

Children in Care

Care Planning and Decision Making Guidance

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1. Introduction

- 1.1 This guidance should be used by staff and managers within Children and Families and other business units concerned with the effective support and management oversight of children, young people and families where consideration is being given to, or the decision has been made by the local authority to care for a child/young person. Discussions around long term care for a child or young person must be considered at the earliest opportunity.
- 1.2 This document has been updated to reflect the changes in policy as well as the changes in the decision making processes for children in care. It reflects the commitment to ensure early long term planning for children who cannot remain at home or where re-unification is being considered and how that can be achieved safely with appropriate service provision.
- 1.3 This guidance should be read in conjunction with [Placements Commissioning and Sufficiency Strategy](#)

2. Planning and decision making for children in care

- 2.1 The guidance covers the following:
 - Team around the child – whose primary function is to formulate an appropriate multi-agency plan or to review plans which may not be working and where the child/young person is assessed as potentially needing to be accommodated;
 - [Children's decision meeting](#) – where the plan for the child is potentially to accommodate the child/young person, to initiate public law out-line (PLO) or care proceedings; and where consideration needs to be given as to whether a range of assessments are required in order to meet the child/young person's needs or determine the future direction of the plan;
 - Care plan – plan for the child/young person;
 - [Placement plan](#) – the day to day arrangements for the care of the child/young person, the delegation of authority to foster carers and how these meet the requirements of the care plan;
 - [Through care panel](#) – for monitoring the progression of the full range of long term planning and arrangements.
- 2.2 This process of assessment, planning, intervention and review is represented within [Care Planning Regulations April 2015](#). The regulations outline the arrangements for children and young people in care and the concept of long term fostering by definition and review:
 - [Care Planning, Placement and Case Review implemented in April 2011](#)
 - [The Care Planning, Placement and Case Review and Fostering Services \(Miscellaneous Amendments\) Regulations 2013.](#)

3. Context

- 3.1 In line with Warwickshire County Council's (WCC) corporate plan, children and young people should be cared for within their own families. Where this is not possible long term and secure alternatives should be found. As corporate parents WCC aim to ensure that children and young people are secure and supported to do well, that they are encouraged to have full and fulfilled lives which raises their self-esteem and confidence. To achieve this they are afforded stability at the earliest possible opportunity wherever possible within their family network. This is achieved through timely and outcome focussed intervention and support based upon assessed needs, clear plans and best practice. It is the intention of WCC to provide community based alternatives and to fully deploy early intervention and parenting support services which helps more children and families, so reducing the need for children and young people to enter care.
- 3.2 This guidance primarily focuses upon assessment, planning, intervention and the review processes for children in care, and the arrangements for children and young people leaving the care of the local authority. It should be read in conjunction with the procedures and guidance detailed in section 14 of this document.
- 3.3 Central to WCC's approach is the idea that children and young people are brought up within their own families. The implementation of decision making panels will seek to ensure that children will receive an appropriate service as an alternative to being cared for by the authority, reduce the period of time in care and ensure long term arrangements are in place at the earliest opportunity.
- 3.4 WCC will ensure consistency across the county so that every child with the same needs has the right to be offered the same response and standards of service.
- 3.5 As 'corporate parent' this guidance sets out that at every stage there is a multi-agency approach to the identification of need and response. It also offers the opportunity to bring together a number of differing plans into one care plan designed to meet the needs.
- 3.6 The expertise of senior staff and managers, together with colleagues in other agencies, will support front-line staff. Good social work flows from good assessment, analysis judgement and timely intervention. Value is added where multi-agency expertise is used to make sure that blocks and problems with decision making and planning are resolved when they occur.
- 3.7 Services should be informed by research and be robustly evidenced based. At each stage systems should be focussed on outcomes rather than process, and should not be professionally bureaucratic.

3.8 There are three stages to support the children in care process which are particularly important:

- The development of a plan to support the child/young person within their family or extended family network;
- If this is not feasible, the decision to look after a child and determine the needs, how they will be met and timescales for doing so;
- Long term options, including rehabilitation and what needs to happen for long term arrangements to be achieved.

4. Care planning – team around the child

4.1 This meeting is chaired by the operations manager or team manager and convened as the need arises or within 5 working days of the request from family or social worker, whichever is the soonest. In all but exceptional cases of emergency, previous interagency work is expected to have taken place including the completion of a [single assessment](#) and the input of [early help services](#) delivered by locality teams. This meeting may also consider where the child protection plan is not working and where the potential for a child to be cared for by the local authority is likely. In exceptional circumstances, a service manager may give agreement to legal advice being sought or action outside of this process.

4.2 All meetings should be multi-agency and should include:

- Parent(s) and where appropriate the child or young person;
- School/college;
- Early help;
- Targeted youth services;
- Family Group Conference;
- Where involved Children and Adolescent Mental Health Services (CAMHS);
- Children with Disabilities Team (CwDT) where there are complex needs to be considered.

4.3 If the child/young person is not present then their views should be established prior to the meeting and be recorded within the meeting and taken fully into account. There should be an informed understanding of the range of possible interventions, and which is most suitable to the needs of the individual child/young person. Each agency present should be able to commit resources within the meeting. The focus of the decision making *'is what more can be done to ensure that the family situation is strengthened so that the child/young person can remain at home'*. A SMART child in need plan will be developed to ensure that the child/young person is supported within their family [Strengthening Families Practice Guidance](#). If a child's plan is formulated it will

be important that all agencies prioritise and commit to the agreed tasks in order to avoid the family reaching crisis point again.

- 4.4 Where relationships have broken down with immediate family, the family should be encouraged to identify other family members or 'connected people' with whom young people may be supported to live with. This may be through [Section 17 support](#) or under Section 20. In addition, a **Family Group Conference** may contribute to the plan.
- 4.5 In some cases, efforts to ensure the child or young person remains within the family will not be successful and the consensus is that the child/young person needs to be cared for by the local authority. The threshold must be carefully considered and is set out within the [Children Act 1989](#). This meeting cannot make the decision to care for a child/young person but can make a recommendation that assessment, including the meeting minutes can be forwarded onto the [Children's Decision Meeting](#).
- 4.6 A full appreciation of the child's needs and circumstances should be documented as well as the risks associated with the various options. The meeting should consider the strengths of the family's situation and what evidence based interventions might be appropriate in the circumstances.
- 4.7 Where a child/young person has already come into care, the meeting will consider whether rehabilitation can be safely achieved or determine whether this is not possible and this will inform the Children's Decision Meeting. Remaining in care should be considered by the Children's Decision Meeting. Any needs arising from safeguarding should be considered under [Section 47 child protection procedures](#). The outcome will be recorded on MOSAIC as the child's plan and/or referral to Children's Decision Meeting.

5. Care planning – Children's Decision Meeting

- 5.1 The Children's Decision Meeting is chaired by the Service Manager for Children's Safeguarding & Support, who, together with the operations manager, is responsible for the plan and has a number of functions in relation to the child/young person. Outcomes from the meeting will be carefully recorded within MOSAIC by the administrator to the panel. The panel's membership will be multi-agency, and should include the following;
- Health professional for CLA;
 - Fostering team manager (Placement Hub);
 - Adoption manager;
 - An early intervention manager,
 - A primary mental health practitioner;

- A representative from Targeted Youth Support;
 - Representative from education.
 - IRO Service.
- 5.2 Each representative must be in a position to share information known to that agency/service. Individuals should be empowered to commit resources to effecting the decision reached or act in an advisory capacity.
- 5.3 Legal services will attend the panel having first received all of the papers in relation to the child/young person in order to be able to offer an informed view about threshold for PLO or care proceedings. The decision to seek legal advice will be informed by a discussion, and recording of the decision, between the service manager and operations manager in the locality.
- 5.4 Legal services undertake to review all of the papers prior to panel and prepare legal advice based on what is known and will share that view at the case decision meeting. Once the PLO has been initiated, tracking by the panel will ensure that there is minimum delay and that care proceedings are issued in a timely manner. The panel can also decide to end the PLO process and recommend an alternative.
- 5.5 The operations manager should be familiar enough with the child's circumstances to attend the panel and contribute to the formulation of an appropriate plan; the operations manager may decide that the team manager or child's social worker should attend where the child's circumstances are complex. It is crucial that the child's views are made known to the meeting, and that the operations manager will take responsibility for conveying the plan and its implementation to the team. The team must then ensure the involvement and participation of the child/young person and family members throughout the ongoing care planning process.
- 5.6 The children's decision meeting's primary function is decision making and ensuring proactive care planning which promotes long term planning at the earliest opportunity. It should acknowledge those cases where the child/young person has already recently come into care and whether continuation of this episode is necessary. [Children's Decision Meetings – Terms of Reference](#)
- 5.7 A single assessment which illustrates the 'child's journey' and a genogram together with a summary document including evidence and analysis should be submitted to the children's decision meeting. The summary document should set out the reasons and what route is being sought and/or is being recommended. These should be submitted to the panel 5 days beforehand and distributed to attendees 3 days before the panel meeting. In exceptional circumstances if the child is already in care then a care plan and placement plan should accompany the documentation.
- 5.8 A county-wide meeting will be held once per fortnight. Any delays should not impact upon the safety and well-being of the child. Operations managers should ensure that the child's views are captured. The panel will work to

ensure that there are consistent thresholds around the need to look after a child and work to the principle of 'family resolution'. The panel will consider emerging themes arising from requests to place a child in care, and set up systems for establishing a 'gap analysis' which may inform future commissioning activity e.g. children missing education (CME) and missing.

5.9 Panel outcomes may agree:

- a) the child/young person should be in care;
- b) initial endorsement of the proposed care plan which may include twin-tracking, and or additional comments from panel members;
- c) PLO to be initiated;
- d) that the child does not need to be in care and advise other pathways are followed to include early help, child in need, child protection plan or advise that a Family Group Conference should be arranged;
- e) that more information or more work is needed before a panel can reach a decision.

5.10 Where the decision is made to care for a child, or agree continuation of care, proactive planning, including long term planning should be undertaken.

5.11 Legal advice given at panel should help inform whether further assessments are needed including the support needs of parents and carers. Panel should be clear about whether parents can participate in PLO and legal processes (functioning) and whether assessments are needed in relation to:

- hair strand testing,
- drug and alcohol testing;
- DNA testing;
- Psychological assessments (commissioned) to include domestic abuse, pre-birth assessments or capacity to change assessments.

5.12 Where section 20 accommodation is agreed, timescales should be noted around rehabilitation and what needs to happen to achieve this and if not, whether proceedings are needed. Attention must be paid to the capacity of parents to agree to section 20 accommodation ([see procedure to support the arrangements for long term foster care for a child looked after](#)) the [Mental Health Act 2005](#) and [Human Rights Act](#))

5.13 A standard agenda will include matters arising from previous meetings and tracking of decisions particularly in relation to reviewing of PLO processes with a clear review of progress taking place at 3 and 6 months. The panel will monitor the time from agreement to the initiation of care proceedings. There will be a short verbal update from the operations manager as to progress. Legal services will also be able to give feedback in relation to the PLO process and where necessary assist panel in making an informed decision as to the need to initiate care proceedings.

5.14 Where the long term plan is for the child to live outside their own family, it will be necessary to fully explore extended family options or adoption. The

children's decision meeting will have the remit to consider what support is offered to potential carers in order to make an application to care for a child, and support on an ongoing basis. Support mechanisms should be considered in order to ensure that the plan is robust and enduring (see [procedure to support the arrangements for long term foster care](#))

6. Care planning – Placement Hub

- 6.1 Where the decision is made to care for a child/young person, information gathered from both the team around the child and the children's decision meeting will be used to inform the needs of that child/young person in care. A [care plan](#) and [placement plan](#) will need to be completed in MOSAIC alongside the single assessment. These should clearly state the needs the intervention is trying to address; the services required and anticipated outcomes as well as details of the intervention itself.
- 6.2 Quality of referrals to the placement hub will be balanced. Needs will be adequately described and include positive features and strengths of the child as well as areas of potential risk. It will be informed by the child's voice. Referrals should not be made to the Placement Hub without consideration at a children's decision meeting and/or agreement by the service manager.
- 6.3 Care plans will be SMART, outcome focussed, and describe who is doing what. They should include the child's voice, what needs to happen, how and when this will be achieved and the purpose and intended outcome of contact.
- 6.4 Placement plans will describe who is doing what, what the child's needs are, any issues of support, delegated responsibility, contact, and should be informed by the child's voice.
- 6.5 It is anticipated that the child's needs arising from diversity are consistently recognised and plans put in place to meet these. Unaccompanied asylum seekers under the age of 13 years will be considered by the children's decision meeting; allocation will be determined by agreement with service managers in the teams.
- 6.6 The period immediately after a child comes into care is critical. All meetings and the Placement Hub will give a high priority to discussing transitions for the child into their new home, where this has not already occurred. A timely decision on long term planning needs to be taken.
- 6.7 The Placement Hub will undertake a number of key functions upon receipt of a quality assured placement request referral. The Placement Hub will adopt a concurrent approach to identifying the most suitable option/s and determining the support needs giving preference to WCC internal provision.
- 6.8 The Placement Hub will identify broader placement possibilities for children in care, including residential options, with the endorsement of the service manager, via the hub broker, and will offer an opinion as to the most

appropriate placement. The Placement Hub Manager will be expected to be fully involved in any discussion or decision making where residential care or external provision is being considered and the decision to accept an external placement rests with the relevant service manager.

6.9 Approval for placements are made as follows:

- Barnardos BRICKS - Operations Manager Youth Justice;
- WCC [SOLO placements](#) – Operations Manager Fostering;
- WCC [STEPS](#) – Team Manager – Placement Hub;
- Barnardo's CSE - Service Manager MASH ([Barnardo's CSE Foster Placements](#)).

6.10 The Placement Hub will receive and respond to all children in care placement requests and in doing so will:-

- Ensure that the placement referral request provides an accurate assessment of the child's needs and requirements;
- Identify placement options (including support services) to meet children in care needs;
- Carry out recording of new placements on MOSAIC;
- Establish contracts for new placements within the independent sector and resolve contractual issues arising from external placements;
- Arrange for the loading of all placements onto MOSAIC;
- Complete the "[Children in care placed in OLA](#)" form and send it to lac_notifications@warwickshire.gov.uk;
- Complete the agreement form where it is a distant placement;
- Will determine who is best placed to consult regarding proposed distant placement;
- Will finish off and sign the Individual Placement Agreement (IPA) for Independent Fostering Agency (IFA) populated by the Children's Commissioner and forward to the agency with the placement plan completed by the child's social worker;
- Will determine the support needs required at the point of coming into care and make arrangements for these to be put into place
- Will maintain a database of placement activity, performance and outcomes;

6.11 Social workers are advised to notify the Child Benefit Office that a child/young person is being care for, where it is clear that it will be for longer than 8 weeks. ([Form CH193 \(from the HMRC/Child Benefit\)](#))

7. Care planning - health

7.1 The responsibility for ensuring timely health assessments remains with the social worker. The designated health service will require copies of the

placement plan (incorporating consent), care plan and single assessment to initiate the health assessment following the integrated health care pathway.

- 7.2 Consideration should be given to the health of the child/young person and whether this has had an impact on the child's development. Consideration should also be given to the child/young person health history and where relevant that of family members and other relevant parties and whether this has had impact upon the child's development. Existing arrangements for health and dental care and whether there are any planned changes to those arrangements should also be taken into account. It is the expectation that birth parents attend the health assessment appointments.

8. Care planning – education and training

- 8.1 The social worker retains responsibility for ensuring that the Personal Education Plan (PEP) is initiated as soon as the child/young person comes into care using the agreed process.
- 8.2 When looking at education and training the social worker should consider the child's history including attendance, conduct and special educational needs. Consideration should be given to existing arrangements and any impact of planned changes to those arrangements. The child/young person's leisure interests and how they can continue should also be taken into account. It is important that any risk of temporary or permanent exclusion is reduced through enhanced support as necessary, in order that the foster care arrangements is not undermined.
- 8.3 The social worker is responsible for making arrangements for school transport in appropriate circumstances and for following the agreed protocol.
- 8.4 Key stage 4 pupils cannot move schools without consultation with the [Virtual School](#), designated teacher at the current school, IRO and service manager (Reg. 10). In the event of agreement being given to a change of school this change must be noted on the child's records.

9. Care planning – emotional and behavioural development

- 9.1 The social worker will consider any services already in place with regards to the child/young person's emotional wellbeing. Where wishes and feelings work has commenced this should be built upon as the child's care plan progresses.
- 9.2 For some children and young people a referral to [Journey's](#) (a targeted emotional health and wellbeing service for CLA) is necessary taking care to safeguard any confidential information.

10. Care planning – contact

- 10.1 When considering the contact arrangements for the child/young person consideration should be given to promoting contact in all forms. Therefore it will be important to consider the child in the context of his/her family and/or other social relationships. Social workers should consider the recent research and [guidance on contact issues for children in care](#) and NICE research on the importance of contact with important people including previous foster carers.
- 10.2 When planning contact for children/young people the importance of pre-existing court orders under Section 8 and 34 of the Children Act 1984 should be considered as should the importance of [sibling contact](#) and other pre-existing relationships. Contact with parents or others with parental responsibility should always be prioritised as long as it is in the child's best interests; contact can only be stopped for a period of seven days giving written notice to parents, child and IRO.
- 10.3 The purpose of a placement plan is to determine how a child/young person will be cared for and safeguarded on a day to day basis (Care Planning Regulations Schedule 2:9). It also includes a summary of delegated authority, and through the risk management matrix will address such issues as promoting positive behaviour.
- 10.4 Children and young people should be provided with advice, assistance and support to enable participation in all meetings and reviews. It is particularly important that the child/young person is well prepared for their statutory review and has the relevant information including access to an advocate. The IRO will send the 'consultation document' to the child/young person prior to the review.

11. Care planning – through care panels

- 11.1 Long term planning is based on the philosophy that every child has the right to a long term and stable home, preferably with his or her own family. The primary focus of long term planning is to prevent children from unnecessarily coming into care and for them to have a sense of where they belong. As corporate parents WCC will work to find long term, safe homes for children in care, in a timely manner. The best possible care involves giving children security, stability and commitment throughout their childhood and beyond. It requires their carers to be able to respond and adapt to their emerging and changing needs. ([See options for permanence guidance](#))
- 11.2 Long term planning for the child's upbringing provides an underpinning framework for all social work with children and their families from family support through to adoption. It ensures a framework of emotional, physical and legal conditions that gives a child a sense of security, continuity, commitment, identity and belonging.

- 11.3 Early long term planning is paramount in ensuring minimal delay and uncertainty. There is a requirement to take into account when making placement decisions, that the local authority has a rehabilitative duty to return children/young people to a parent or other connected person with parental responsibility or any person who previously held a Child Arrangement Order. Where the care plan is rehabilitation to family there is a need to address how the child can retain continuity with parent(s) and their place within the family home. The care plan will need to address the problems that led to the child coming into care, how continuity of care can be maintained, any hobbies or interests and how these can be pursued. The long term plan will be endorsed by the service manager in the locality. From the children's decision meeting to the [through care panel](#) cohorts of children and young people will be tracked, monitored and reviewed in order to ensure minimal delay in securing long term arrangements for all children and young people.
- 11.4 Progress meetings between children's teams, adoption team and connected other team are helpful in avoiding drift in planning and using the expertise invested in adoption team and connected others team for securing long term arrangements. Where the plan may be for adoption, a joint approach between the children's team and the adoption team will ensure the timeliness and accuracy of paperwork and the process to the agency decision maker.
- 11.5 The child/young person should be consulted with at least 20 working days before the review in relation to (i) who they would like to attend the meeting and (ii) where the meeting will be held. The level of consultation and whether it is feasible will be dependent upon the child/young person's level of understanding. However every endeavour should be made to ensure that the child/young person's 'voice' is apparent within his or her journey through care.
- 11.6 The IRO has a clear responsibility in ensuring that a child in care has a SMART plan and that there is minimal delay in ensuring that progress is made. If there are any concerns, the IRO can refer the matter to the service manager for review. Through careful monitoring and tracking, children in care will be considered by the Through Care Panel (see [Terms of Reference](#)).
- 11.7 Where the child/young person is in care as a result of abuse and neglect, preceded by a child protection conference then any plan to return the child/young person home (or place with parent/s under section 31) should only be undertaken following a full assessment as required. (See [Placement with Parents Procedures and Guidance](#).)
- 11.8 A review should be held before a decision is made for a child/young person to leave care under section 20 or before that young person moves into semi-independent accommodation. In the matter of the former situation, the Assistant Director for Children and Families should be notified and discussions held with the IRO where there is a change of care plan. This refers to decisions for a child/young person to leave care which is different to a child/young person missing from their foster home.

- 11.9 A care plan should be drawn up detailing the advice, assistance and support that the local authority intends to provide to the child/young person in circumstances where the young person returns home in:
- (i) an unplanned way through his/her own volition;
 - (ii) where the person with parental responsibility ends the period of section 20 accommodation; and
 - (iii) circumstances whereby the young person is not eligible.
- 11.10 This must include an ongoing assessment of the ability of the parent/s to meet the child/young person's needs, as it is not acceptable to simply cease providing a service when either the local authority has made the decision to end a period of section 20 accommodation, or when the child/young person and his or her family have done so.

12. Children and young people leaving the care of the local authority

- 12.1 For those young people who are 16 and eligible and within the definition of Schedule 2, who have been in care for a period of 13 weeks in total from the age of 14, the local authority must assess the young person's needs in accordance with regulations and prepare his or her pathway plan.
- 12.2 For other children and young people the plan may be to 'step down' services and support the family, with their agreement, in accessing [targeted early intervention support](#).

13. Leaving Care - The Pathway Plan and preparation for independence

- 13.1 Arrangements for assessing, supporting and reviewing an eligible young person are governed by separate procedures.
- 13.2 There are extended duties to care leavers if undertaking a period of higher education between the ages of 21 years and 25 years, and these duties exist until the end of the programme of education.
- 13.3 For care leavers entering custody who are the subject of a care order, then pathway planning must continue and the young person visited on a regular basis. If the young person is in a youth offender's institution then the social worker must visit within 1 week of the start of the placement and at intervals of not more than 6 weeks in the first year and thereafter every 3 months. ([See Children's Services and Youth Justice Service Protocol](#)).

14. Documents and further reference

- [The Family and Friends Care : Statutory Guidance for Local Authorities](#)
- [Governance and Accountability Guidance for C&FS](#)
- [Delegated Decision Making Guidance for C&FS](#)
- [Section 17 Payments Procedures](#)
- [Delegation of authority to foster carers policy](#)
- [Procedure to support the arrangements for long term foster care](#)
- [Foster Care Finance Handbook](#)
- [Placement with Parents Practice Guidance](#)
- [Advocates and Independent Visitors procedures](#)
- [Looked After Reviews Procedure](#)
- [CLA – Integrated Health Pathway](#)
- [Contact issues for children in care](#)
- [Attachment to Important People \(NICE\)](#)
- [Youth Justice Service - Children's Safeguarding Services Protocol](#)
- [Warwickshire's Protocol for assessing and managing the housing needs of homeless young people](#)
- [Single Assessment Guidance and Procedures](#)
- [Barnardo's CSE Foster Placement Guidance](#)
- [Solo Placement Scheme Procedure](#)
- [Short Term Emergency Placement \(STEPS\) - Guidance for Fostering Services](#)
- [Early Help Family Support Worker Offer](#)

Annex A – Long Term Options Guidance – Warwickshire County Council

[Long Term Options Guidance](#)