the basis for your danger statement/s.

# **Actions & Experience**

### Signs of Safety Harm Analysis Matrix

### **Time**

	Timeline	First Incident	Worst Incident	Last incident
Behaviour  The dangerous or harm causing adult behaviour. Can also be a young person's dangerous behaviour	What is the worrying adult behaviour and how long has it been happening? How many times has that adult behaviour happened over the total time span?	When and what was the first time your agency heard about the worrying adult behaviour?	When and what was the worst event of worrying adult behaviour your agency knows about?	When, and what is the most recent event of worrying adult behaviour your agency knows about?
Severity  Describes how bad the harmful adult behaviour has been happening, how bad has the adult behaviour been?  Over the whole timespan the adult behaviour has been happening, how bad has the adult behaviour been?		How bad was the first event of adult worrying behaviour?	How bad was the worst event of worrying adult behaviour?	How bad was the most recent event of worrying adult behaviour?
Impact  Describes the physical and emotional impact of the adult behaviours on the child	Over the whole timespan the adult behaviour has been happening what has been the overall impact on the children?	What was the impact of the first incident on the child(ren)?	What was the impact of the worst incident on the child(ren)?	What was the impact of the most recent incident on the child(ren)?



**Internal Case Mapping** - A process involving the case holding social worker, whereby information is considered and analysed across the 7 signs of safety analysis domains (harm, danger, complicating factors, strengths, safety, safety goals and next steps)

### What are we worried about?

**HARM**: things that Mums and Dads or people looking after your child do that hurts or really scares them.

Sometimes it's what the adults don't do, like forgetting to give the child food they need or not geting them to school.

**DANGER:** This is what we're scared will happen to the child if nothing gets better or changes.

#### **COMPLICATING FACTORS:**

Things that happen in the family or around the child that make it harder to make sure the child is always safe and looked after like they need...

### What's working well?

### **EXISTING STRENGTHS:**

Those things that mum/dad/ others in your child's life are really good at and that make your child feel safer at home.

**EXISTING SAFETY:** Things mum/dad/others already do that make sure your child is safe and okay even when things get difficult or dangerous...

### What needs to happen?

safety Goals: The things that we need to see happening to be sure your child is always safe particularly when life gets hard. Once you know what we need to see (to get out of your life), we're going to ask you to come up with best ideas about who can do what to show everyone the child is safe...

**NEXT STEPS:** The next one or two things we need to do to move one or two points up the scale.

0

10



**Mapping with a Family** - The assessment process whereby the social worker engages the family by asking questions in order to gather information and consider and analyse this with the family, across the 7 analysis domains

### What are we worried about?

# What has happened in the past to bring about the concern? Be clear about what has actually happened. What could happen in the future? Keep working between 1 & 2

- Write a danger statement for each concern and be clear about the impact on the child's safety & wellbeing. Who is worried? Why are they worried? What are they worried about?
  - What makes the situation more complicated?

### What's working well?

Ask about when things have worked well? What was happening then? What were they doing? What are they proud of? Ask about those who help the family (or have helped) to begin thinking about their possible safety network.

### What needs to happen?

- Clearly state what you need to see happening to keep the child safe.
  What do the family think needs to happen?
- Look at specific, achievable goals that can reduce the risk on each danger statement. Include clear expectations and responsibilities from each person. Involve the family and/or friends in the safety network.

### **Scaling Question**

Make sure that everyone is asked their opinion on where things are on the scale. Be aware that not everyone will agree. Ask why they see things at this point and what needs to happen to move up on the scale



**Questioning approach** - In Signs of Safety, we use a questioning approach to facilitate a process where the family or young person can think into and through the problem themselves and be given the opportunity to arrive at their own solutions with the support of their network.

### What are we worried about?

- What have we seen/heard that worries us? How do we know?
   What evidence do we have?
- What harm has happened to any children in the care of these adults?
- When did the problem happen?
- Has it happened before? How often was it? How bad was it?
- How did the incident affect the child?
- What are the first, worst and last times this has happened?
- · What were the triggers for this?
- Which part of this worries you most?
- What do you think most worried the children/parents/ the police/the social worker?
- How does the child/young person feel about this?
- What do you think is the worst thing that could happen because of this problem?
- When did we start to worry about this child or young person? What has changed that has made us more concerned?
- What are we worried will/might happen if nothing changes? What could be the impact of this on the child/young person?
- Is there anything that has been making this problem harder to deal with?

### What's working well?

- Who are the people who care most about X?
- What would X say they most like about Y? What are their best qualities?
- What are the best things about how they care for the child/young person?
- What would the child/young person say are the best things about their life?
- Who would the child/young person say are the most important people in their life?
- How do these people help the child/ young person grow up well?
- What would the parents say is the best help they've received?
- What would X say has been the best help they have received?
- Can you tell about what works well at school for X?
- What reward systems works well for X?
- What calms X down when they become agitated?
- What are the good things that their diagnosis of ASD/ other things brings to X? (Is anyone enabling X to use their skills in a positive way?
- What would the children say are the best things about their family?
- What would the children say are the best parts about their day?
- What would mum say is the most important thing about her relationship with her father?
- What would mum say are the best ways that she cares for her children?
- Have there been times when this problem has been dealt with or was even a little bit better? How did that happen?
- What are the best ways mum/dad/ family have been trying to manage these problems?

### What needs to happen?

- What do you think is the next step that should happen to get this worry sorted out?
- What would the child/young person need to see that would make them say this problem is completely sorted out?
- What would you need this to look like for you not to have to worry?
- Timescales when do we need to see changes by? And for how long will we need to see this for us not to worry about the problem anymore?
- What will we see that will show us that this plan is working?
- When you think about X (whatever it is that is stopping things from going well) is there anything you can think of that could help in any way?
- Can you think of one small manageable step that would improve X for you?
- What would be happening if things were working better for you?



**Safety goal** - A clear, behaviourally specific, jargon free description of what we need to see to know the child is safe enough to close the case. What will the members of the family be doing that will tell us that the child is safe.

**Safety Planning** - The process of engaging the family and their wider network through a series of questions in order to support them to develop a safety plan for the child. The safety plan must address each danger statement.

**Success Planning** - The process of engaging the child/young person and their family/carers and their wider network through a series of questions in order to support them to develop a success plan for the child. The success plan must address each worry statement.

**Safety Plan** - The plan that the family develops setting out what everyone in the family will do on a day to day basis to keep the child safe, even when things become difficult

**Success Plan** - Who will do what, when, where and how to address the worries and support the child/young person to reach their success goals?

**Scaling Question** - A question that asks someone to rate something on a scale of 0 to 10, where the 0 and 10 are clearly defined

**Solution Focused Questions** - A range of questions that enable conversations about problems/ difficulties to be discussed in a way that opens up possibilities for change by identifying the things that are working and the things that would need to be different for the problem to be resolved.

**Trajectory** - A clear, agreed timeline of what will happen between 'now' and case closure or the case stepping down

Date/Timeline	Steps/Tasks	Tools/Meetings/ Monitoring

**Worry Statement** - A clear, jargon free statement setting out what we are worried about and what will be the likely impact on the child if nothing changes, where there are worries about a child's wellbeing.

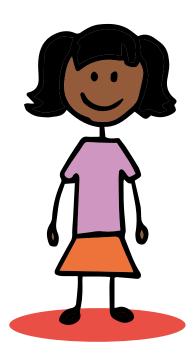
**Wellbeing Goal** - A clear, behaviourally specific, jargon free description of what we need to see to know the child is healthy and well so that the case can close. Includes what the members of the family will be doing that will tell us that the child is healthy and well.



### **How to Adapt the Framework**

The Signs of Safety framework can be adapted so that it can be used across all services within Children's Social Care at each level of the continuum from early help through to leaving Care.

Status of Case:	Signs of?	
Early Help	Signs of Wellbeing	
Child in Need Signs of Wellbeing/Safety		
Child Protection	Signs of Safety	
Cared for Children	Signs of Success	
Leaving Care	Signs of Success	
Fostering and Adoption	Signs of Stability	



### 7. The Child's Voice

### Direct work with children; listening and explaining

In Tameside, we believe that communication with children and young people is of paramount importance. This is because we know that when we involve children and young people in our assessments, plans and decision-making that we achieve better outcomes for them. We want to develop relationships with the children and young people we are working with so that they feel comfortable talking to us and so that we can build up an understanding of their daily lives.

Communication is not just about listening to children and young people; it is also about explaining things to them. We want to be able to provide clear explanations about the decisions which affect their lives.

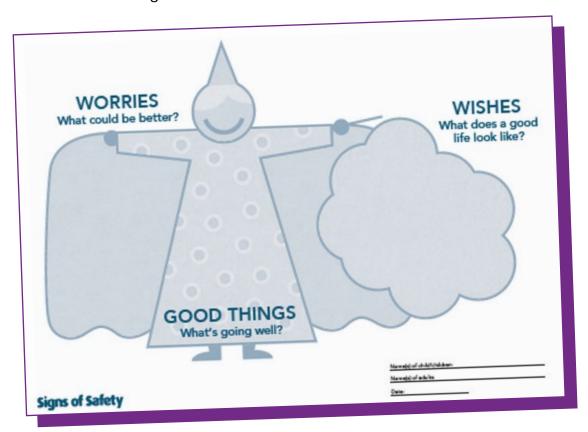
Signs of Safety provides us with tools to help us in our direct work with children and young people so that we can both listen to them and effectively explain things to them.

### **Listening Tools:**

**The Three Houses:** A tool for working with children to help them identify their worries, the things they feel are going well and the things they would like to be different:

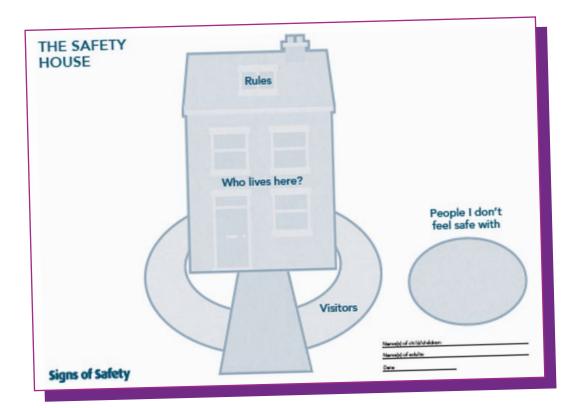


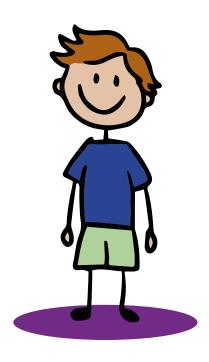
**Wizard and the Fairy:** This is a tool, which can be used with younger children, and which follows the structure of the framework; what is working well, what are you worried about and what needs to change?





**Safety House:** This is an alternative tool for finding out about the child's daily life; who lives in the house, who can and cannot visit and what are the rules?





### **Explaining Tools**

**Words and Pictures:** A specific piece of work that helps children understand what the adults involved are worried about and what everyone is doing to sort out those worries, in the form of a story board for the child. The words and pictures story board is developed with the parents and the parent shares this with the child.

The table below sets out the range of tools available, the intended purpose of each tool and how the different tools either fit together or build upon each other.

What piece of work am I completing?	Which tool/s could I use?	At what stage of my involvement should I use it?
Finding out from a child or young person about their daily lived experience	Direct work tools e.g. Three houses, Wizard and Fairy, Safety House, Games and Activities, Observations (nonverbal), Photographs	From the start of my involvement and at regular intervals throughout my involvement
Explaining the worries or the concerns to a child or young person and why you are involved	Words and Pictures, Social Stories (Children with disabilities)	As part of my planning after I have completed my assessment. Ideally this piece of work should be undertaken in collaboration with parents/carers
Explaining the plan to a child or a young person	Words and Pictures, Safety/ Success plans, Child's version of the plan, Board Maker (Children with Disabilities), Visual Timetable	When you have planned your plan you then need to create a version which the child or young person can understand
Explaining the events which have happened to a child or young person in their life	Life Story Boom templates, Contract of Expectations, Words and Pictures, Life Story Trees, Photographs	When a child is cared for and has a permanence plan in place

Integral to the effectiveness of these pieces of work is the quality of the relationship between the social worker and the child/young person. So remember that it is not solely the tools you use which are important; it is how you use them, how you listen and how you engage and show respect to the children and young people you are working with which makes the biggest difference.



### Direct work with non-verbal children

When a child is at an age where they are unable to express their views or understand you, you should still provide an analysis on their development and wellbeing through observations and discussions with their parents/carers and other professionals who may be involved such as the health visitor or nursery.

When a child is unable to verbalise their views due to their individual needs, it is important that you still try to engage with them through using creative methods and through working closely with those professionals and family members who know the child or young person best.

### **Analysis of Direct Work**

It is important that once we have completed the direct work with the children and young people we are working with that we use it to inform our assessment and our plan. For example, a child's views may tell us the following:

- If they feel safer, happier and healthier or if they feel scared and frightened or depressed and anxious
- If the safety or success plan is working or if things need to change
- Who they perceive to be important to them and who should be part of their network

Therefore, it is important that we always form a connection between what a child tells us, or of what we observe, with our assessment, decision making and planning.

The voice of the child should be reflected in our assessments and plans in the following ways:

- Reference the direct work tools you have used and ensure that all original direct work is attached to your assessment and plan.
- Demonstrate how you review and develop your direct work so that it is not just a one off event. It is important that you show how you have continued direct work with them over time; showing how you have built up an understanding of their daily lives and their world.
- Use the child or the young person's own words and language and be explicit if you have formed a professional view about what they have said.
- Ensure that the direct work you have undertaken is clearly connected to their plan so that it is evident how what they have said has informed your plan.
- Always ensure that you have 'closed the loop' with the child and young person you are
  working with so that they know what has happened to the work you have undertaken with
  them and who it has been shared with.

### Life Story Work

In Tameside, we ensure that all children, where there is a permanence plan in place, have a Life Story Book. This is a book, which captures their unique life experiences and journey. We do this by sensitively collecting information that is important to them about their family, friends and significant relationships. Often this work will build on any previous direct work which has been undertaken with the child or young person, in particular their words and pictures explanations.



### 8. Practice Guides

### **Early Help Practice Standards**

Practice Area	Approach	Tools to help you	Tameside Practice Standards
Preparation	Before a visit take time to prepare best questions relating to identifying worries/ strengths/existing wellbeing with the parents/carers and the child.  Read and consider the history to the case.	Best Questions Sheet Internal Case Map	Practice Standard 2 – Assessment, All children will have a Signs of Safety Assessment reflecting, What Are We Worried About? What is Working Well? What Needs to Happen? The assessment will include their voice, their parents voice and the voice of all the people who are important to them.
Initial Home Visit	Explain the way that we work with families in Tameside and what to expect.  Gain consent to undertake a Early Help Assessment and gather information from other agencies and services.  Check all the family demographics.  Start to build a relationship with family using your prepared strengths based questions.	SOS Leaflet for parents and children Consent form	Practice Standard 2 – Assessment, All children will have a Signs of Safety Assessment reflecting, What Are We Worried About? What is Working Well? What Needs to Happen? The assessment will include their voice, their parents voice and the voice of all the people who are important to them.

Practice Area	Approach	Tools to help you	Tameside Practice Standards
EHA Assessment The process for this work would be part of the assessment and completed in 9 weeks.	Share your worry statement/s and wellbeing goals developed in the MASH with parent/carer and each agencies score from the contact/referral and discussion.  Start to map with the family worries and strengths/safety together with the family using best questions for both worries and strengths.	SOS leaflet Early Help Assessment process	Practice Standard 2 – Assessment, All children will have a Signs of Safety Assessment reflecting, What Are We Worried About? What is Working Well? What Needs to Happen? The assessment will include their voice, their parents voice and the voice of all the people who are important to them.
	Start to identify support networks with the family, spending time to understand the family's beliefs, religion, history and culture. If parents/carers say they have no one in their network – sensitively ask questions to explore this further.  Draft bottom lines which should include the need for a network and where appropriate an explanation for the children.	Genogram Network Questions Support Circles Start to think about GCP if appropriate	Practice Standard 3 – Network, All children will have a SOS Support/ Safety Network which includes all the people that are important to them and who can help them to sort out the worries.
Gather Children's Views This could be a separate visit to meet children/ young people	Gather views of the children using best questions as part of the assessment in order to understand their worries, the things they feel are going well and the things they want to be different.  When children are very young we observe how they look, behave and interact with others in order to understand what they are telling us.	Three Houses/ Safety House/ Wizard and the Fairy/ VOC booklet	Practice Standard 1 – Childs Voice, Children are spoken to alone and are worked with by professionals who have the tools to directly engage with them

Practice Area	Approach	Tools to help you	Tameside Practice Standards
By Week 5 of Assessment	and Safety Goals with the support network which are clear specific and jargon free so parents know what we are worried about and what we need to see in order to close the case. Ask everybody to scale.  Start to grow the support plan with the family and network. Focus on- What does it look like when things are going well? First small signs of trouble, Triggers and stressors. If appropriate, introduce the Support Journal and Support Object to the amily.  Plan a SC Plan the Volumn and Support Object  Support Journal and Support Object  Support Journal and Support Object  Plan a SC Plan a SC Plan the Volumn and Support Object  Support Journal and Support Object  Plan a SC Plan a SC Plan a SC Plan a SC Plan and Support Object		Practice Standard 4 - Plan All children will have a SOS Safety/Success Plan that details how the worries/risks will be managed and reduced and how the child's daily lived experience will change and/ or to address the worries and support the child/young person to reach their success goals.  Practice Standard 5 - Word and Pictures, All children will have a SOS
	If appropriate, draft and agree an explanation of the concerns for the children.	Words and Pictures	Words and Pictures explanation of the reasons why Children's Services are involved in their life.
Week 8 First review meeting	First review working. Ask for everyone		Practice Standard 7 - Management Oversight, Every child is supported by timely Management Oversight of the professionals that are working with them.  Practice Standard 8 – Partnership Working, All professionals use the SOS approach to engage with children and their families to improve the children's lives.

Practice	Approach	Tools to	Tameside Practice
Area		help you	Standards
Week 9	Share and Sign off the Assessment and Plan. Hand the plan over to the network.	Early Help Assessment and Wellbeing Plan	Practice Standard 4 – Plan, All children will have a SOS Safety/Success Plan that details how the worries/risks will be managed and reduced and how the child's daily lived experience will change and/ or to address the worries and support the child/young person to reach their success goals.

### **MASH Practice Guidance**

Practice Area	Approach	Tools to help you	Tameside Practice Standards	Professional SWE Standards
Preparation	Make sure you are clear about the information you need to get before making contact with the parent or professional.  Develop questions to ask professionals or the referrer about specific, observable, behaviours of the parent/child that they are worried about. Help them to be clear and specific about their observations, clarifying how often, over what period and how serious these worries are.  Develop questions that enable you to understand the strengths and the safety within this family.	Harm e.g: What specifically are the parents doing? How severe? What was the worst time? How has this worry affected the child/what have you seen/heard? What has the child said/done?  Strengths/Safety e.g: What do parents do well? What would mum say she likes most about her child? Tell me about the times when the children are looked after ok? Has there been a time when dad stopped himself getting angry and instead of hitting someone did something different? So the house is a mess, how do they manage to keep the child reasonably healthy and clean?	Practice Standard 2 – Assessment, All children will have a Signs of Safety Assessment reflecting, What Are We Worried About? What is Working Well? What Needs to Happen? The assessment will include their voice, their parents voice and the voice of all the people who are important to them.	Professional Standard 3 – Be accountable for the quality of my practice and the decisions I make.  Professional Standard 1 – Promote the rights, strengths, wellbeing of people, families and communities.



Practice Area	Approach	Tools to help you	Tameside Practice Standards	Professional SWE Standards
Preparation	Look carefully through the history and consider what life is like for this child.  Ask for consent to speak with other professional unless to do so would place the child at risk of harm.  Carefully consider the implications to the child and to the parents if you are considering overriding parental consent.			Professional Standard 6 – Promote ethical practice and report concerns.
Contact and Referral	Map information into what's working well and what we are worried about being clear about what is fact and judgement.  Develop draft Danger Statements and Safety Goals.  Carefully go through each part of the concern/worry with parents/carers. Share danger statement and safety goal with parent/carer.	Internal Case Mapping	Practice Standard 2 – Assessment, All children will have a Signs of Safety Assessment reflecting, What Are We Worried About? What is Working Well? What Needs to Happen? The assessment will include their voice, their parents voice and the voice of all the people who are important to them.	Professional Standard 2 – Establish and maintain trust and confidence of people.

Practice Area	Approach	Tools to help you	Tameside Practice Standards	Professional SWE Standards
Contact and Referral	Seek to understand their view and record their response.  When a decision has been made for a referral to be made to allocate for assessment, provide an explanation to parents that in Tameside we will work with them and their wider network to find solutions to the problems.			
	Start to encourage the parent/carer to think about who in their network they would like to involve.  Ask for consent to speak with other professionals unless to do so would place the child at risk of harm. Carefully consider the implications to the child and to the parents if you are considering overriding parental consent.	Support network questions e.g: In your view which people are most helpful with the children? Who would parents say help and support them? When things have been difficult in the past who would parents say have been most helpful?	Standard Practice 3 – Network, All children will have a SOS Support/ Safety Network which includes all the people that are important to them and who can help them to sort out the worries.	Professional Standard 6 – Promote ethical practice and report concerns.



Practice Area	Approach	Tools to help you	Tameside Practice Standards	Professional SWE Standards
Contact and Referral	Speak to the professionals/people who know the family/child best.  Share next steps with the family.  Feedback outcome to referrer.		Practice Standard 8 – Partnership Working, All Professionals will use the SOS approach to engage with children and their families to improve the children's lives.	
Strategy Discussion	Analyse the harm by considering the behaviour, the severity and frequency of the behaviour and the impact on the child. Develop agreed danger statement and safety goals and each agency should scale.  Agree next steps.	Harm Matrix SOS Strategy Meeting Process	Practice Standard 8 – Partnership Working, All Professionals will use the SOS approach to engage with children and their families to improve the children's lives.	



### Safeguarding and CIN Practice Guidance

Practice Area	Approach	Tools to help you	Tameside Practice Standards	Professional SWE Standards
Preparation	Before a visit take time to read the file and the history to the case. Consider any other relevant professionals' perspectives and information. Start to 'map' the information across the 7 domains.  Prepare best questions relating to identifying harm/strengths/ existing safety with the parents/carers and the child.	Internal Case Mapping  Best Questions Sheet	Practice Standard 2 – Assessment, All children will have a Signs of Safety Assessment reflecting, What Are We Worried About? What is Working Well? What Needs to Happen? The assessment will include their voice, their parents voice and the voice of all the people who are important to them.	Professional Standard 3 – Be accountable for the quality of my practice and the decisions I make.
Initial Home Visit	Explain the way that we work with families in Tameside and what to expect.  Share draft Danger Statement and Safety Goal developed in the MASH with parent/carer and each agencies score from the contact/referral or strategy discussion.	SOS leaflet for parents and children	Practice Standard 8 – Partnership Working, All professionals will use SOS approach to engage with children and their families to improve the children's lives.	Professional Standard 1 – Promote the rights, strengths and wellbeing of people, families and communities.



Practice Area	Approach	Tools to help you	Tameside Practice Standards	Professional SWE Standards
Initial Home Visit	Start to map with the family the worries and strengths/safety together with the family using best questions for both worries and strengths.	Case Mapping with the family	Practice Standard 2 – Assessment, All children will have a Signs of Safety Assessment reflecting, What Are We Worried About? What is Working Well? What Needs to Happen? The assessment will include their voice, their parents voice and the voice of all the people who are important to them.	Professional Standard 2 - Establish and maintain the trust and confidence of people.
	Start to identify support network with the family, spending time to understand the family's beliefs, religion, history and culture. If parents/carers say they have no one in their network – sensitively ask questions to explore this further.	Genogram Network Questions Support Circles	Practice Standard 3 – Network, All children will have a SOS Support/Safety Network which includes all the people that are important to them and who can help them to sort out the worries.	
	Ensure that the father/male carer/partner (whether or not they are residing within or outside the family home) is included and engaged with your assessment.			
	Gather views of the children using best questions as part of the assessment in order to understand their worries, the things they feel are going well and the things they want to be different.	Three Houses/ Safety House/ Wizard and the Fairy	Practice Standard 1 – Child's Voice, Children are spoken to alone and are worked with by professionals who have the tools to directly engage with them.	



Practice Area	Approach	Tools to help you	Tameside Practice Standards	Professional SWE Standards
Initial Home Visit	When children are very young observe how they look, behave and interact with others in order to understand what they are telling us.  Draft bottom lines which should include the need for a network and an explanation of the worries for the children.  In an emergency situation where the child's immediate safety is a worry the social worker and their manager do their upmost to convene a rapid family network meeting on the same day (which could be in the office/at a Hospital). The family network meeting focuses on what needs to happen to keep the child safe for the next few days. Contingency planning takes place to identify a foster placement in the event that the network are unable to identify a satisfactory safety plan.		Practice Standard 4 – Plan, All children will have a SOS Safety/ Success Plan that details how the worries/risks will be managed and reduced and how the child's daily lived experience will change and/ or to address the worries and support the child/young person to reach their success goals.	Professional Standard 6 – Promote ethical practice and report concerns.

Practice Area	Approach	Tools to help you	Tameside Practice Standards	Professional SWE Standards
Second Home Visit	Do more work on developing the network.  Do more work to identify everything constructive about direct parenting using best questions for strengths/existing safety to start to develop safety plan.	Genogram Network Questions Support Circles Strengths based questions sheet	Practice Standard 3 – Network, All children will have a SOS Support/Safety Network which includes all the people that are important to them and who can help them to sort out the worries.	Professional Standard 1 – Promote the rights, strengths and wellbeing of people, families and communities.
	Continue to gather views of the children.  Develop a timeline and trajectory for the work.	Three Houses/Safety House/Wizard and the Fairy Trajectory	Practice Standard 1 – Child's Voice, Children are spoken to alone and are worked with by professionals who have the tools to directly engage with them.	



Practice	Approach	Tools to	Tameside Practice	Professional
Area		help you	Standards	SWE Standards
Family Network Meeting (within 15 days of an assessment being started)	Share Danger Statements and Safety Goals with support network which are clear specific and jargon free so parents know what we are worried about and what we need to see in order to close the case or return the child to their care. Ask everybody to scale.  Start to grow the safety plan with the family and network. Focus on- What does it look like when things are going well? First small signs of trouble, triggers and stressors. Introduce the Safety Journal and Safety Object.  At the Family Network Meeting, the draft danger statements and safety goals are shared and refined with the family and their network. Members of the family's network are asked to scale the situation from 0-10 in relation to each worry statement/wellbeing goal  Bottom lines are kept to a minimum and shared clearly with the family  Family members and their informal network are invited to develop a plan that will address each worry  The process is facilitated by asking questions that help to test out the plan  Everyone in the network gets a copy of the plan developed.	Safety Plan Safety Journal Safety Object Danger Statements/ Safety Goals/ Scaling/Bottom Lines	Practice Standard 4 – Plan, All children will have a SOS Safety/Success Plan that details how the worries/risks will be managed and reduced and how the child's daily lived experience will change and/ or to address the worries and support the child/young person to reach their success goals.	Professional Standard 3 – Be accountable for the quality of my practice and the decisions I make.



Practice Area	Approach	Tools to help you	Tameside Practice Standards	Professional SWE Standards
Third Home visit	Draft a child's version of the plan.	Child's Version of the plan	Practice Standard 4 – Plan, All children will have a SOS Safety/Success Plan that details how the worries/risks will be managed and reduced and how the child's daily lived experience will change and/ or to address the worries and support the child/young person to reach their success goals.	Professional Standards 3 – Be accountable for the quality of my practice and the decisions I make.
	Draft and agree an explanation of the worries/concerns for the children with parents.	Words and pictures	Practice Standard 5 – Words and Pictures, All children will have a SOS Words and Pictures explanation of the reasons why Children's Services are involved in their life.	
	Start to monitor and test the plan. At review meetings ask everyone to scale to find out if the plan is progressing. If it isn't – review the plan and make changes.	Home Visits/ Safety Journal/ CIN review meetings/Core Groups/Direct work with children		
Fourth Home visit	Share words and pictures explanation with the children and the network.	Words and Pictures	Practice Standard 5 – Words and Pictures, All children will have a SOS words and pictures explanation of the reasons why Children's Services are involved in their life.	



Practice Area	Approach	Tools to help you	Tameside Practice Standards	Professional SWE Standards
Ongoing work as set out in the trajectory until the case can be stepped down/ closed	Continue to monitor and test the plan Involve all professionals and network	Home Visits/ Safety Journal/ CIN reviews/Core Groups /Direct work with children  Review at CP Conference	Practice Standard 8 – Partnership Working, All Professionals will use the SOS approach to engage with children and their families to improve the children's lives.	Professional Standard 6 – Promote ethical practice and report concerns.
Case Closure/ Step Down	Hand the Plan over to the network Close Case/Step Case Down			

## **Practice Guide in ISCAN**

Practice Area and Approach	Tools to help you	Practice Standards	Professional Standards
ISCAN work in a person centred approach.  Before visiting a family, we always consider what we want to achieve from this visit, what we need to know and how we will know we have achieved the goal for the visit.  When we first visit a family, we will always spend time explaining clearly to the family, what our role is, and what can be expected from us. We will always gain consent where needed and use a child focused approach.	SOS leaflet. PECS consent form board marker  Information on the local offer leaflets on parent support groups		Professional Standard 5 – Act safely, respectfully and with professional integrity.
We spend time understanding the young person's beliefs, values, religion, family history and culture and what these mean to them personally.	Genogram and Cultural mapping		Professional Standard 2 – Establish and maintain the trust and confidence in people.
Where possible we will work directly with children to gain the voice of the child. Where this is not possible we will use a variety of different methods including use of communication aid tools such as Picture Exchange Communication System (PECS) for children with limited speech.	Three Houses, Safety House, Wizard and Fairy Best Questions Sheet Child friendly social story		



Practice Area and Approach	Tools to help you	Practice Standards	Professional Standards
We will also use observations of children in different settings, i.e. school and home, paying attention to what they are telling us through their behaviours and interactions.  We observe children's	Child's version of the plan (words and pictures) IPads Picture aids		
interactions with their parents, peers and other significant people in their lives.			
We can use total communication methods including iPads with picture aids to help children communicate.			
We will hold a multi- agency network meeting as part of the assessment process to identify what support is available to the family, either to keep a child/young person safe, enable them to stay at home or enable the family to have some respite from their high-level caring role.	Family Group conference Solution focused questions ISCAN resource panel	Practice Standard 3 – Network, All children will have a SOS Support/ Safety Network which includes all the people that are important to them and who can help them to sort out the worries.	
If there are concerns about a child/young persons safety, we will adhere to the CIN/CP practice guidelines and bottom lines.	Danger statements, safety plans, scaling questions Home visits		



Practice Area and Approach	Tools to help you	Practice Standards	Professional Standards
For all new referrals received by ISCAN we need to understand the child/young persons lived experience and the impact of circumstances on them, we will read the file and create/update a chronology before we meet with the family.  We will triangulate all the information from all professionals involved what people are telling us, children/young people, family support networks, and professionals, in addition to what we are observing in the family life.		Practice Standard 2 – Assessment, All children will have a Signs of Safety Assessment reflecting, What Are We Worried About? What is Working Well? What Needs to Happen? The assessment will include their voice, their parents voice and the voice of all the people who are important to them.	
Every case has a chronology that sets out the significant events and the impact on the child as this may highlight patterns of behaviour.			
When a decision needs to be made on a complex case, case mapping will be considered, including the family.			
We triangulate what professionals say, what parents say and what the child is saying (either verbally or through their behaviours and interactions).	ISCAN panel process CIN, CLA review and EHA review.		



Practice Area and Approach	Tools to help you	Practice Standards	Professional Standards
We consider whether the child is enjoying, achieving and succeeding in line with their potential.	Supervision and management oversight.		
We use assessment and review processes to evidence the needs of the family and make decisions about whether packages should be amended.  We will always consider when making decisions, what is the risk, how can the risk be managed, what support is available and what will be the impact if we do or don't put this support in place.		Standard Practice 8 – Partnership Working, All professionals will use the SOS approach to engage with children and their families to improve the children's lives.	
We use scaling questions to measure progress/ confidence in the support plan.  Appreciative inquiry takes place regularly in team meetings in order to learn from good practice.		Practice Standard 4 – All children will have a SOS Safety/ Success Plan that details how the worries/risks will be managed and reduced and how the child's daily lived experience will change and/or to address the worries and support the child/young person to reach their success goals.	



#### **Bottom Lines**

- We are always clear about the actual support being provided, the outcome we are aiming
  to achieve in providing this support and who will be providing the support. This is recorded
  clearly in the assessment.
- Direct work will be done with every child/young person and recorded clearly as part of the assessment. If this is not possible due to age or the child/young person's disability, observations will be made, analysed and recorded.
- Network meetings will be held with every family and we will use scaling questions to measure the impact of the support plan.
- Every family will have a danger/worry statement with linked safety/wellbeing goals and a plan as to how these goals will be reached.
- Every child should have a version of their plan that they can understand in line with their age and level of understanding. For those children who are more able, a words and pictures version of the plan is developed with the parents and shared with the child.
- Group supervision takes place at a minimum of once per month.

## **Cared For Children Practice Guidance**

Practice Area and Approach	Tools to help you	Practice Standards	Professional Standards
We will visit young people and spend time with them and with people that are important to them.	SOS leaflet for children	Practice Standard 1 - Child's Voice Children are spoken to alone and are worked with by professionals who	Professional Standards 1 – Promote the rights, strengths and wellbeing of
We always speak with young people and their families respectfully.		have the tools to directly engage with them.	people, families and communities.
We spend time with Young People, getting to know them and ensuring that the conversations we have with them help us to understand the things that are going well for them, the worries they have and their goals and aspirations for the future.	Three Houses, Safety House, Wizard and Fairy Best Questions Sheet	Practice Standard 1 – Child's Voice Children are spoken to alone and are worked with by professionals who have the tools to directly engage with them.	Professional Standards 2 – Establish and maintain the trust and confidence of people.
We spend time understanding the young person's beliefs, values, religion, family history and culture and what these mean to them personally.	Genogram Support Circles	Practice Standard 3 -Network, All children will have a SOS Support/ Safety Network which includes all the people that are important to them	
When we tell a young person we will do something, we always ensure we follow through and do so in a timely way.		and who can help them to sort out the worries.	Professional Standards 2 – Establish and maintain the trust and confidence of people.



Practice Area and Approach	Tools to help you	Practice Standards	Professional Standards
When we cannot achieve or are delayed in achieving an action, we explain why this is not possible to a young person.  We ensure that each child has a version of their care plan that they understand and that this is an active, living document that is regularly used and updated.  When there are worries about family time, we talk to everyone involved and resolve it. We will arrange a review meeting if necessary.  When we are planning to return a young person home, family meetings enable the network to develop a safety plan.		Practice Standard 4 –Plan, All children will have a SOS Safety/Success Plan that details how the worries/risks will be managed and reduced and how the child's daily lived experience will change and/ or to address the worries and support the child/young person to reach their success goals.	Professional Standards 5  – Act safely, respectfully and with professional integrity.
When there are worries about Young People who are going missing we will talk to everyone involved and try to work out why it is happening and what we can do to reduce it.	Family Network Meeting  Missing From Home Meeting	Practice Standard 4 –Plan, All children will have a SOS Safety/Success Plan that details how the worries/risks will be managed and reduced and how the child's daily lived experience will change and/ or to address the worries and support the child/young person to reach their success goals.	Professional Standard 6 – Promote ethical practice and report concerns.  Professional Standard 3 – Be accountable for the quality of my practice and the decisions I make.



Practice Area and Approach	Tools to help you	Practice Standards	Professional Standards
Children subject to Care order but living at home subject to PWP: All children living at home with their parents subject to a care order will have a Danger statement, safety/ success goals and a plan. Everyone will understand their role.		Practice Standard 2 – Assessment, All children will have a Signs of Safety Assessment reflecting, What Are We Worried About? What is Working Well? What Needs to Happen? The assessment will include their voice, their parents voice and the voice of all the people who are important to them.	
The plan will be reviewed regularly with the family and everyone involved working towards the safety/success goals and reducing the worries.		Practice Standard 4 – Plan, All children will have a SOS Safety/ Success Plan that details how the worries/risks will be managed and reduced and how the child's	
Everyone in the network gets a copy of the safety/ success plan.  The success plan is reviewed and updated at a minimum of every 6 weeks.		daily lived experience will change and/ or to address the worries and support the child/young person to reach their success goals.	
Bottom lines are kept to a minimum and shared clearly with the network.			



Practice Area and Approach	Tools to help you	Practice Standards	Professional Standards
When making any decision about changes in a child's care arrangements we will use tools like mapping to help us to fully understand their history and current circumstances.  We use a range of information to help us understand what is happening for the child including what they tell us, their behaviour and the views of other people around them.  Care plans and assessments spell out harm, worry statements, complicating factors and the existing strengths and safety.	Group supervision Internal Case mapping	Practice Standard 2 – Assessment, All children will have a Signs of Safety Assessment reflecting, What Are We Worried About? What is Working Well? What Needs to Happen? The assessment will include their voice, their parents voice and the voice of all the people who are important to them.	Professional Standard 3 – Be accountable for the quality of my practice and the decisions I make.
When other professionals are worried we help them to be clear in their language when describing their observations clarifying how serious these worries are.		Practice standard 8 – Partnership Working, All professionals will use the SOS approach to engage with the children and their families to improve the children's lives.	
We spend time preparing our visits to Young People, which should be planned and purposeful with the aim of understanding them and what their life is like.	Direct work Tools Best Questions	Practice Standard 1 – Child's Voice, Children are spoken to alone and are worked with by professionals who have the tools to directly engage with them.	Professional Standard 2 – Establish and maintain the trust and confidence of people.

Practice Area and Approach	Tools to help you	Practice Standards	Professional Standards
We will support young people to identify and achieve their goals and aspirations.			
Scaling questions are used with Young People to explore their perspectives and whether anything has changed.			
For Young People who are cared for long term there is a clear plan for them through adolescence to adulthood.		Practice standard 4 – Plan, All children will have a SOS Safety/Success Plan that details how the worries/risks will be managed and reduced and how the child's daily lived experience will change and/ or to address the worries and support the child/young person to reach their success goals.	

#### **Bottom Lines**

- We always work on the basis that Young People are best living with their families, so long as it is safe for them to do so.
- If we think there is an alternative to children being on a Care Order, we will explore those options for that young person.
- For all Young People open to the Cared for Children Service, they will have a words and pictures explanation. This will explain what the worries have been and what happened.
- If there is a plan for the child to return home then the network will be supported to come up with a plan about how it will work and how the child will be kept safe.
- If a child returns home unplanned then a family network meeting will take place at the earliest opportunity to support the family and their network to develop a safety plan.
- A Safety Plan will always be developed through a family network meeting when there is a
  plan to step down from a Care Order and everyone will know what will happen, when and by
  whom, until point of closure.
- Group supervision takes place in the team to help support staff in using the SOS tools.
- Young People are encouraged to participate with their reviews and planning for their futures.
- SWs and IRO's will ensure that Young People know what their long term plan is and the
  options look like for them in achieving permanency.



## **Leaving Care Practice Guidance**

Practice Area and Approach	Tools to help you	Tameside Practice Standards	Professional Standards
We see the young person on a regular basis and have an open line of communication through text/email and WhatsApp. Contact will increase with assessed level of need.	Direct Work Tools Text/WhatsApp	Practice Standard 1 – Child's Voice, Children are spoken to alone and are worked with by professionals who have the tools to directly engage with them.	Professional Standards 2 – Establish and maintain the trust and confidence of people.
We talk to the young person about their relationships and the people in their lives who are important to them.  We spend time understanding the young person that we are supporting's beliefs, values, religion, family history and culture and what they mean to them personally.  Where a young person's immigration status is unclear, we are pro-active in contacting the Home Office to clarify this.  We support the young person to link into local community groups to help them to develop their networks.	Genogram Network Questions Support Circles	Practice Standard 3 – Network, All children will have a SOS Support/ Safety Network which includes all the people that are important to them and who can help them to sort out the worries.	Professional standard 1 – Promote the rights, strengths, and wellbeing of people, families and communities.



Practice Area and Approach	Tools to help you	Tameside Practice Standards	Professional Standards
We help care leavers support each other by linking them in with their peers, mentors & participation services.  Where there are worries about a young person, advisors work hard to engage the network around them with a network meeting with the young person's consent.  We help the young person to explore and build their natural network.  We will try to link in with			Professional Standard 6 – Promote ethical practice and report concerns.
education, employment and training as well as pastoral support to promote understanding and engagement.			
Pathway planning Meeting: At the pathway planning meeting, we share and refine the draft danger statements and safety goals and invite the young person to scale the situation from 0-10 in relation to each worry statement/safety goal.	Case Mapping	Practice Standard 2 – Assessment, All children will have a Signs of Safety Assessment reflecting, What Are We Worried About? What is Working Well? What Needs to Happen? The assessment will include their voice, their parents voice and the voice of all the people who are important to them.	Professional Standard 3 – Be accountable for the quality of my practice and the decisions I make.



Practice Area and Approach	Tools to help you	Tameside Practice Standards	Professional Standards
Network members are invited to develop a plan that will address each worry.  The personal advisor facilitates the process by asking questions to help test out the safety plan.  The young person will be consulted on sharing the pathway plan and confirm if they are happy for all aspects to be shared.	Genogram Network Questions Support Circles	Practice Standard 3 – Network, All children will have a SOS Support/ Safety Network which includes all the people that are important to them and who can help them to sort out the worries.	
We always ask questions that help us understand the things that are going well  When there are worries about a care leaver, personal advisors map these worries out with the young person/young adult.  When there are worries about a care leaver, a pathway-planning meeting takes place and we incorporate the SOS approach.  When there are worries about a care leaver clear, jargon free danger statements and paired safety goals are created and shared with them	Strengths based question sheet  Case Mapping	Practice Standards 2 – Assessment, All children will have a Signs of Safety Assessment reflecting, What Are We Worried About? What is Working Well? What Needs to Happen? The assessment will include their voice, their parents voice and the voice of all the people who are important to them	Professional Standards 3 – Be accountable for the quality of my practice and the decisions I make.



Practice Area and Approach	Tools to help you	Tameside Practice Standards	Professional Standards
When there are worries about a young person about their safety or wellbeing, we will always consider a referral to adult's services and make a referral if required. We use our danger statements to explain to the young person why we are worried and why we are referring to adult services.			
We help care leavers identify their own goals in the pathway planning process.  We help care leavers develop clear trajectories for achieving their goals.  We use scaling questions to help care leavers assess their progress towards their goals.  We ensure pathway plans are clear and jargon free and are written by/in the words of the young person.  We prepare for our visits so that we are clear about what we want to achieve before we meet the young person and how we will know that we have achieved what we hoped.	Solution Focused questions	Tameside standard 4 – Plan, All children will have a SOS Safety/ Success Plan that details how the worries/ risks will be managed and reduced and how the child's daily lived experience will change and/ or to address the worries and support the child/young person to reach their success goals.	



#### **Our Bottom Lines**

- When there are critical worries about young people in relation to mental health, substance use
  or domestic violence, personal advisors and their managers will always work hard to support
  them and their naturally connected network to attend a pathway planning meeting and
  develop a safety plan within the pathway plan.
- If a care leaver loses their accommodation unexpectedly, personal advisors and their managers will always work hard to get their naturally connected network together to help them to develop a plan.
- When a young person we are working with makes a mistake we are there for them.

## Fostering Practice Guidance

#### (a) Assessment

Practice Area and Approach	Tools to help you	Tameside Practice Standards	Professional Standards
We ensure that fostering assessments are clear, straightforward and jargon free and do not use abbreviations in our work.	Internal Case mapping	Practice Standard 2 – Assessment, All children will have a Signs of Safety Assessment reflecting, What Are We Worried About? What is Working Well? What Needs to Happen? The assessment will include their voice, their parents voice and the voice of all the people who are important to them.	
We explore the potential carer's support network.	Genogram Network Questions Support Circles	Practice Standard 3 – Network, All children will have a SOS Support/ Safety Network which includes all the people that are important to them and who can help them to sort out the worries.	Professional Standard 1 – Promote rights, strengths and wellbeing of people, families and communities.
When we have worries about a potential foster carer we are honest about these from the start so that people have the opportunity to make			Professional standard 2 – Establish and maintain trust and confidence of people.
changes.			Professional Standard 6 – Promote ethical practice and report concerns.



Practice Area and Approach	Tools to help you	Tameside Practice Standards	Professional Standards
We explore how family members have parented their own children.  We always conduct observations of the carers with the child as part of an assessment.  We always obtain references for potential foster carers.  We observe potential mainstream carers interactions with one another within the training group work in order to inform their assessment.			Professional Standards 3 – be accountable for the quality of my practice and the decisions I make.
We carefully prepare questions before we meet with potential carers we are assessing.  We explore the strengths of potential carers within their assessment.  We explore how potential carers have used strengths and resources to get through different/difficult situations.  There is a clear trajectory from first visit to Fostering Panel and carers know about this. In the Skills to Fostering Training, we regularly check in with the group about any worries and seek feedback at the end.	Ears Questions Sheet  Strengths Based Questions Sheet  Trajectory	Tameside Standard 2 – Assessment, All children will have a Signs of Safety Assessment reflecting, What Are We Worried About? What is Working Well? What Needs to Happen? The assessment will include their voice, their parents voice and the voice of all the people who are important to them.	Professional Standard 3 – Be accountable for the quality of my practice and the decisions I make.



## (b) Family Intervention Worker's Roles and Responsibilities - Regulation 24

Practice Area and Approach	Tools to help you	Tameside Practice Standards	Professional Standards
We ensure that the connected carers receive the support they need.  We ensure we stay in regular contact with the social worker.		Practice Standard 8 – Partnership Working, All professionals will use the SOS approach to engage with children and their families to improve the children's lives.	
The Support which the FIW will offer the carer: We ensure that carers understand the fostering task. We ensure carers complete logbooks and support them with this.			Professional Standard 6 – Promote ethical practice and report concerns.
We provide carers with emotional and practical support.			
We support carers to understand their role and risks around family time and how to maintain relationship with family members where there is a risk to the child.			
We support carers in gaining support from a foster carer 'buddy'.			
We ensure that carers have all the information to enable them to attend training, complete training, support development standards, induction and support groups.			
We provide additional support when specific vulnerabilities arise.			



## (c) Fostering Support and Supervision Team

Practice Area and Approach	Tools to help you	Tameside Practice Standards	Professional Standards
We provide a welcome book to the child's social worker to give to the child. This provides information, mainly in picture form about the carers and their home.			Professional Standard 3 – Be accountable for the quality of my practice and the decisions I make.
In all planned moves, we will speak to the child's social worker and foster carer to arrange a visit to the placement & carers meet.			таке.
We visit carers on a minimum of monthly basis with increased frequency visits where further support is required.			
We visit carers unannounced at least once per year.			
Both carers are seen on at least a quarterly basis.			
We observe/interact with the child on at least quarterly visits.			
Whenever difficulties arise, that might impact on stability, a placement stability meeting is arranged as soon as possible to ensure that these difficulties don't escalate.			
Foster carers birth children are appreciated through 'Sons & Daughters group' to talk about fostering and how it affects them.			



## (c) Fostering Support and Supervision Team

Practice Area and Approach	Tools to help you	Tameside Practice Standards	Professional Standards
Within placement stability meetings, information is mapped using SOS model with carers, the child and birth family where possible.  Once a child is placed in the new placement, a safe care plan is developed by the SSW and the foster carer to minimise any risks to the child and household members.  The safer caring policy is updated to reflect this where appropriate.  Group supervision takes place at a minimum bi-monthly in the team.	Internal Case Mapping	Practice Standard 8 – Partnership Working, All professionals will use SOS approach to engage with children and their families to improve the children's lives.	Professional Standard 3 – Be accountable for the quality of my practice and the decisions I make.
Visits are planned and have a clear purpose.  We use scaling questions when we visit foster carers to scale placement stability or specific issues.  We ask focused questions to assess what is working well and what we are worried about.  All placement stability meetings will have clear worry statements and success goals worded in such a way that children and their carers can understand.		Practice Standard 8 -Partnership Working, All Professionals will use the SOS approach to engage with children and their families to improve the children's lives.	Professional Standard 3 – Be accountable for the quality of my practice and the decisions I make.



### **Our Bottom Lines**

- All placement/disruption meetings use the SOS framework.
- Supervisory visits to foster carers using a scaling question to scale the stability of the placement and explore the reasons for the scaling score given and what needs to happen to move up the scale. These visits explore what is working well and what we are worried about.
- Words and pictures work is used to explain transitions or disruptions.
- Group supervision takes place a minimum bi-monthly with workers.

## (d) Family Intervention Worker's Roles and Responsibilities - Foster Carers

Practice Area and Approach	Tools to help you	Tameside Standards	Professional Standards
We ensure we read the file and understand the household, including reading previous assessments.  We will understand the words and pictures work so that we have a clear understanding of the explanations given to children about the adults they have lived with.  We will speak to the social worker for the child to seek and to understand the things they feel are going well, the things they are worried about and the things they want to be different.	Internal Case Mapping	Practice Standard 2 – Assessment, All children will have a Signs of Safety Assessment reflecting, What Are We Worried About? What is Working Well? What Needs to Happen? The assessment will include their voice, their parents voice and the voice of all the people who are important to them.	Professional Standard 3 – Be accountable for the quality of my practice and the decisions I make.
We will work closely with the whole network around the child and their family's beliefs, values, religion, family history and culture and what these mean to each of them personally.  We use SOS case mapping with families and foster carers as basis for intervention.	Genogram Network Questions Support Circles	Tameside Standard 3 - network All children will have a SOS Support/Safety Network which includes all the people that are important to them and who can help them to sort out the worries.	Professional Standards 1 – Promote the rights, strengths and wellbeing of people, families and communities.
We work with the social worker, the foster family and professionals to develop a trajectory so everyone knows what will happen and when.	Trajectory		

Practice Area and Approach	Tools to	Tameside	Professional
	help you	Standards	Standards
We continue to work with the whole network and review the plan through regular network meetings.  Scaling questions are used in all meetings to check our progress towards the safety/success goals.  All safety or success plans should be developed with the foster family and the network. All plans should define what the network will do on a day to day basis to keep the children safe/ and or to meet their potential as well as what professionals will do.  We will help to develop words and pictures explanations of why we are involved and what the safety/success plan is, and these are shared with the child or young person and the wider family/network.	Journal Closed Whatsapp group Direct work tools	Practice Standard 4 – Plan, All children will have a SOS Safety/ Success Plan that details how the worries/ risks will be managed and reduced and how the child's daily lived experience will change and/ or to address the worries and support the child/young person to reach their success goals.	Professional Standard 3 – Be accountable for the quality of my practice and the decisions I make.

### **Our Bottom Lines**

- We spend time preparing our visits and are clear about what we want to achieve.
- We have a clear trajectory of the direct work we are completing with the foster family.
- We use scaling questions with children to monitor change and to explore their perspectives.

## (e) SGO Support Team

Practice Area and Approach	Tools to help you	Tameside Standards	Professional Standards
Assessments are clear, straightforward, abbreviation and jargon free.  We explore the carers/special guardians support network.  When we have worries about a carer/ Special Guardian(s) we are honest about these from the start so that people have the opportunity to make changes.	Internal Case Mapping Genogram Network Questions Support Circles	Practice Standard 2 – Assessment, All children will have a Signs of Safety Assessment reflecting, What Are We Worried About? What is Working Well? What Needs to Happen? The assessment will include their voice, their parents voice and the voice of all the people who are important to them.	Professional Standard 3 – Be accountable for the quality of my practice and the decisions I make  Professional Standard 2 – Establish and maintain the trust and confidence of people.
We always conduct observations of the carers with the child as part of an assessment.  We obtain references for carers/Special Guardians.		Practice Standard 2 – Assessment, All children will have a Signs of Safety Assessment reflecting, What Are We Worried About? What is Working Well? What Needs to Happen? The assessment will include their voice, their parents voice and the voice of all the people who are important to them.	Professional standards 6 – Promote ethical practice and report concerns



Practice Area and Approach	Tools to help you	Tameside Standards	Professional Standards
We carefully prepare questions before we meet with Carers/ Special Guardians we are assessing.	Ears		
We explore the strengths of carers/Special Guardians within their assessment.  We ask focused questions to assess what is working well and what we are worried about.	Strengths Based Questions sheet		Professional Standards 1 -Promote the rights, strengths and wellbeing of people, families and
We explore how carers/Special Guardians have used strengths and resources to get through different/difficult situations.			communities.
There is a clear trajectory from first visit to securing Special Guardianship Orders or dischargeof Care Orders and carers know about this.			
Special Guardian support plans are developed using the principles of safety planning.			
Group supervision takes place bi-monthly.			

## **Child Protection Conference Practice Guidance**

Practice Area and Approach	Tameside Practice Standards	Professional Standards
We will allocate a conference chair and clerk and a date and time for initial conference will be set within 24 hours. We will notify social work team of this via case note.	Practice Standard 7 – Management Oversight, Every child is supported by timely Management Oversight of the Professionals that are working with them.	Professional Standards 3 – Be accountable for the quality of my practice and the decisions I make.
The social worker will notify the parents/carers of the Initial Child Protection Case Conference, what it is, why it is happening and what will happen when the Conference takes place.	Practice Standard 8 – Partnership Working, All Professionals will use the SOS approach to engage with children and their families to improve the children's lives.	Professional Standard 2  – Establish and maintain the trust and confidence in people.
A Child in Need meeting will take place before Conference to confirm danger statements, safety goals and initial outline plan with the multi-agency meeting which will be tested and ratified at the Conference. The social worker will explain to the child and family what a Child Protection Conference is, why it is happening and what will happen in the meeting.	Practice Standard 8 – Parnetship Working, All Professionals will use the SOS approach to engage with children and their families to improve the children's lives.	Professional Standard 2  – Establish and maintain the trust and confidence in people.
We will receive reports from the involved professionals 48 hours prior to Conference to enable the chair to consider the reports and all relevant information ahead of the Conference.	Practice Standard 7 – Management Oversight, Every child is supported by timely Management Oversight of the Professionals that are working with them.	Professional Standards 3 – Be accountable for the quality of my practice and the decisions I make.

Practice Area and Approach	Tameside Practice Standards	Professional Standards
We will send invitations to all partners for Conference within 48 hours of allocation.		
We will offer all children, over the age of 10 years, an advocate from Barnardos who can attend a conference with them or represent them with their views or make a complaint on their behalf.	Practice Standard 8 – Partnership working, All Professionals will use the SOS approach to engage with children and their families to improve the children's lives.	Professional Standard 1 – promote the rights, strengths and wellbeing of people, families and communities.
We will aim to ensure that the conference chair remains allocated for the duration that the child is subject to a Child Protection Plan, and should continue as the conference chair to promote consistency for the family.		
If the child attends Conference, the chair will meet with them before the Conference to gain an understanding of their wishes and feelings as well as life experiences.	Practice Standard 1 – Child's Voice, Children are spoken to alone and are worked with by professionals who have the tools to directly engage with them.	Professional Standard 2  – Establish and maintain the trust and confidence of people.
We will share reports with the family before Conference giving them time to read them and understand that will be discussed.	Practice Standard 8 – Partnership Working, All professionals will use the SOS approach to engage with children and their families to improve the children's lives.	Professional Standard  1 – Promote the rights, strengths and wellbeing of people, families and communities.



## Our Bottom lines conference allocation and preparation

- · Child Protection chairs will be using scaling questions to understand everyone's views.
- The Child Protection report will indicate clearly what was agreed at the Conference.
- The safety plan will be agreed and reviewed at every Conference demonstrating how children are being kept safe.

## **Conference Process**

Practice Area and Approach	Tameside Practice Standards	Professional Standards
We will support families to be able to attend conferences.	Practice Standard 8 – Partnership Working, All professionals will use the SOS approach to engage	Professional Standard 2 – Establish and maintain the trust and
We will ensure that all fathers/ male carers/partners have been considered and are engaged with the assessment and Conference process in an appropriate way.	with children and their families to improve the children's lives.	confidence of people.
We will ensure that a safe, accessible, confidential setting is provided for the Conference to take place where information will be shared in a multi-agency setting.		
We will give families time before the Conference to speak to the chair to voice any concerns, confirm that they have received the professionals' reports and be given information on how the Conference will be conducted.	Practice Standard 2 –Assessment, all children will have a Signs of Safety Assessment reflecting, What Are We Worried About? What is Working Well? What Needs to Happen? The assessment will include their voice, their parents voice and the voice of all the people who are important to them.	Professional Standard 2 – Establish and maintain the trust and confidence of people.
We will always speak respectfully with family members throughout the Conference and provide an interpreter where required.	Practice Standard 8 – Partnership Working All Professionals will use the SOS approach to engage with children and their families to improve the children's lives.	Professional Standard 2 – Establish and maintain the trust and confidence of people.
We will ensure that the child's voice and lived experience is shared during Conference either through the child attending, an advocate or their direct work share by the social worker.	Practice Standard 1 – Child's Voice, Children are spoken to alone and are worked with by professionals who have the tools to directly engage with them.	Professional Standard 3 – Be accountable for the quality of my practice and the decisions I make.

Practice Area and Approach	Tameside Practice Standards	Professional Standards
Parents are invited to show their understanding of Professional worries. Where the family do not agree there is a worry/risk the CP chair will skilfully use their		Professional Standard 5 – Act Safely, respectfully and with professional integrity.
authority to ask professionals to explain to family members what the worry/risk is and what the impact of this is for the child.		Professional Standard 2 – Establish and maintain the trust and confidence of people.
We will ensure that during the Conference we will take time to explore the family support network and how they can be a part of safety planning and reaching safety goals.	Practice Standard 3 – Network, All children will have a SOS Support/Safety Network which includes all the people that are important to them and who can help them to sort out the worries.	
We will use scaling questions to understand the views of families and professionals.	wornes.	
The Conference will test and confirm the initial safety plan contained within the social work assessment and also identify any additional actions based on the information shared at Conference. This will be a multi-agency action plan for all professionals, family members and support network to keep the child safe.	Practice Standard 4 – Plan, All children will have a SOS Safety/ Success Plan that details how the worries/risks will be managed and reduced and how the child's daily lived experience will change and/or to address the worries and support the child/young person to reach their success goals.	
All safety planning actions and decisions will have a timescale attached that meets the child's needs and will be agreed and reviewed at the Core Group Meetings. The decisions will be specific, measurable, achievable, regular, and timely (SMART).		



Practice Area and Approach	Tameside Practice Standards	Professional Standards
Next steps always involve the social worker working with the family to develop a words and pictures version of the safety plan for the child if this has not been completed already.		
We will advise parents and professionals about Tameside's complaints procedures.		
We will provide parents and professionals with a copy of minutes within 15 days of the Conference taking place and record this on the child's file.		Professional Standard 5 – Act Safely, respectfully and with professional integrity.
We will set a date and time for the next Conference and the first Core Group at the end of the Conference.		
Where parents did not attend Conference we will make contact post Conference to gain their views and inform them of the outcome of Conference.		
Where professionals are not able to attend the CP chair will review and share the report they have provided for conference.		

### **Bottom lines of conference process**

- · Conference chairs will use scaling questions to understand everyone's views.
- The chairs report will evidence what was agreed at the Conference using the Signs of Safety framework.
- A safety plan will be agreed and this will be reviewed at every Conference to aid understanding of how children are being kept safe.



## Ongoing role of CP chair following initial conference

Practice Area and Approach	Tameside Practice Standards	
We will ensure that the CP marker is placed on the child's record no later than 24 hours following the Conference.	Practice Standard 7 – Management Oversight, Every child is supported by timely Management Oversight of the Professionals	
We will complete the initial outline CP Plan within 48 hours of Conference.	that are working with them.	
We will review after 6 weeks and at the 3-month mark between Conferences focusing on the impact on the child and monitoring any drift or delay.		
We will be available to professionals, parents and children for advice and guidance around the Child Protection Plan.	Practice Standard 8 – Partnership Working All Professionals will use the SOS approach to engage with children and their families to improve the children's lives.	
The review following ICPC will be held within 3 months, subsequent conferences within 6 months or sooner should the Conference chair deem it necessary.	improve the children's lives.	
We will use a questioning approach to assess the impact on the child of worries outlined in the danger statement and the safety plan to reduce those worries to ensure that the assessment is proportionate and accurate in determining the risks and keeping the child safe.	Practice Standard 1 – Child's Voice Children are spoken to alone and are worked with by professionals who have the tools to directly engage with them.	
We will ensure that any new partners/changes to the household are considered and included within the Child Protection Plan.		
The CP chair will respectfully challenge where parents or professionals are unable to evidence clearly their worries and focus is not clear on the impact on the child.		

## **IRO Practice Guidance**

Practice Area and Approach	Tameside Practice Standards	Professional Standards
We will ensure that the child is at the centre of all that we do.		
We will encourage children to attend their own review and try to meet with them before the review takes place and talk to them about their care plan and seek their views/wishes and feelings about the plans in place for them.		Professional Standard 2 – Establish and maintain the trust and confidence of people.
Social workers will ask the child about their review, who they would like to attend their review and go through their care plan with them.	Practice Standard 1 – Child's Voice, Children are spoken to alone and are worked with by professionals who have the tools to directly engage with them.	
In the review we will explore how well everyone is working together to meet safety and success goals. We will use scaling questions to help us do this and review progress.	Practice Standard 8 – Partnership Working All Professionals will use the SOS approach to engage with children and their families to improve the children's lives.	
We will speak to any family member/s that the child has family time with or is part of their network for input into the review, if they are unable to attend.	Practice Standard 3 – Network, All children will have a SOS Support/Safety Network which includes all the people that are important to them and who can help them to sort out the worries.	Professional Standard 5  – Act Safely, respectfully and with professional integrity.
We will review any therapeutic input which the child/young person is receiving, its effectiveness and how it integrates with the care plan. We will ensure that a full account is taken in the review of any updates on allegations or safeguarding issues raised during the review period.	no.p them to cort out the wolfled.	Professional Standards 3 – Be
We will carefully consider changes to the child's care plan in line with the shared information at these meetings.		accountable for the quality of my practice and the decisions I make.



### **Our Bottom Lines**

- Apart from the 5 days prior to allocation the child will have an IRO allocated at all times whilst cared for.
- The review is the child's meeting and hearing their voice is central to the review.
- The child's voice must be evident in all reviews and the review written in a way that they can understand.
- · Concerns raised in the review should be addressed to improve outcomes for the child.
- Any significant incidents that arise should be followed up as part of quality assurance.
- Recommendations from the review will be sent out and any actions tracked by the IRO.

# **9. Resources and Examples**

## a)Trajectory example

Date / Timeline	Steps / Tasks	Tools/ Meetings/ Monitoring
Weeks 1 - 4	Develop (with L, Mum, L2, Grandma and other professionals) Danger Statements, Safety Goals & Safety Scaling questions and share with everyone.	Danger Statements, Safety Goals, Safety Scales. Home visit(s) to see L, Mum Grandma
	Begin conversations about support/safety network.	Genogram, Safety Circles Home visit(s)
	Develop questions for existing strengths and existing safety and involve family / existing network people in asking them.	
	Develop Safety Bottom Lines.	Professionals meeting
	Develop draft trajectory / timeline and share with professionals to get their 'buy-in'.	Home visit(s)
	Meet with family to share the bottom lines and trajectory and get their 'buy-in'.	My 3 Houses; Wizard & Fairy; other
	Direct work with younger 2 girls to find out what they like, don't like and would like.	
Weeks 4 – 8	Begin work with Mum, L and G on the explanation of the worries for the girls.	Words & Pictures
	Introduce collaborative monitoring processes.	Safety Journal
	Continue network development work with all family members, including children.	Flow diagram; identifying functional strengths; past/present/future questions

Date / Timeline	Steps / Tasks	Tools/ Meetings/ Monitoring
Weeks 4 – 8	Establish informed safety network and begin fortnightly network meetings to develop the safety plan. Focus on  • What does it look like when things are going well?  • First small signs of trouble  • Triggers and stressors  • Red flags  • Preventative 'rules'  • Calendaring & 'Dosing'  • Protective / responsive 'rules'	Network meetings
	Review progress and success of the plan using safety scales, Safety Journal. Begin rehearsals / 'fire drills'.  Give the explanation of the worries to the girls, if possible with the network present.	Words and Pictures
Weeks 8 - 12	Continue work with safety network to finalise the Safety Plan. Network meetings always begin with one network member reading out the Danger Statements and Safety Goals. Safety / Success continues to be reviewed at every meetings using Safety Scales and Safety Journal.  Identify who will be the 'boss' of the safety plan.	Network Meetings Safety Scales Safety Journal
	Identify 'go to' people in the network for each child.  Develop children's version of the Safety Plan.	Words & Pictures Safety Objects
	Consider introducing mechanisms for children to signal worry.	
Weeks 12 - 20	Monitoring including transfer of monitoring functions to network.	Visits, Network meetings
Week 20	Close Case.	



## b) Safety Planning Road Map

SAFETY PLANNING ROADMAP			
WHAT	HOW (STEPS)		TOOLS (METHOD)
DANGER STATEMENTS	1. Perparations with Professionals.	Ongoing	
What Children's Services is worried will happen to the child if nothing chnages (the problem that has to be solved).	Develop Paired Danger Statements and Safety Goals with Matched Safety Scales.     Simple language, understandable to family.	Processes	Harm Matrix Signs of Safety Mapping My Three Houses or equivalent
Safety planning	3. Identify everything constructive in direct parenting.	Ruthorti;	
always involves engaging the family and their support	4. Develop Professional bottom-line requirements.		
network in a focused action learning process enabling them to decide	5. Develop Professional trajectory including timeline.	A OUD WHITE	Signs of Safety Trajectory & Timeline Safety Journal
on, practice and refine the actions that	6. Build vision of process for family.	inol	
will create lasting safety.	7. Build informed network with family.	Sin.	Family Safety Circles, Network-finding Matrix
This is the how of safety	8. Create explanation for children (and everyone else).	Vision	Words and Pictures
planning; the trajectory that creates the final safety plan.	9. Build Safety Plan with parents and network. Successive process where family demonstrates over time they can make children safe, regular review - honouring success and utilising struggles. All participants should rate safety at each meeting using the safety scales Needing to dig into critical issues - dynamics, triggers and stressful times that make abuse/neglect more likely. The family must either come up with or fully own all rules. 'Denial' issues must be dealt with throughout.	Questioning Compassion	Regular Review Meetings Family and network must be given the opportunity to fail so they can demonstrate success, usually through an increasing process of contact. Professionals must be mindful of the risk and manage this together with the family.
SAFETY GOALS	10. Involve Child.	2551	Safety Journal, Safety Object Practice Rehearsals of Rules
What Children's Services needs to see to know the child is safe	11. Monitoring by Professionals and network.	on on	
and they can close the case (not services).	12. Create final child-centred Safety Plan.		Child-focused Safety Plan



### c) Example Best Questions Sheet

First Column: What are we worried about?

Purpose of Harm questions:

- to clarify what has happened
- the frequency/severity
- the impact on the child

#### Harm

What has happened, what have you seen to make you worried?

How often have the children seen you fighting and shouting?

What was the most serious incident that the children have seen or heard?

What do they say when you have been fighting and shouting? What have the children said about the violence?

What would the children say is the worst thing for them?

What have we seen which makes us worried?

When you think of this problem what do you think is the worst thing that could happen because of this problem?

What has happened in the past which has led to the worries now?

What is the worst behaviour...has displayed in the community/at home?

What is the worst thing which has happened to the children when ... is around?

What is the worst thing which has happened to the children in the care of their mother/father so far?

What impact has mum/dads behaviour had on the children so far?

What would the children say have been their most frightening times?

When have the children seen the violence/what have they seen?

What do we know about.. .which makes everyone think he/she is a risk to the children?

What do we know about the people ... is involved with which makes professionals believe the children could end up getting seriously hurt?

Do the children know what has happened? What have they seen or heard? Were they involved?

What would the children say ...does which frightens them?

What harm has happened so far due to ...

What are your biggest worries for the children living at home with mum/dad?

What else do you know about mum/dad which makes you worried about their parenting?

What do we know so far which has made the children scared or worried?



#### Middle Column: What's working well

Purpose of the middle column strengths/safety questions is:

- to find out what people are already doing to reduce the risk rather than impose our own plan
- to start to build the safety plan
- to help the family/carers start to think through their situation
- to help family/carers mobilise their own network
- to give the family/carers/child/young person hope

#### **Existing Strengths Questions**

What would the parents say is going well for the children?

What would mum/dad say is the best thing about the child?

What would the children say they like about (the perpetrator)...?

What would the school say the children are good at?

Is there anything grandparents do which is helpful?

What does a good day look like?

What was the last memory you have of a happy time?

What was working well in the past which led to the case closing?

What activities does the child enjoy?

If the child/young person was in the room what would he/she say they like about their new placement?

What is it he/she specifically likes about that worker? What does... do that makes ..like him?

If.. were in the room what would he/she say ...does best?

Who would ..talk to when he/she is feeling sad?

Who does he go to when .. is making him feel sad?

What does ...do to make the child/young person move from sad to happy/feel better? What does she do to make him feel better?

Has the child/young person ever kept himself safe from his girlfriend or the older males or anyone who is a threat to him in the past?

How has the child/young person stopped himself getting seriously hurt by ..?

Is there anything which .. does which professionals think is positive for the child/young person?

When has Mum/Dad really supported and helped you? When have they believed you when you thought they might not?

The two of you get on loads better than you used to. How come?

What are the best ways that you Mum/Dad/Carer/grandma/friend are able to get on together?

How have you managed without loads of expensive stuff?

What do other people do which helps and supports the child/young person?

Grandma/Mum/carers/dad – who helps and supports you most in your care of the child/young person?



What do you think the child/young person's biggest strengths are? What do you like best about them?

What are your gifts?

What values/beliefs – things like loyalty, honesty, family, sticking together, showing your love - do you want your children/grandchildren to grow up with?

What would the child/young person say folk in her/his life are doing which makes her feel safe?

#### **Network**

Out of all of mum's family and friends who does she ask to look after the children as she trusts them to keep them safe?

Who helped you the most in the past when you stopped the children being removed by the police? What was the most helpful thing they did?

Who steps in to protect the children when things get stressed or tough at home?

What is it that grandma does which makes that relationship positive?

Who are the people who would notice most if things were getting better? Who would be the first person to notice that the plan is working?

What would the child/young person's sister/brother say they are good at?

What did friends or parents do that helped the child/young person – what did the relationship look like?

What does it look like when the child/young person are having a good day? If they were here what would they say are the best things about living/being with ...?

What does the child/young person like doing?

If carer/parent/friend was in the room what would they say they like about the child/young person?

Who does the child/young person feel is important to them?

What are the child/young person's aspirations for the future? What are they/everyone else doing to achieve this?

When the child/young person has contact with their family – what was good about that?

When they were living at home – what was good about that?

What did the child/young person like about their parent/ step parent/carer?

Has the child/young person had a previous relationship which was positive?

What does the child/young person feel he/she is good at?

Miracle question – in 12 months' time if things were exactly as you wanted it to be what would it look like?

What is it that the child/young person does well for him/herself when he/she is living independently?

If the child/young person was here what would he/she say they are good at for looking after him/herself?



What does love look like for the child/young person?

If you need a ride or a car, who would you ask?

If you need to borrow money, who would you ask?

If you needed someone to watch the kids/help you, who would you ask?

If you needed food or clothing, who would you call?

If you needed someone to listen to, who would you call?

Who would you call in an emergency/ with the kids?

Who would you go to for a shoulder to cry on?

Who do you share good news with?

If you needed a second opinion about anything/parenting who would you call?

Whose opinion do you value?

Who has given you good advice?

If you needed information about something at school, or anything else, who would you call?

Where can you find out about things/kids activities?

Who can tell you where to go for financial help?

#### **Existing Safety Questions**

Has there been a time when mum/dad has turned ....away?

Has there been a time where mum/dad have stopped the children from witnessing or hearing violent and threatening adult behaviour?

Tell me when/how many times mum/dad have protected the children when it has kicked off?

Tell me about a time mum/dad have stopped the children seeing violent /threatening behaviour?

Give me an example of a time when ... turned up at the house and mum turned him/her away because they didn't want the children scared or worried?

Tell me about a time the children felt scared at home and mum/dad helped them feel safe?

Tell me about a time where .. (the perpetrator) has stopped things kicking off at home?

What would the children say .. (the perpetrator/parents) has/have done to stop things kicking off?

Who steps in to protect the children when things get stressed or tough at home?

Has there been a time where they have managed her feelings/emotion before?

Has there ever been a time where you have been able to reduce this (behaviour), did something and it worked?

Tell me about a time when you wanted to go off to/with (somewhere/one risky/dangerous) but you didn't. How did you stop yourself? What did anyone else to do to help? What was different that time?

Tell me about times when the voices in your head were making you feel like killing yourself but you didn't try to. How did that happen? What did you do which helped? What did anyone else do? What would a fly on the wall have seen happen?



What are the most important things anyone has done to help the child/young person not go off to .. (somewhere dangerous)?

How have you managed to get those other people/older males to stop texting and calling you to go out?

What are the most important changes you have made?

When have you done something to keep the child/young person safe when things were really dangerous?

When you called the police about the .... what helped you to do that?

What would the child/young person say are the most important things the adults around her/him have done to keep her safe?

Thinking about the time you overdosed and then called your Mum/Dad/Carer/friend, what helped you to do that?

There must have been loads of times when you thought about overdosing but you didn't. What did you do or think about to help you not to, to feel a tiny bit better?

## d) Safety Plan Example

This is a safety plan to show everyone that Jack and Henry will be safe at home with mummy.





Rule 1: The most important rule is that mummy will have a list of things to do each day to make sure Henry and Jack are clean, have clean clothes, clean beds, a clean home to play in and get to school on time



Rule 3: Nan Liz, Gramps Rob or aunt Emma will come for tea once a week to help mummy with reading her letters and put any important things in the calendar, like the times Henry needs to see the doctor. Nan Liz, gramps Rob or aunt Emma will write in their calendar too so they can go with mummy.



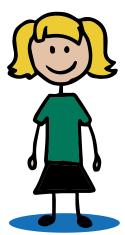




Rule 2: Mummy will speak to Nan Liz and Gramps Rob or Aunt Emma after tea every day to tell them what she has done from the list.



Rule 4: Jack, Henry and mummy will have lunch at nanny Liz and Gramps Rob's house every Sunday so that they can hear all the good things, that happened at home and school and write the list of things mummy has to do.



This is a safety plan to show everyone that Jack and Henry will be safe at home with mummy.





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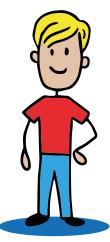




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#### e) SOS Leaflet

We would love to hear what you think about Signs of Safety.

> Telephone 07812107783 or email catherine.davis@ tameside.gov.uk



#### **EXPLANATIONS**

#### cotety or Support Network

People who are important to you and can help sort out problems.

#### Strengths Based Approach:

Noticing the good things.

#### caling

Showing as a number how you feel.

#### Words and Pictures:

Explaining the worries to you.

#### Louis

What you and your support people are going to do.



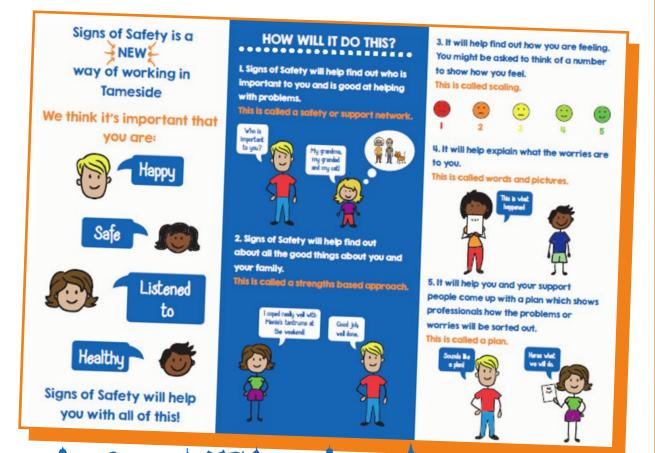


# What is Signs of Safety?



by the Children in Care Council





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