

Achieving  
Placement Stability  
for Islington's  
Looked After Children

Policy and Practice Directive

January 2008

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## **Forward**

As Head of the Children Looked After Service I welcome this practice guide, which sets out the Borough's policy and practice in relation to obtaining stability of placements for Children Looked After. The importance of placement stability and the impact on positive outcomes for Looked After Children is crucial. The Government White Paper '*Care Matters – Transforming the Lives of Children and Young People in Care*' points out: -

- “Children have told us that a lack of a consistent adult in their lives is a major and harmful feature of being in care.”
- “Evidence shows that frequent moves between care placements have a very negative impact on the ability of children to succeed both in education and in other areas of their lives. Currently children in care are moved between placements far too frequently.”

In the new integrated Children Looked After Service it is essential that placement stability is a priority for all sections. Only through collaborative work between carers, social workers, link fostering and adoption workers, health and education colleagues can we minimise the placement moves children experience.

Placement stability has been an ongoing concern for Islington. Various initiatives have been taken to minimise the moves that children and young people experience. There have also been directives and policies put in place via Divisional Memoranda's. Specific service developments (such as the Adolescent Fostering Service and AMASS) are designed to strengthen stability. However we still have some to go and too many of our children experience too many moves. The establishment of our new Service gives us an excellent opportunity to focus on this issue further. This Policy and Practice Directive brings together in one document all the key policies and procedures that staff need to be aware of. I hope you find it helpful.

Please ensure that you read this Directive. I would also very much welcome any ideas you might have as to what further we can do to promote placement stability.

Mel Davies  
Head of Service  
Children Looked After

## **Introduction**

To reduce the gap between outcomes for looked after children and the rest of the child population in the borough it is critical that,

1. Entry into care is planned
2. Provision is in place to meet the child's needs and is flexible enough to meet all of the child's needs.
3. The care experience from the outset is a more positive experience for all looked after children.

Islington recognises that **reducing** the number of children who experience their care placement ending in an unplanned way (disruption/breakdown) and **increasing** the proportion of long term looked after children in a stable placement will increase the likelihood of positive outcomes for children. The positive outcomes include educational attainment, improved physical and mental health, children's own self reported sense of well being and happiness, and successful transition to adulthood. Stable placements mean child care plans are more likely to be implemented successfully within agreed time scales.

The following Directive recognises there is no single definitive action which will immediately achieve such placement stability for Islington's looked after children. The document is based however on the findings from the DfES Placement Stability Enquiry undertaken in September 2005. This study concluded there are four critical factors at play and the dynamic relationship between them improves stability.

They are:

1. Effective diversion from care/early intervention
2. Strong tracking and case planning to achieve permanence
3. Placement choice
4. Increased multi-agency support to placements.

In addition, in the past four years Islington has issued a number of Divisional Memoranda to staff to direct practice in relation to placement selection and stability issues. These are attached in Appendix 5 and should be used in conjunction with this document.

## Findings from Placement Stability Project

*In the summer of 2008 a placement stability research project undertaken by independent consultants RTB with Islington children who had been looked after from more than 2.5 years found*

### **Moves:**

Of the 29 children who have experienced placement moves in the relevant period, 11 have experienced only planned moves. The remaining 18 children have experienced a mixture of planned and unplanned moves and of these, 6 have experienced only unplanned moves.

- One move :14 children (7 planned; 7 unplanned)
- Two moves: 8 children  
Planned : 3 children  
1 Planned, 1 unplanned: 3 children  
2 unplanned: 2 children
- Three moves: 4 children  
3 planned: 1 child  
1 planned, 2 unplanned: 2 children  
3 unplanned: 1 child
- Four Moves: 2 children  
2 planned, 2 unplanned: 1 child  
All unplanned: 1 child
- One child has had seven unplanned moves
- One child has had 9 unplanned moves.

### **Reasons for planned moves:**

- Move from residential to foster carers: 4 children
- Planned move to long term carers: 6 children. It should be noted that a planned move could take place after an earlier unplanned disruption.
- To respite carers and back to main carers: 1 child
- A child who was settled with a main carer and the carers' adult daughter moved across the road with the daughter: 1 child

### **Reasons for unplanned moves:**

- Ill health of long term carer: 2 children (siblings who were placed together)
- Holiday respite: 1 child
- Away from a relative because of concerns about level of care: 1 child (who then made a subsequent move back to this relative)
- A baby placed with his young mother in a mother and baby placement which disrupted because of mother's behaviour :1 child
- A young person moving between relatives and friends to end up with relative he wanted to be with: 1 child
- In all other cases the behaviour of the child or young person was given as the reason for the disruption of the placement: 13 children.

There is evidence of respite carers being used as emergency placements following disruptions so that children at least go to carers familiar to them.

Detailed information about the numbers of moves and the reasons for them for each child or young person is contained on pages 23 to 31.

**Five Need Groups identified:**

Background information on all the 47 children and young people in the sample was obtained from the files, transferred to the audit forms and analysed. This included the reasons for the child becoming looked after, the reasons for the moves in placement, services provided for the child, their family and their carers, and information about the circumstances and needs of the children and young people in five areas: living situation; family and social relationships; social and antisocial behaviour; physical and psychological health; and education and employment. The cases were then aggregated into groupings linked to the main need of the child or young person in relation to placement stability. Five need groups were identified:

Need Group	Description of need group	Number
1	Children and young people need to continue to live in their secure long term placements	15 (32%)
2	Children and their carers need support to ensure that the children can continue to live in their permanent placement and children need support to help them resolve issues from their past	8 (17%)
3	Children need considerable support in relation to behaviour and vulnerability issues and carers need support in managing these in order to ensure children can remain in permanent placements	10 (21%)
4	Children need to be sustained in recently made long term placements following a lack of a clear plan for future permanence or need a permanent placement and clarity about the long term plan	9 (19%)
5	Children need support to control their behaviour, to come terms with loss and trauma and to be settled in a long term placement	5 (11%)

Need group 5 contains all four children who have moved four or more times and one child who has moved twice but who is likely to be vulnerable to further disruptions because of the seriousness of his needs. Otherwise there is a spread across all four need groups of children who have not moved in the period (including those in the comparison sample) and children who have moved up to three times. This emphasises the importance of looking at the reasons behind moves and disruptions as well as simply looking at the number of moves.

The children and young people in need group 1 are settled in their placements and currently having their needs fully met. The majority have been in their placements for two years or more. The children in Need groups 2 and 3 have much higher levels of behavioural problems and thus higher levels of need for support for themselves and their carers and have been in long term placements for shorter periods of time. The children in need group 4 have also been in placements for shorter periods of time. Those in need group 5 are exhibiting very difficult behaviour and have been in placements for very short periods of time.

More details about the children and young people in each need group is contained at pages 32 to 46 and in Appendix 1 at pages 47 to 61.

## **Other variables**

### **Placement type**

The majority of the children and young people are placed with foster carers outside of the Borough (30), while eleven are with relative or friend carers and a sibling group of three are with their mother. Nearly half the children in Need group 1 are placed with relatives (6) and just over half of those children who have not moved at all are placed with relatives (10).

There was evidence in some cases of tensions and disagreements between LB Islington and the fostering agency responsible for the placement.

Given that all but one of the children in foster care are placed outside the Borough it was not possible to make any comparison in relation to placement stability between in Borough and out of Borough placements. It would however appear from this sample that placement with relatives and friends is a factor which contributes to stability, a finding confirmed by research.

### **Reasons for child becoming CLA:**

- Neglect/abuse – 26 children;
- Alcohol or drug misuse – 20 children;
- Abandoned – 1 child

### **Sibling groups and contact**

There are seven sets of sibling groups in the sample. Three of these groups (one group of five, one group of three and one of two) are children with histories of severe neglect and abuse over a number of years who as a result have very high levels of need and difficult behaviour, apart from one child in the sibling group of 5 who is the most resilient of them all. In addition there is one set of three siblings, all placed with their mother, and three sets of two siblings.

Twenty children in the sample are placed with at least one other sibling and ten of these are with all their looked after siblings. Twenty three children have looked after siblings, some or all of whom are in different placements. In one case CAMHS advised on whether two siblings with very difficult behaviour should continue to be placed together and concluded they should not.

Forty of the children are in direct contact with at least one other member of their family. In only two cases is contact with some members of the family or all of the family seen as directly undermining the possibility of achieving permanence for the child. In two further cases the effect of contact with siblings on the child has caused concern and led to a suspension of contact. In other cases children suffer distress when contact arrangements are not kept by parents or other relatives or when they are unable to see siblings who have been adopted. There were a number of cases where contact with an adopted sibling had been promised prior to the adoption but was not taking place as planned.

### **Age, gender, ethnicity, length of time looked after**

There are more boys (29) in the sample than girls (18). There is a spread of ages from 2 to 16 but higher numbers of children aged 14 and 15. There are almost equal numbers of children from a white British or Irish background (20) with children from a mixed heritage background (18). There is good matching of children with carers in relation to language and ethnicity including for the 18 children from mixed backgrounds.

The children and young people have been looked after for periods of time ranging from just over one and a half years to 15 years.

Charts on these variables are at pages 16 to 22 and under each need group.

### **Comparison group:**

Ten children who had not had moves in a two year period were identified as a matched comparison group, although it transpired that one of these had in fact moved and was now subject to a Special Guardianship Order (SGO). The majority of these children (6) are in Need Group 1. One child, with high levels of need and difficult behaviour, is in Need Group 3 and three children are in Need Group 4. Of these three, one has now been made the subject of an SGO in favour of a relative; two young children have been settled for some time in what are unfortunately short term placements. One child is awaiting a decision as to whether his current carers will be accepted as long term carers. One child is experiencing distress and anxiety because the plan for him is adoption and he may face being removed from his current carers as a result – they wish to look after him long term but do not wish to adopt him and he wishes to stay with them.

Half of the children in the comparison group are with foster carers out of Borough and the remaining half are with relatives or friends. All but two of the children have been in their current placements for two or more years. They have less behavioural problems although four are described as having some behavioural problems and only two of the children have statements of SEN.

### **Obtaining the information**

It was difficult to identify which placement moves had been planned and which were unplanned. This is now being addressed by Islington.

The most useful source of information was the CLA review outcomes written by IROs. These provided a clear, concise and relevant case history in the majority of cases.

In a minority of cases, even after reading all available information in review reports and care plans, it was unclear why the child had become looked after.

It was hard to find any information about parents and family background except what was set out in the IROs case histories. This will no doubt change when Initial and Core assessments are done and logged electronically as part of ICS.

ICS is in its early stages of implementation but some comments arising from this exercise are:

- Many assessments and care plans are blank – they may be there to indicate there is a hard copy on file, but it would be helpful if this could be indicated in some way.
- It is confusing when care plans are presented as having been updated but the information in them has not in fact been updated.
- A tendency to focus on the positives in care plans in some cases raises a question about the worker's understanding of the purpose of the care plan.



- Detailed case notes are helpful in filling in some of the gaps in information. It is less helpful when they simply note that a phone call or meeting took place.

## **Discussion**

### **Behaviour**

The majority of unplanned moves for the children in this cohort are linked to foster carers, and in some cases relatives, finding the child's or young person's behaviour impossible to manage. There are high levels of behavioural problems within this cohort of children:

- 28 children with behavioural problems at home
- 24 children with behavioural problems at school
- 30 children with emotional/mental health difficulties
- 21 children with special educational needs (20 with a statement)
- 11 children have been temporarily or permanently excluded from school.

While some of the children and young people have what are described as low level behavioural problems at home and school, many have serious behaviour problems including verbal aggression, violence, damage to property, bizarre behaviour and sexualised behaviour.

For a number of children, including the sibling groups of five and three children, their behaviour is linked to having experienced serious neglect, and in some cases sexual abuse, for long periods of time at home before being removed.

Nine children, including some of those who had experienced long periods of neglect at home, have also experienced mistreatment by carers, including one child who experienced physical and sexual abuse. For eight of these children this has increased their vulnerability and behavioural problems.

There are a small number of children where although a disruption was ostensibly because of the child's behaviour it would appear that in reality it was more linked to the child and carers failing to 'click' or to a carer's limited capacity to deal with a range of normal teenage or pre teen behaviour.

### **Support and information for carers**

Foster carers need to receive full and detailed information about the children being placed with them. This is always important, but is particularly so when carers are being asked to deal with the very difficult and disturbed behaviour of some of these children. There is evidence in a number of cases in the cohort of foster carers lacking the detailed information they needed. In such situations care plans which are over optimistic and which focus on the positives in a child's behaviour and presentation are not helpful.

It is important that proper recognition is given to the very difficult task being tackled day in and day out by some carers looking after children and young people with extremely challenging behaviour. There was evidence in some cases of a somewhat negative and unhelpful attitude to carers and the concerns they were expressing.

On the other hand it is equally important to be alert to the possibility of mistreatment of children in foster care which nine children in this sample have experienced. Earlier identification of the stresses which the carers were under might have enabled appropriate support to have been put in place and/or led to earlier removal of the children concerned.

## **Other services**

There are a range of different support services which are drawn upon to help meet the needs of both children and young people and their carers. Support is provided within schools, by Islington REACH, by specialist CAMHS both in Islington and in the carers' locality, and by therapists, psychotherapists and clinical psychologists linked to independent fostering agencies. Where children move from residential provision to foster placements residential staff provide support and advice to carers for a period of time.

It is obviously important that all the resources and services which are going to be needed to support the foster carers and the children themselves are identified prior to the placement being made and that these resources and supports are available when the placement starts. There is evidence in the sample of long waiting lists for CAMHS services in other areas and delays in making referrals to CAMHS until after the placement has begun. Delays are also caused by decisions not to provide therapeutic support until after the child or young person has settled in a long term placement, which is not helpful if they are moving from placement to placement. There is also evidence of some children with very difficult behaviour being without a school place and receiving only a very limited number of hours of tuition – either in or out of the home, which adds considerably to the burden of care placed on foster carers.

Thus planning and negotiation with fostering agencies and education, youth, speech and language and CAMHS services in other areas and having contingency plans to cover waiting lists for therapeutic services and difficulties in finding school places or other full time educational provision is essential.

## **Assessment and planning is crucial**

All of the above points emphasise the importance of clearly identifying needs, seriousness of needs and achievable outcomes when carrying out assessments and using this as the basis for an outcome focused care plan. For this sample of children there was limited evidence of such assessments or plans. The ICS forms for care plans being used by Islington should help with such approach, as they contain columns for needs/strengths, outcomes to be achieved and services needed to do this. In some cases these were sufficiently detailed and specific and were obviously updated when circumstances and needs changed or when outcomes were achieved. In other cases, however, it was difficult to get a clear sense of the needs of the children, the behaviour carers were likely to experience, and specific outcomes that carers, social workers and other services involved should be working towards. It was also sometimes difficult to understand who was being expected to do what and on occasions plans entered onto the system as updates had not in fact been updated and thus included misleading information.

Detailed, outcome focused, plans would enable everyone, including carers, to be clear about what to expect and to identify the particular help they would need to understand, manage and address the needs identified. It would give carers the opportunity to say clearly that this particular need was one they felt unable to help with, or, that they could help with it but would need on-going intensive help and guidance.

In addition detailed plans will assist in engaging other agencies to ensure an integrated approach – with all parties understanding which part of the plan is their responsibility and how their work fits with that of other professional colleagues, family and child.

Consistency of social worker should be aimed at for all children but where this is not possible a clear plan will do much to ensure that service delivery remains consistent.

If needs-led plans are not achieving the outcomes hoped for then reviews need to focus on the reasons for this. A variety of reasons are likely to be apparent but one reason could well be maltreatment by carers. Clear and transparent plans that are available to everyone involved and rigorously reviewed are more likely to protect children from maltreatment. Equally if plans are formulated with children and written in simple language they can understand easily they will be much more able to comment on whether they feel the plan is the right plan for them and how they think it might be adapted.

### **Listening to children and young people**

Frequently changing social workers make it hard for children to develop trust – they need a consistent person with whom they can raise concerns and who would be able to pick up on their moods or changes in behaviour. There is some evidence of IROs doing this. Islington is currently working to improve its retention of social workers.

Flexibility is important, but where short term placements may change to a long term placement a thorough assessment is required in which children are given every support to express their views and imaginative methods used to encourage them to give a clear picture of their experience in the placement

Children and young people's views about contact were regularly obtained and acted upon.

### **Communication with families**

Detailed, needs based and outcome focused planning is especially important when placement within the extended family is being considered. By definition families do not have the same access to professional knowledge and services. They need to be clear about their relative child's needs, to agree or disagree with the analysis; to comment on the services that are being suggested and to feel confident about their right to request services to support them as individuals. Good communication with all members of the extended family is also important.

## Messages from Research

*The project highlighted messages from research as including*

### **Risk factors for placement breakdowns:**

The following risk factors identified in research were evident in this sample:

- Crisis driven, emergency and rushed placements
- Inadequate or unrealistic information about the child's needs and difficulties and plans for schooling and long term care
- Children with challenging behaviour, educational and/or attachment difficulties
- Children who have been rejected, emotionally abused or scapegoated in their families
- Children with hyperactivity and/or conduct disorders
- Foster carers experiencing stressful life events – eg bereavement, illness, financial worries and recent placement breakdowns
- Carers feeling unsupported – including because of low level of visits by child's social worker
- Children having low confidence in school work and in relationships at school

Other risk factors not evident and/or not investigated:

- Teams with high workloads and unallocated cases
- Disregarding foster carers' gender preferences
- Overoptimistic and poorly supported plans for swift reunification.

### **Factors which have little influence on unplanned moves:**

- No evidence of either a positive or negative impact from family contact except some evidence of a risk of breakdown where there had been abuse and contact was ongoing and unrestricted. Key message is to listen to what children want.
- Placing siblings together or separately
- No consensus on whether foster carers age or presence of birth children in household affects stability.

In other words, research does not support rules of thumb in making placements.

### **Protective factors:**

- Good assessments and lack of drift in planning
- Children with appealing personalities and not very difficult behaviour
- Carers who are not thrown by difficult behaviour, are warm and encouraging, committed to fostering and able to 'ride out' difficulties
- Carers who have good informal support systems (eg friends, family, GP, teachers)
- Counselling for young people – helps carers feel more supported
- Carers able to respond to a child's emotional age rather than chronological age
- When children and young people are able to talk about their past histories (to carers and to others)
- When carers encourage children and young people to learn life skills
- When carers monitor the activities of young people when they are not at home
- Kinship placements – less likely to break down because kinship carers are more likely to persevere and to tolerate difficult behaviour. This is despite the fact that kinship carers are more likely than foster carers to suffer financial difficulties, chronic illness, overcrowding and lower levels of social work support.

## **Promising approaches**

- Placement stability chairperson – Essex
- Shopping centre recruitment ‘shop’ for new carers – Birmingham
- Placement Stability Support and Training Group – Haringey
- Training for carers in cognitive behavioural approaches
- Multidimensional Treatment Foster Care
- Multidisciplinary Teams providing focused ‘24/7’ services to support placements

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## **A. Pre-admission & Placement Planning**

See Divisional Memorandum – DM2005-1 Decision-Making About Children Becoming Looked After.

### **1. Prevention**

Islington has in place a range of measures that seek to prevent the need for a child to become looked after. For example;

- 1.1 It is expected that families of children will have been offered an opportunity to prevent entry into care through the convening of a Family Group Conference.
- 1.2 Older children (10 years or more) should have also been considered for referral to the Adolescent Multi-Agency Support Service (AMASS). AMASS is a dedicated multi-agency team (including behaviour support workers, outreach workers, psychologist, psychiatrist, senior social worker, substance misuse worker and advisory teachers) which works jointly with case holding social workers where children are at a high risk of becoming looked after. AMASS is a wrap around service offering specialist interventions to parents and carers, to improve the outcomes of vulnerable children and adolescents, where universal and single agency targeted services have failed to achieve sustainable changes.
- 1.3 All requests for children to become looked after require the Team Manager's agreement and would have been subject to scrutiny by either a Looked After Children Co-ordinator (LACC) or in the case of older children a multi-agency panel known as the Becoming Looked After (BLA) Panel

### **2. Requirements when a decision is made for child to be looked after**

#### **2.1 Placement Information Record**

It is a requirement that a child's Placement Information Record (PIR) is immediately commenced following agreement by either a duty LACC or BLA Panel for the child to become looked after.

#### **2.2 Placement Search**

It is a requirement that a placement search is requested and commenced immediately using the BLA request form and a completed Risk Assessment.

#### **2.3 Visits to potential placements**

It is an expectation that all possible placement options are visited by the allocated social worker and where possible older children and if appropriate their parents are involved in the final placement selection.

#### **2.4 Placement Agreement Meeting**

It is a requirement that once a placement is selected a Placement Agreement Meeting is scheduled to occur **before** the child moves. Should this not be possible the meeting should be organised within 72 hours of placement commencing and held within 5 working days.

Islington regards the Placement Agreement Meeting as crucial to placement outcomes and care planning for children. It is in this forum that agreements will be secured as to how the placement will contribute to meeting the child's needs and the support required to implement the child's care plan is identified and arranged.

- In the case of in-house foster placements the meeting will be chaired and outcomes recorded by the carer's Supervising Social Worker.
- In all other placements the meeting will be chaired and outcomes recorded by the child's allocated social worker.

Placement Agreement Meetings will be attended by the child, their parents, proposed carer(s)/ key workers, their supervising social worker/line manager and any other placement support personnel.

Placement Agreement Meetings are critical in ensuring the placement meets the child's needs from the start. Therefore requests for meetings to be rescheduled to a later date will need to be subject to agreement by a social worker's line manager, in most instances the Deputy Team Manager.

The formats used by the Islington Fostering Service for Placement Agreement Meetings for different aged children are attached in Appendix 1A and 1B. The child's social worker will use these formats as the basis of the agenda for children placed with independent placement providers.

Detailed planning in the arrangements for parent and baby / child fostering placements is essential. Islington has identified a specific format for the Placement Agreement Meetings for such placements. (See Appendix 1C). Recognising the importance of setting expectations for the foster carer, no parent and baby placement will proceed until a Placement Agreement Meeting has been convened and all parties are happy that the requirements of the agenda have been met. The meeting will confirm the purpose of the proposed placement - either to teach parenting skills, undertake assessment or both. Foster carers will not however be expected to undertake assessments alone if the plan is to initiate care proceedings. The Placement Agreement Meeting will seek to spell out in detail the balance of caring for a young vulnerable parent(s) and the welfare and safety of an infant. In all instances the safety and welfare of the infant will be the priority.

The outcomes from the Placement Agreement Meetings will in all instances be recorded in the Placement Information Record. Copies of this document will be provided by the social worker to the child (if over 10 years of age), their parents, the placement provider and the carer. This record will be updated following each placement agreement meeting or as a result of a decision from the child's looked after review.

## **B. Placement Selection**

Getting the match right between the child and the placement is the key to achieving placement stability.

### **1. Placement with Family or Friends**

In recognition of every child's right to family life, Islington will ensure that children requiring alternative care are placed within their own family network if possible, without recourse to the Children Looked After process. If becoming looked after is still required for placement with a family member Islington will view this as a temporary measure. It is therefore unlikely that a child living within the extended family will remain looked after for a prolonged period of time. (The expectation is that the child would either return to his or her own parents or remain permanently with the extended family member through Special Guardianship or Residence Order).

### **2. Placement with Islington Foster Carers**

If a placement within the child's extended family is not possible, Islington will seek to locate a suitable Islington foster placement local to the child's school and support network. The presumption is that should an in-house foster placement be identified that the child will be placed with this carer. The Team Manager can make representations if they do not think the in-house placement is suitable. However the final decision rests with the Operational Manager (Placements).

### **3. Use of Independent Fostering Agencies**

If there are no suitable in house foster placements, the child will need to be placed with an independent fostering agency (IFA). The first choice should always be where possible one of the Council's six "preferred providers". Other agencies can be approached if the preferred providers do not have a suitable placement.

### **4. Use of residential placements**

Only in exceptional circumstances will Islington consider the placement of a child in residential group care. This is not considered a permanency option and will require Assistant Director authorisation.

### **5. Placement Searches**

Placement searches are undertaken by the Children's Placements Service. Currently in the case of semi independent provision the search will be undertaken by the Shaftesbury Leaving Care Service (Accommodation Officer) or if the child is an Unaccompanied Asylum Seeking child, the Children's Asylum Team. From April 2008 the Children's Placements Service will undertake all placement searches.

### **6. Placement Selection**

In selecting a foster placement the social worker and their manager will be guided by the suitability of the proposed carers taking into account the:

- The assessment of the child's needs
- The outcomes for the child that are being sought.
- The child's education arrangements
- The location of the placement
- Child's wishes and feelings
- Parents' and significant others' views.
- Objectives of the care plan



- Proposed permanency plan

Note:

### **Education Arrangements**

See Divisional Memorandum DM2006/3. Except in extreme circumstances requiring police protection or an Emergency Protection Order no child can become looked after or change placement unless there are robust arrangements in place for the child's education. There must be consultation with the Manager of the REACH Team who needs to give agreement that the educational arrangements are suitable.

### **Locality**

The expectation is that children will be placed in placements that are either physically within the borough boundaries or in neighbouring / nearby boroughs that will allow the child to maintain their school place.

Prior to the Children's Placement Service and the allocated social worker agreeing to a placement, it is also critical the social worker and their manager have a clear understanding of the following:

#### **(i) The use of short breaks within the proposed placement**

Islington recognises the role regular short breaks from the placement can play in the delivery of a care plan for a child with complex needs. However, Islington expects the proposed breaks to be with the same named carer and are planned and agreed at the initial Placement Agreement Meeting. It is also a requirement they are never more than 7 consecutive days in duration and there is a clear expectation the child will be returning to the main placement. It is also expected that the short break carer attends the Placement Agreement Meetings and is involved in the looked after review process. Such breaks will be recorded by the social worker as placement moves but using one of the temporary codes (See Appendix 3). Some of the children placed with in house carers will receive one off or a series of short breaks from the Grosvenor Teenage Fostering Resource Centre.

#### **(ii) Shared Care Arrangements**

Islington also recognises that care can be shared between two settings on a regular basis. In such instances this will be recorded as a continuous episode of care and will be coded to the placement at which the child spends more time. It is also expected carers from both settings will attend placement agreement meetings and be involved in the looked after review process.

#### **(iii) Foster carers' holidays**

Islington expects that carers take children in their care on holidays with them, but **never** during the school term. Islington also recognises the demands of foster care and appreciates that from time to time foster carers may need to take a holiday without the children in their care. Islington therefore requires confirmation of a named back-up carer prior to a placement proceeding. This carer will provide care in emergencies or should the foster carer take a holiday alone. In such scenarios back-up carers who can move into the foster carer's home would be preferred. Islington's expectation is that foster carers' holidays, which require the child to be placed elsewhere, are no longer than 14 days and no more than two holidays every financial year.

#### **(iv) Changes to fostering household/residential unit**

Implementation of care plans for a looked after child requires a clear understanding of the strengths and potential areas of difficulty within the proposed placement. Islington therefore expects the allocated social worker to be involved in the discussions of any proposed / anticipated changes to the household. As per the regulations it is Islington's expectation that formal agreement will be sought for any new placements.

#### **(v) Emergencies**

In the event of an emergency that requires the carer to leave the child in the care of another foster carer, Islington would expect to be advised of the need at the earliest possible opportunity. Should the nominated support carer not be available to care for the children in their placement then Islington would expect the child to move to the support carer's household or to another approved foster carer known to the child. It is expected that the child will be returned to the care of the foster carer within two weeks. In all instances Islington would expect minimum disruption to the child's routine.

**In all cases of placement selection and placement support Islington's social workers will base their decision making on the needs of the child and will be guided by research on and, commitment to effectively supporting placements in the community.**

## **C. Placement Supports**

The timely implementation of the child's care plan is crucial to a child's placement stability. In Islington the achievement of permanency objectives for each child is subject to monthly tracking which includes scrutiny by senior managers and a well established and robust looked after reviewing process.

### **1. Stability Plans**

It is important that factors which may impact on current placement stability are identified as soon as possible or brought to the attention of the allocated social worker. These can then be addressed in the child's current care plan. These factors can include the child's previous placement history, age of entry into care, education arrangements, the child's mental health needs and challenging behaviour, any history of periods of being missing and offending behaviour.

Islington children deemed at high risk of placement disruption by their allocated social worker will have a plan, which specifically addresses risks to the placement. This is known as a "Stability Plan". Key elements of the plan will be discussed and agreed at the Placement Agreement Meeting and will be included in the child's Placement Information Record. The plan will be monitored through the statutory visits to the child and through supervision of the allocated social worker.

### **2. Pre-disruption meetings**

Islington expects indicators which suggest the placement is under stress and may be at risk of ending in an unplanned way to be identified and discussed as soon as possible by the those working with the child. Islington requires these concerns to be addressed through a meeting known as a "pre-disruption meeting". The process for such meetings is outlined in Appendix 2 including a proposed format and agenda. The process seeks to bring all the relevant parties together and ensure all efforts are taken to address and resolve issues which are adversely impacting on the placement being able to meet the child's needs and or implementation of the current care plan. This will always include a referral to the Child & Adolescent Mental Health Service (CAMHS), who will provide a worker to attend the meeting or provide a short report if the case is known to the team. The meeting, which concludes this process will consider:

- (i) use of AMASS if an older child is in in-house foster care

AMASS offers intensive support packages, jointly working with an Intensive Community Outreach Network (ICON) intervention with the fostering supervising social workers (FSSW) and child care social workers, where young people are exhibiting extremely challenging behaviour, and universal and targeted services have already been tried. The model involves twice weekly visits to the carer with the FSSW and weekly group supervision.

AMASS uses a way of working with carers that empowers them in the parenting of their child/young person, thereby increasing the carers' responsibility. A core assumption is that more effective parental/carer authority will enable the young person to develop skills to cope with complexities within family, peer, school and the community systems. The ICON intervention is present/future focused and goal oriented using a behavioural approach, and uses a process that tries to understand the problem behaviour within a systemic context.

The AMASS multi-agency “Team Around the Child” focus their work on supporting the desired changes and end goals of the intervention.

- (ii) referral to and use of Grosvenor Teenage Fostering Resource Centre.

This centre provides an individualised support packages to children over the age of 10 in foster care. The package could include outreach visiting, school attendance support, out of school activities and short break (respite) care. The package will be built from an assessment of child’s needs and aims to support the child remaining in and making good use of the foster placement. Whilst the focus of Grosvenor is young people in house foster placements, it can also be used to support young people in IFAs if they are within reasonable distance of the borough.

- (iii) use of advice, support and intervention for either the child and/or the carer from the Looked After Children Team, Child and Adolescent Mental Health Service (CAMHS).
- (iv) use of other placement supports including short break care, one off provision, one to one support, therapeutic interventions, additional educational supports for children placed in independent sector placements. (See Divisional Memorandum DM 2006-07 for process for requesting funding of extra support).
- (v) revisiting of the Placement Agreement Meeting and current contact arrangements.
- (vi) viability of the current care plan and permanency objectives and consideration of any changes that may be required.

The outcomes from the meeting will be forwarded to the child’s IRO who may require that the child’s looked after review is brought forward.

The meetings can either be chaired by the allocated social worker’s line manager / team manager or an independent chair (social worker) obtained via the Looked After Children’s Planning Team. These meetings require participation of the carer/key worker, their supervising social worker, the allocated social worker and their line manager. The chair will ensure the child and their parents are supported to attend and participate in the discussion.

The child’s social worker will be supported and encouraged by the Chair of the meeting to consider all options to ensure continuity of placement for the child and to bring these to the Team working with the child. The team will then be asked to consider all ways which the placement could be supported so the child could safely remain with the foster carer /residential unit.

Should a placement with an independent residential provider including residential schools be at risk of disruption it is expected the Head of the Children Looked After Service is alerted in order for senior manager intervention with the placement provider to be considered and if necessary undertaken.

## **D. Unplanned Endings of Placements**

In the event of a placement breakdown for a looked after child / young person

- who is permanently placed via permanency fostering or
- placed with an approved long term foster placement or
- placed in an agreed Bridging to Independence placement or
- when the child has remained in short term placement for more than 6 months, a disruption meeting will be convened by the social worker.

This meeting should be held within 2 weeks after the placement has ended to ensure the learning from the placement is understood and applied to the development and implementation of the child's care plan and new placement. Should the chair of the disruption meeting be of the view that parties require some time before discussing in detail the end of the placement the meeting could be delayed for up to 6 weeks after the placement has ended. However, such a delay will only be proposed by the chair, if a pre disruption meeting has already been held and there is agreement as to what led to the placement ending.

The purpose of the disruption meeting is to:

- Record the sequence of events prior to and during the placement and the events leading to the disruption.
- Ascertain the viewpoints of the parties involved and their understanding of the sequence of the events leading to disruption.
- Learn from the events from the perspectives of the agency and the individuals involved.
- Make recommendations, if any, for the management of the future placement of the child.
- Make recommendations, if any, for social work practice and case management.

Disruption meetings will not be used to apportion blame or reinforce a sense of failure on the part of the child and or the carers.

In the case of a permanent fostering placement, this meeting must be chaired by an independent social worker. The meeting is convened by the allocated social worker. The Adoption Team will secure the independent social worker for these meetings. In all other placements the Team Manager or Deputy Team Manager can chair the meeting. The Looked After Children Planning Team will however, upon receipt of a request from the social worker organise an independent chair for these types of placements.

The disruption meeting should include

- the child's social worker and line manager
- the supervising social worker
- the foster carers/keyworkers
- allocated CAMHS worker (if non-allocated, a CAMHS worker will attend if available)

- a member from the REACH Team if educational factors have played a part in the disruption or if educational arrangements have been disrupted as a result of the placement ending
- other key professionals as appropriate.
- The child's social worker should discuss with the chair whether the birth family should be invited to the meeting. Birth parents should be informed about the disruption.
- The child's social worker is responsible for ensuring that the meeting is fully aware of the child's views and wishes or for arranging support for the child to attend.
- The chair will draw up an agenda and at the end of the meeting summarise the discussion and outline the conclusions and recommendations, both for future practice and future planning for the child.
- In the case of a permanent fostering placement disrupting the minutes of the disruption meeting plus the child's BAAF Form E, the carers' BAAF Form F and all the relevant previous panel minutes must be presented by the child's social worker and the supervising social worker at the Adoption and Permanence Panel.
- In all instances the minutes of the disruption meeting will be forwarded to the child's IRO.

## **E. Requests for placement changes**

### **1. Documentation required**

To initiate a change of placement, the child's social worker's must complete the 'Change of Placement' and 'risk assessment/child profile' proformas. (See Divisional Memorandum 2005/1). These should be agreed by the SW's Team Manager and forwarded to the duty placement officer electronically.

Social workers may also be asked to complete specialist IFA or IRU referral forms if requested.

### **2. Authorisation Levels**

- First placement move in a 12 month period

The first placement move MUST be authorised by an Operational Manager (Children Looked After and Children in Need). It is expected that the relevant Operational Manager will have been alerted to risk of disruption should the placement been in a residential provision.

- Second placement move within a 12 month period

The second placement move MUST be authorised by the Head of Service, Children Looked After.

### **3. Education Arrangements**

Every potential placement move and destination of such moves MUST be discussed with the REACH Team in advance of the actual move. The written comments from the REACH Team should be forwarded to the relevant senior manager making the decision about the placement move. In respect to placement moves for older children beyond compulsory school age the Children Asylum Team or Shaftesbury Leaving Care Service MUST discuss the impact with the relevant Connexions worker and advise the REACH Team Manager.

See Divisional Memorandum DM2006-3 – no child can be moved to a new placement unless the REACH Manager has confirmed that there are suitable educational arrangements in place.

### **4. ICS updating (placement code, advice)**

ICS must be updated by the child's social worker within 48 hours of the placement move.

## **5. Monitoring placement moves.**

- **Supervision**

It is expected social workers will use supervision with their line manager to share any concerns about the stability of a placement for a looked after child. This discussion will include the contribution that a meeting with the supervising social worker / agency or a pre-disruption meeting chaired either by the line manager or independent chair could make to stabilising the placement.

- **Children's Placement Service**

The allocated Placement's Officer will request written feedback from the Independent Fostering Agency / Residential Unit provider following any unplanned move. This will be shared with the allocated social worker, their line manager, the Team Manager and CLA Operational Manager. An overview of the feedback that will include the contributing factors from the carers / provider perspective will be shared with the Placement Stability Task Group in order to inform future practice and policy directives.

- **Placement Stability Task Group**

This multi-agency management task group meets monthly. The meeting is currently chaired by the Assistant Director. Members closely scrutinise the monthly placement stability indicators for looked after children, identify further lines of enquiry to gain a better understanding of what promotes placement stability and what contributes to placement instability and advise on departmental initiatives to improve placement search, selection and support for looked after children.

- **Children and Families Placements Board**

This monthly monitoring meeting is responsible for the reporting of overall expenditure and projection of spend of the Children's Placement Budget. As such the Board is advised of the impact of placement moves on expenditure and will advise the Placement Stability Task Group on further lines of enquiry to undertake.

- **Children and Families Management Team**

The monthly meeting of the Department's senior managers scrutinises all the performance management information on a monthly basis. This includes the placement stability indicators. The meeting will also advise the Placement Stability Task Group on further lines of enquiry to undertake.



## **6. Role of the IRO and proposed changes outlined in the Governments White Paper '*Care Matters – Transforming the Lives of Children and Young People in Care*'**

It is a requirement of the 2004 IRO regulations that the allocated Independent Reviewing Officer is advised of all significant changes. In 2005 Islington specified that this included the request for a change of placement and a change of placement move. Upon receiving this advice from the Children's Placement Service, the IRO will use their powers within the local dispute resolution process if they are of the view the change of placement may breach the child's human rights. In addition the White Paper proposes the regulations specify the IRO is advised

- a. Wherever there is a proposal (which has not previously been endorsed by the IRO) for the child to move from a regulated placement e.g. foster care or children's home to an unregulated placement such as a semi-independent unit or 'independent living', before the age of 18.
- b. Wherever there is a proposal to move a child from a placement in residential care where care plans have previously indicated that the placement is appropriate and the child is settled and going to school.
- c. Prior to a child being discharged from a secure children's home or leaving custody.
- d. Wherever any unplanned change is proposed to a child's accommodation that could significantly disrupt his/her education (e.g. having to move school during the academic-year, or during a programme leading to recognised qualifications e.g. GCSEs in years 10 and 11).



Children's Services  
Children and Families

**Fostering Service**  
Placement Agreement Meeting

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Date of this meeting

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Date of placement

--	--

Child(ren)

Forenames

--	--	--

Family Name

--	--	--

Gender

Male <input type="checkbox"/> Female <input type="checkbox"/>	Male <input type="checkbox"/> Female <input type="checkbox"/>	Male <input type="checkbox"/> Female <input type="checkbox"/>
---	---	---

Date of Birth

DD <input type="checkbox"/> M <input type="checkbox"/> YY <input type="checkbox"/>	DD <input type="checkbox"/> M <input type="checkbox"/> YY <input type="checkbox"/>	DD <input type="checkbox"/> M <input type="checkbox"/> YY <input type="checkbox"/>
--	--	--

Allocated Social  
Worker  
Team


Foster Carer

Name(s)

--	--

Type of Placement

--	--

Address

--

Supervising Social  
Worker

--

**Please note**

**To in house supervising social workers:**

Please complete and forward an electronic version to the child's social worker in order for the information to be included in the Placement Information Record.

**To allocated social workers:**

This form can be used as agenda in chairing the Placement Agreement Meeting. The information from this meeting will need to be recorded in the Placement Information Record.

**Completed and signed Placement Information Records are required to be with the carer / placement provider within 14 calendar days of the commencement of the placement.**

## 1. Introductions and clarification of the purpose of the meeting



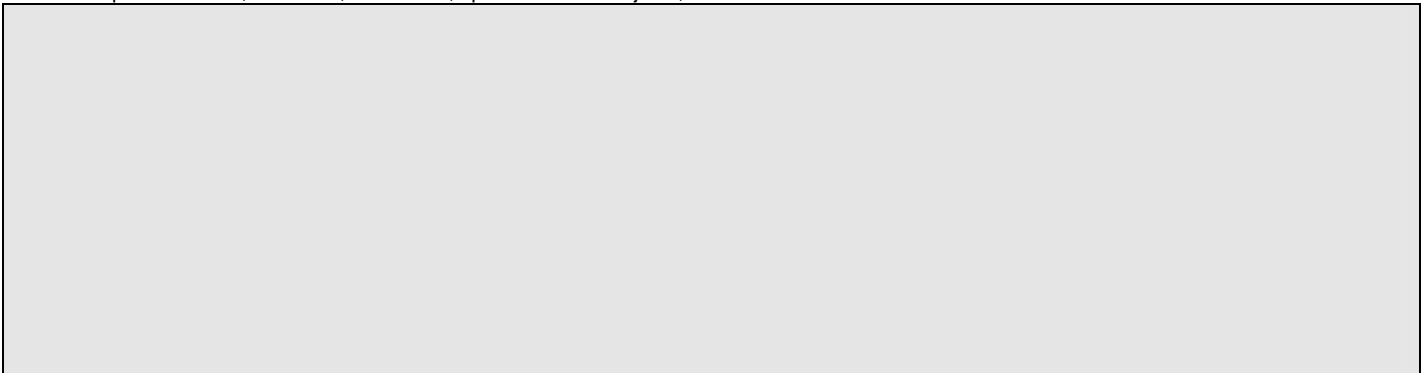
## 2. Apologies

Include arrangements for how decisions from the meeting will be conveyed to the person absent.



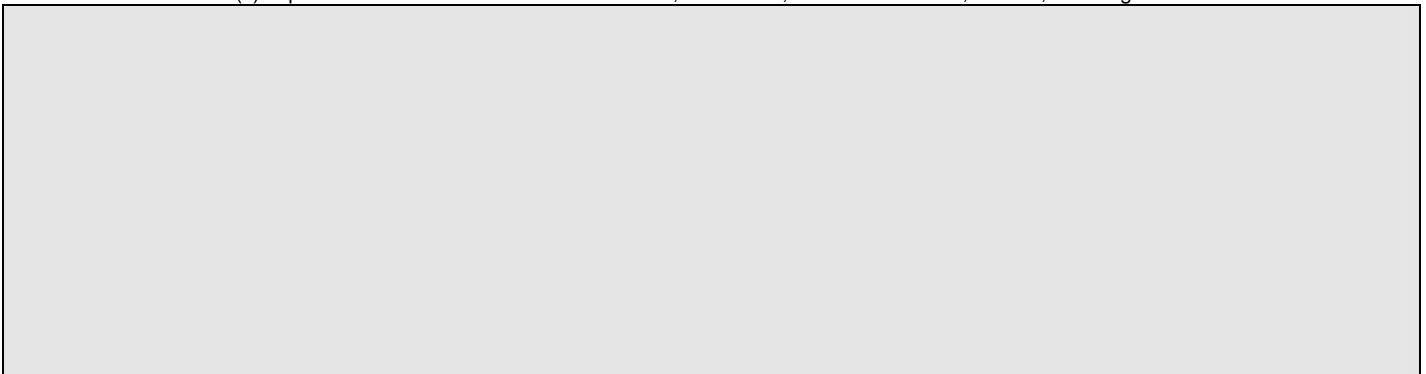
## 3. The child or young person's routine

Details of personal care, bedtimes, mealtimes, special comfort objects, likes and dislikes.



## 4. Household routine

Include the foster carer(s) expectations about issues such as bedtime, mealtimes, household chores, visitors, smoking.



## 5. Day-to-day decisions on the child or young person's care

Specify the extent to which are delegated to the foster carer e.g. hair cuts, going out with friends.

## 6. Confirmation of the household safe caring guidelines

## 7. Pocket Money

Include details of what items the child or young person is expected to purchase from their pocket money and what the foster carer will be responsible for e.g. clothes, toiletries.

## 8. Other financial arrangements

e.g. payments for fares or school dinners &c.

## 9. Arrangements for meeting the child's health care needs

Arrangements for the child to be registered with a new GP and/or dentist if necessary – who will do this? The extent to which consent to medical treatment is delegated to the foster carer. Arrangements for the child's health care assessment.

## 10. Arrangements for meeting the child's education

Arrangements for the child to get to school including any required financial support to the foster carer or child. Arrangements for obtaining a school place if the child needs to change school. Arrangements for the completion of the child's personal education plan.

## 11. The child's needs arising from their race, culture, religion and identity

Any additional support and training needed by the foster carer. Arrangements for the child to practise their chosen religion. Special dietary needs. Additional support needed when the child's first language is not English or they have other communication difficulties. In trans-cultural placements, the arrangements for ensuring the child's identity needs are met.

## 12. Arrangements for contact

Confirmation that a risk assessment has been carried out. Expectations of the foster carer in supervising and/or monitoring contact.

**13. Arrangements for allowing the child to stay away from the placement**

Who they can stay with and frequency of overnight stays



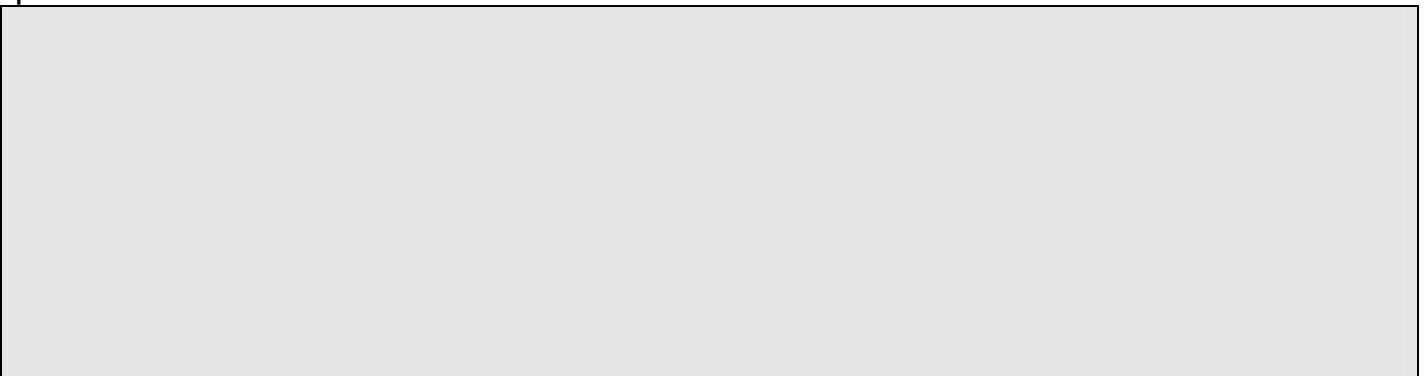
**14. Arrangements for friends visiting and staying overnight with foster family**



**15. Arrangements for the child to continue and develop hobbies and leisure activities.**



**16. Arrangements for meeting any of the child's needs that cannot be met in the placement**



17. Has Social Worker provided foster carer with completed ICS forms and court order, and if not when will this be done?

18. If basic information not currently available to the foster carer in above forms ensure that foster carer is provided with basic information regarding child (e.g. date of birth, any medical issues, diet, religion, culture &c.) and that this is recorded and provided to carer during meeting.

19. Remind all present at meeting what will happen if child/young person goes missing from placement

(Carer to contact police, EDT and out of hours fostering duty).

Date

- .....Parents
- .....Child or young person
- .....Foster carer
- .....Social worker
- .....Supervising social worker
- .....Any other person



Children's Services  
Children and Families

**Fostering Service**  
Placement Agreement Meeting (BABY PLACEMENTS)

<b>Date of this meeting</b>	<input type="text"/>		
<b>Date of placement</b>	<input type="text"/>		
<b>Child(ren)</b>			
<b>Forenames</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Family Name</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Gender</b>	Male <input type="checkbox"/> Femal <input type="checkbox"/>	Male <input type="checkbox"/> Femal <input type="checkbox"/>	Male <input type="checkbox"/> Femal <input type="checkbox"/>
<b>Date of Birth</b>	DD <input type="text"/> M <input type="text"/> YY <input type="text"/>	DD <input type="text"/> M <input type="text"/> YY <input type="text"/>	DD <input type="text"/> M <input type="text"/> YY <input type="text"/>
<b>Allocated Social</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Team</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Foster Carer</b>			
<b>Name(s)</b>	<input type="text"/>		
<b>Type of Placement</b>	<input type="text"/>		
<b>Address</b>	<input type="text"/>		
<b>Supervising Social Worker</b>	<input type="text"/>		

**Please note**

**To in house supervising social workers:**

Please complete and forward an electronic version to the child's social worker for the information to be included in the Placement Information Record.

**To allocated social workers:**

This form can be used as agenda in chairing the Placement Agreement Meeting. The information from this meeting will need to be recorded in the Placement Information Record.

**Completed and signed Placement Information Records are required to be with the carer / placement provider within 14 calendar days of the commencement of the placement.**



## 1. Introductions and clarification of the purpose of the meeting

## 2. Apologies

Include arrangements for how decisions from the meeting will be conveyed to the person absent.

## 3. The baby's routine

Details of personal care, bedtimes, mealtimes, special comfort objects, likes and dislikes.

## 4. Arrangements for meeting the baby's health care needs/ follow up appointments

Arrangements for the baby to be registered with a new GP– who will do this? The extent to which consent to medical treatment is delegated to the foster carer. Arrangements for the baby's health care assessment. Does the carer have dates of follow up appointments for immunisations? Has the carer been given the red book?

## 5. Arrangements for contact

Venue, Times, Days, Supervised?. Expectations of foster carer.

6. Arrangements for meeting any of the child's needs that cannot be met in the placement

7. Has Social Worker provided the foster carer with completed ICS forms and a copy of the court order and if not when will this be done?

8. If basic information not currently available to foster carer in above forms ensure that foster carer is provided with basic information regarding child (e.g. date of birth, any medical issues, diet, religion, culture &c.) and that this is recorded and provided to carer during meeting.

Agreements signed by ;

.....Parents.....

.....foster carer

.....Social worker

.....Supervising social worker

.....Any other person involved



# ISLINGTON

**Children's Services**  
Children and Families

## Fostering Service

### Mother and Baby Placement Agreement Meeting

<b>Date of this meeting</b>	<input type="text"/>		
<b>Date of placement</b>	<input type="text"/>		
<b>Forenames</b>	<input type="text"/> <b>Mother</b>	<input type="text"/> <b>Baby</b>	<input type="text"/>
<b>Family Name</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Gender</b>	Male <input type="checkbox"/> Female <input type="checkbox"/>	Male <input type="checkbox"/> Female <input type="checkbox"/>	Male <input type="checkbox"/> Female <input type="checkbox"/>
<b>Date of Birth</b>	DD <input type="text"/> M <input type="text"/> YY <input type="text"/>	DD <input type="text"/> M <input type="text"/> YY <input type="text"/>	DD <input type="text"/> M <input type="text"/> YY <input type="text"/>
<b>Allocated Social Worker</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Team</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Foster Carer</b>			
<b>Name(s)</b>	<input type="text"/>		
<b>Type of Placement</b>	<input type="text"/>		
<b>Address</b>	<input type="text"/>		
<b>Supervising Social Worker</b>	<input type="text"/>		

**Please note**

**To in house supervising social workers:**

Please complete and forward an electronic version to the child's social worker in order for the information to be included in the Placement Information Record.

**To allocated social workers:**

This form can be used as agenda in chairing the Placement Agreement Meeting. The information from this meeting will need to be recorded in the Placement Information Record.

**Completed and signed Placement Information Records are required to be with the carer / placement provider within 14 calendar days of the commencement of the placement.**

**Placement objectives/Outcomes desired**

This section must include detail on how all identified risk issues will be managed,

**1. Introductions and clarification of the purpose of the meeting**

**2. Apologies**

Include arrangements for how decisions from the meeting will be conveyed to the person absent.

**3. The baby's routine and who will be doing what**

Details of personal care, bedtimes, mealtimes, special comfort objects, likes and dislikes.

**4. Carer's household routine**

Include the foster carer's expectations about issues such as bedtime, mealtimes, household chores, visitors, smoking.

**5. Day-to-day decisions for the baby's care**

Specify the extent to which are delegated to the foster carer, going out with friends.

**6. Confirmation of the household safe caring guidelines**

## 7. Financial arrangements for the baby

Include details of what items the mother is expected to purchase and what the foster carer will be responsible for e.g. clothes, toiletries.

## 8. Financial arrangements for the mother/ parent

e.g. Benefits. Child Benefit, other income

## 9. Arrangements for meeting the baby's health care needs

Arrangements for the child to be registered with a new GP and/or dentist if necessary – who will do this? The extent to which consent to medical treatment is delegated to the foster carer. Arrangements for the child's health care assessment.

## 12. Arrangements for contact – baby's father and others

Confirmation that a risk assessment has been carried out. Expectations of the foster carer in supervising and/or monitoring contact.

## 13. Arrangements for allowing the mother and baby to stay away from the placement

Who they can stay with and frequency of overnight stays

## 14. Arrangements for meeting any of the child's needs that cannot be met in the placement

## 15. Has Social Worker provided foster carer with completed ICS forms and court orders and if not when will this be done?

16. If basic information not currently available to foster carer in above forms ensure that foster carer is provided with basic information regarding child and mother (e.g. date of birth, any medical issues, diet, religion, culture &c.) and that this is recorded and provided to carer during meeting.

19. Remind all present at meeting what will happen if mother leaves from placement  
(Carer to contact police, EDT and out of hours fostering duty).

**Date of review of this plan within 6 weeks.....**

Agreed by;

..... Parent

.....Foster carer

.....Social worker

.....Supervising social worker

.....Date

## **Appendix 2**

### **Conduct of pre disruption Meetings**

Islington social workers and managers are expected to be alert to the early signs that difficulties in a placement may be putting the placement itself at risk of ending early and in an unplanned way. The social worker in such instances may consider with their manager what action may be useful at this time. For example, convening an early looked after review or reconvening the placement agreement meeting. Should a breakdown of the placement look likely, whether the placement is in a family, residential unit or other specialised setting, it is a requirement that a pre-disruption meeting is convened by the social worker.

Should there be a view by the social worker's manager that the process requires an independent social worker to chair the meeting, the allocated case holder should contact the Looked After Children Planning Team. The LACPT will attempt to provide an independent social worker who will meet all the relevant parties, assist them to prepare for the meeting and then chair the meeting itself. LACPT will identify the independent social worker within three working days of the request.

The purpose of a 'pre disruption' meeting in Islington is to:

- Seek the views and understandings from the key people involved regarding the reasons for the current difficulties.
- Acquire any learning from these parties that will helpfully inform placement planning and future care planning for the child/young person.
- Assess the potential for resolution of the current placement difficulties.
- Identify what supports could be offered to the child/young person and/or carer to address the difficulties with a view to achieving a better placement experience, or a planned ending to the placement.

### **Issues to be covered in enquiries before the meeting (via a series of telephone interviews or face-to-face meeting).**

- Confirm basic details for child/young person – name, DOB, gender, ethnicity, religion, legal status.
- Confirm basic details of placement – carers names, type of placement.
- A brief history of the child:  
Young person's LAC history, including previous placements/disruptions.
- Start date of this placement.
- The planning circumstances for this placement. Was it planned or an emergency?
- Carers experience.
- How the child and carer were matched.
- Chronology of significant events leading to the request for the pre-disruption meeting:  
Were there periods when there were lesser or greater turbulence?  
Highlight similarities, differences. Are there any notable influences?

### **Agenda items for the meeting**

- Summarise findings from the Chair's pre-meeting enquiry.
- The progress to date of this placement.
- Social workers – allocated and supervising social workers view of progress.

- Young person's view – wishes/carers view-wishes.  
Agreements/disagreements. Views of significant individual parties including: parents/relatives, other key professionals in the network.
- Child/young person and carers' thoughts about possible solutions? Ways forward or are the issues beyond the resources in the placement network? Are there resources outside that may be useful?  
Is there agreement/disagreement?  
Views of other parties (e.g. parents, allocated social and supervising social workers).

## **Conclusions/Decisions**

- If there is agreement that the placement is about to/has ended?
- What is the short-term plan whilst the new placement is found?
- If the placement is to continue what are the newly agreed placement conditions?
- What are the agreed resources for the support of the child/young person and carers in the immediate/long term – as appropriate?
- Can the placement hold in the short-term? Of so, what is the strategy for the management of conflict between young person and carers?
- If not, what are the specific requirements for the new placement?
- Time scales for achieving actions arising out of decisions and names of those responsible.

## **Definition of Disruption**

Any placement that terminates prior to its planned duration is deemed to be a disruption. For various reasons, it is inevitable that a number of placements will experience difficulties. For a smaller number of placements following the pre-disruption meeting and other intervention there may be a view that it is no longer in the child's best interest for the placement to continue and it has to end. This is a disruption.

When a child's placement disrupts, everyone involved, including the child, the carers, the birth family and professionals are likely to experience conflicting and intense emotions, disappointment, a sense of failure, guilt, anger, rejection and sadness. The child's social worker must ensure that the child is offered support and appropriate counselling and, where appropriate, support services to the birth family. For foster placements, the supervising social worker from the fostering team is responsible for support offered to the fostering family.

Where a placement has ended before a pre-disruption meeting, a disruption meeting should be held. Please note children placed under Adoption Agency Regulations are subject to a separate procedure in respect to disrupted placements.



## **Use of information and records in pre-disruption and disruption meetings.**

The child's social worker must ensure that the chair of the pre-disruption or disruption meeting has access to all the necessary information relating to the child and the placement. All relevant information should be included on the child's ICS record. If not the additional information should be provided by the social worker within five days of the proposed meeting.

In the case of disruption of a permanent placement the child's social worker may be required by the Chair to prepare a report for the meeting including a flow chart mapping key events in the child's life and a brief chronology of the placement.

In the case of pre-disruption and disruption meetings the chair will draw up the agenda and at the end of the meeting summarise the discussion and outline conclusions and recommendations for future planning for the child and for future practice. Copies of the decisions from such meetings should be with the social worker within 5 working days and the record of the meeting itself with the social worker within 20 working days.

Outcomes from the meeting should be recorded in the child's ICS record by the social worker who will also be responsible for the distribution of the minutes to the participants

## **Appendix 3**

### **Frequently Asked Questions about selecting the Placement Codes**

Accurate placement details are important in not only safeguarding children but also ensuring the performance of the Department's work with the most vulnerable group of children in need is properly recorded and assessed.

Central Government has issued detailed guidance on the coding of placements in order to calculate the impact of moves on looked after children and to set targets for local authorities to improve placement stability. This recording requires that updates of placement moves be made within one working day.

The attached frequently asked questions have been developed to assist in understanding placement code selection. However, should you have any queries regarding what code to select please contact the Children's Placement Service who can advise. Each Team Support Officer also has the Guidance issued by Central Government should there be any queries.

*How should a child who has been admitted into hospital for treatment of injury or temporary illness be recorded?*

This placement should be recorded as temporary (T1). There is no time limit on this placement type.

*How should a child on holiday be recorded?*

*This may be with or without their carer but for the purposes of recreation.*

This placement should also be recorded as temporary (T2). There is no time limit for this.

*How should a child who has to move to another carer if their foster carer is going on holiday alone be recorded?*

This placement should also be recorded as temporary (T3) but only if the period away from the main foster care home is less than 21 days and that there are no more than two breaks in the past 12 months. The (T4) code can be used if the 3<sup>rd</sup> or subsequent holidays are of less than 8 days duration. The T codes can not be used if it is 8 days or more duration.

*How should a child who spends a few days at home, before going back their normal foster carer, be recorded?*

This placement should also be recorded as temporary (T4), if the time they spend at home is seven days or less. In order to use the T4 code the short placement has to be planned, with the intention that the child will return to their normal carer and the child must return to their carer.

If the child spends seven days or less at home, but does not return to their usual foster carer for any reason, then both the placement at home and the new placement must be recorded as changes of placement.

If the child is subject to a Care Order and spends eight or more days at home, this must be recorded as a change of placement.

However, if the child is looked after under S20 and returns home for eight days or more, then they must be recorded as having ended care

*What about when the foster carer moves house?*

Only the foster carer's address needs to be changed, if the change means the carer will remain within the LA or remain outside the LA. It will however be a change of placement and a new code if it is move from inside the LA boundary to outside the boundary or vice versa.

*How should regular respite be recorded?*

This move can also be recorded as temporary (T4) should it be 7 days or less and the intention is that the child will be returning to their main placement.

*What about if the child goes home?*

If the child is looked after under Section 20 and the move is planned, intentional and the child returns to the placement in 7 days or less this can be ignored. However, if it is a period of 8 days or more then the child should be seen as no longer looked after.

If subject to a care order then the move will be considered a change, as it will require placement under the Placement with Parents Regulations framework from the outset. (P1), unless it 7 days or less and the child returns to their previous placement. Then it should be recorded as T4.

*What if the child is missing?*

Being missing is a placement and recorded in ICS. Once the child has been missing 24 hours, and they are only counted as returned when they have been back in placement for 24 hours or if the Missing from Care meeting has been convened (whatever is the earliest date) the child should be recorded using one of the M codes. M1 – placed in refuge, M2 whereabouts known M3 whereabouts unknown.

*What if the child is placed with their parents and they are moving with their parents?*

Should the move be into a residential assessment centre then the code R3 should be used? All other placements including mother and baby foster carer should be recorded as P1.

**ICS Help Guides**  
**Changes in Placements**

<b><u>Version #</u></b>	<b><u>Version of ICS Protocol</u></b>	<b><u>Date Updated</u></b>	<b><u>Updated by</u></b>
0.1	1.9.6E	19 August 2007	Tim Parkin
0.2	1.9.6E	29 August 2007	Lucie Heyes
1.0	1.9.6E	07 September 2007	Tim Parkin
2.0	1.9.6C	05 November 2007	Donna Dennard

**Contents of this guide**

1. Where do I record placement details for a Looked After Child moving to a new placement?
2. Using the Placement Information Record exemplar to record a new placement
3. Making the new placement “live”
4. Viewing placement history
5. Multiple placement moves

## 1. Where do I record placement details for a Looked After Child moving to a new placement?

All new placements and changes in existing arrangements can only be recorded from within the Placement Information Record exemplar. This includes:

- 1) the placement details of a child becoming looked after (creating the first placement)
- 2) a change of carer/placement for an existing child looked after
- 3) an existing carer and child looked after, moving address
- 4) respite care provision, temporary placements and
- 5) a child looked after being placed with family members

A new PIR must be recorded for each change of placement, carer or placement address. The PIR is the record which replaces the previous *Placement Plans Part 1&2* and *Essential Information Records 1&2*.

### 1.1 Children becoming Looked After: Creating the first placement

When it has been agreed that a child can become looked after, a 'Create legal status and placement' Task will appear in your worktray. To access the PIR and add the details of the child's placement pick up this task. Go to the blue "Current Episode of Care" tab, which is where you will find the option to 'Create a PIR'. Click this link to create a PIR.

☞ **Now see instructions in Section 2 on how to record the placement details And complete the Placement Information Records.**

### 1.2 Recording new placement details for existing Looked After Children

To open a new PIR to record changes in carer, address and/or respite care, pick up the "current episode of care" task in your worktray. This is the hub of information where you can update any details about the child looked after

Check you are on the black 'Looked after details' tab then the blue "Current Episode of Care" tab, which is where you will find different options for creating a PIR.

#### Option (a): 'Update placement'

Click this if you are recording changes to the current placement, such as the carers and child moving address.

#### Option (b): 'Create a PIR for a new placement'

Click this if you are recording a new carer/placement.

#### Option (c): 'Create a PIR for a new temporary placement'

Click this if you are recording respite carers or a temporary arrangement.

The screenshot displays the 'Child Looked After' system interface. On the left, a navigation menu includes 'Create Care Plan', 'Start Pathway Plan', 'Child Looked After' (highlighted in a red box), 'CLA Review', 'Update Care Plan', 'Personal Education Plan', 'Assessment and Progress Record', and 'Leaving CLA'. The main content area shows the 'Current Episode of Care' tab, which is active. Below this, there are sections for 'Active Period of Care' (CLA Legal Order) and 'Placement' details. The 'Placement' section includes fields for 'Started On', 'Type of Placement', 'Carer Name', 'Address', 'Postcode', and 'PIR'. The 'PIR' field is currently set to 'Placement Information Record (Completed)'. At the bottom of the page, there are three links: 'View Full Details', 'Update Placement', and 'Create a new Placement' (highlighted in a red box).



Now see instructions in Section 2 on how to record the placement details  
And complete the Placement Information Records.

## 2. Using the Placement Information Record exemplar

When you open a new Placement Information Record, you update the placement details in the section called “Placement Details”. At the bottom of the page click on the link called [Update this Placement Record](#)

The screenshot shows a web form titled 'Placement Information Record'. On the left is a navigation menu with categories like 'Placement Details', 'Carer Details', 'Provision of information to carers', etc. The main area is titled 'Placement Details' and contains several sections: 'Details' (Date Placement began: 14-Mar-2007, Type of Placement: F2 - Placement with other carer), 'Carer Details' (Carer Name: Foster Carer: Jane Jones, Address: 25 Aynthorpe Road, Leeds), 'Caution' (Is there anyone who should not know address? Yes), and 'Out of Hours Contact' (Name, Telephone). At the bottom, there is a 'Reason for Placement' field and a red circle highlighting the link 'Update this Placement Record'.

Under Carer Details click the relevant link to select a person for a (family member or foster carer) or select a care provider (for residential placements where there will be several care staff):

The screenshot shows a box titled 'Carer Details' with two blue links: 'Select a Person as the Carer' and 'Select Care Provider'.

You will need to search for the carer or care provider in the system and select them. If the carer or care provider is new to Islington and has not been used before, their details may need to be set up on the system. Your Team Support Officer will arrange this with the HelpDesk.

### ***If you cannot find the carer's details in ICS.....***

Before you are able to record the details of a new placement (including placements with family members) the carer/s must exist on ICS. All Islington carer's are listed, however external resources and family members may not be. Before trying to record any new placement details, check to make sure the carers are listed on ICS. With foster carers it is important to note there is a difference with searching for an individual carer and a family foster carer. If there is more than one individual in a family that is registered then the placement is set up against the family, for example, John & Julie Smith, the Smith Family are set up as the foster carer not John or Julie.

If they are not, contact the Service Desk, see below the details required. Note: This applies to family members, a family member that is shown in the relationship section of the child's demographics, does not mean they are set up as a carer on ICS.

### **New Placements Requests – Children's Service Desk**

When requesting a new placement the Children's Service Desk requires detailed information to set the placement up. This will save time in creating the placement if all the details below are supplied.

Name: Carers/homes full name

**NOTE:** If the foster carer is two people, e.g husband and wife. then they have to be set up as a family. Please

Address: Full address including postcode

Date: Start date for the carer or home (this necessarily isn't the placement start date it is the start date for the registration)

Placement Code:

A3 – Placed for adoption with consent with current foster carer  
A4 – Placed for adoption with consent not with current foster carer  
A6 – placed for adoption with placement order not with current foster carer  
F1 – foster Placement in LA – Rel/Friend  
F3 – Placement in LA – foster Carer Agency  
F4 – Foster Placement outside LA – Rel/friend  
F5 – Placement out. LA – foster carer by LA  
F6 – Placement out LA – Foster Carer Agency  
H1 – Secure unit inside LA boundary  
H2 – secure unit outside LA boundary  
H3 – children's homes located inside LA  
H4 – children's homes located outside LA  
H5 – Res accom not subject to childrens homes res.  
M1 – Refuge under S51 CA  
M2 – whereabouts known (not in refuge)  
M3 – Whereabouts unknown  
P1 – Placed with parents. Other parental resp.  
P2 - Independent living (flat lodgings, visiting support, onsite support)  
P3 – Residential employment  
R1 – Residential Care Home (reg. Homes Act)  
R2 – NHS/Health trust or other Estab.  
R3 – Family centre/mother and baby unit  
R4 – Youth treatment centres  
R5 – Y.O.I. or Prison  
S1 –Residential schools

1. For all new placements CPS will be instructed to record a case note on the child's record stating the correct provider, address, and placement codings
2. A specific case note type will be set up for this purpose called "Placement Instruction from CPS"
3. The allocated social worker must copy the exact codes onto the child's Placement Information Record
4. As part of monitoring the recording of PIRs within 2 working days of placement moves, the Performance Team will audit every placement to ensure that the social work records match the instructions from the CPS, so that any errors are quickly identified and corrected

If your carer is already listed on ICS, the selected Carer/Care Provider's name and address will be displayed as shown in this example:

Carer Details	
Carer Details	Foster Carer: Darlene Jacobs The Willows Main Street Smalltown Leeds LS12 4AB
▶ Select a Person as the Carer	
▶ Select Care Provider	

There are five more pieces of information you need to record on this page about the new placement. They are:

- 1 The intended or actual start date of the placement,
- 2 The placement type, (select from the drop down options)
- 3 The distance in miles from the child's home, (enter the number)
- 4 Details of any person who should not know the new placement address, and
- 5 the out-of-hours contact.

When these are complete click on the **Update** button at the top left of your screen, this information will then populate the PIR.

The rest of the PIR sets out the essential information that carers will need to know in order to look after the child. The PIR needs to be filled in with as much information as you have available before the placement starts and given to the carers when the child is placed. The PIR can be taken to the Placement Planning Meeting, where further details can be completed. Following the meeting you should finalise the PIR.

When the PIR contains the entire information required click on the **Finalise Assessment** button. Remember to enter today's date on the first page of the record.

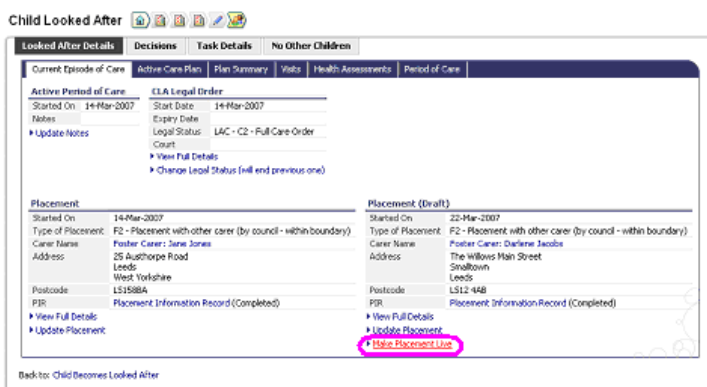
**Tip:** When changes occur and you need to update your PIR, the information from the most recent PIR will copy through into the new revision, for you to amend as required.



### 3. Making the new placement “live”

The ICS software has been designed to enable you to draft a PIR as early as possible before the child actually moves. This is intended to help with getting all of the required information together into the PIR.

When you create a PIR for a new or temporary placement, the PIR for the new placement will display as a “Draft” alongside the existing placement. until the placement is made ‘live’. On the day the child actually moves into the new placement click on the link called [Make Placement Live](#).



^ Existing Placement ^

^ New Placement (not yet live) ^

When the new placement has been made ‘live’, the previous placement will be ended and no longer display in the Current Episode of Care tab, it will be replaced by the new placement details. You do not need to end the old placement manually.

You will also be able to see this change of address and carer in the ‘personal’ tab in the child’s demographics.

At this point you may need to take a look at your relationships and make sure they are all up to date.

## 4. Viewing Placement History

The **Period of Care** tab summarises all of the placements, including temporary placements, and all legal orders for each episode of care.

These details are integrated with the provisions tab in Swift, therefore you should see all of the child's previous placements with the correct dates on this screen. If the details are incorrect it may mean that there is historical information missing from Swift which will need to be back entered. Please ask your Team Support Officer to report any inaccuracies to the HelpDesk.

If you want to view the child's placement history; pick up the 'current episode of care' task in your worktray and click on the blue 'Period of care' tab.

OR

Go into the CLA tab in the demographics and click the 'Period of care'.

**Child: Rosie Trent** ≈ 6 years **CLA**

**Child Looked After**

**Reportable Episodes of Care**

ID	Started On	Reason Code	Legal Status	CIN Code	Placement Code	Ended On	End Reason
1	14-Mar-2007	S - Started to be CLA	C2	N1 - Abuse or neglect	F2	22-Mar-2007	X1 - New Episode
2	22-Mar-2007	P - Change of Placement	C2	N1 - Abuse or neglect	F2		

**Placements**

Started On	Ended On	Address	Postcode	Type	Short Break?	Temporary?
14-Mar-2007	22-Mar-2007	25 Austhorpe Road, Leeds, West Yorkshire	LS158BA	F2 - Placement with other carer (by council - within boundary)	<input type="checkbox"/> No	<input type="checkbox"/> No
22-Mar-2007		The Willows Main Street, Smalltown, Leeds	LS12 4AB	F2 - Placement with other carer (by council - within boundary)	<input type="checkbox"/> No	<input type="checkbox"/> No
24-Mar-2007	25-Mar-2007	101 The Street, The Area, Leeds	LS6 8HQ	T1 - Temporary periods in hospital	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes

**Legal Orders**

Started On	Legal Status	Expiry Date	Actual End Date	Court
14-Mar-2007	LAC - C2 - Full Care Order			

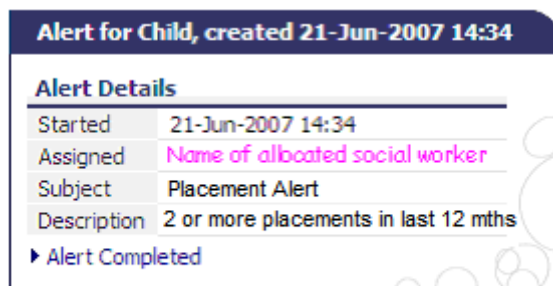
Back to: Child Becomes Looked After

## 5. Multiple placement moves

If the child/young person has had more than two placements within the last twelve months, an alert will appear in the worktray of the allocated social worker:



Remember to click on **Alert Completed** when you have read each alert. This will prevent your worktray becoming full up with alerts.



Once you have read the alert remember to click on 'Alert Completed' to remove it from your work tray

The alert will also display in the **Important Information** area of the **Personal** tab within the child's demographics:





**ISLINGTON**

***Children and Families Service  
Divisional Memorandum***

***Social Services Department  
338 – 346 Goswell Road  
London, EC1V 7LQ  
Tel: 020 7527 8912***

**17/01/05**

**Reference: DM2005-1**

**Date effective: 20<sup>th</sup> January 2005**

**TITLE:**

- Decision making about children becoming looked after
- Change of Placement Requests.
- LAC Risk Assessments

## **1. Origins**

### **1.1 Decision making about children becoming looked after**

The decision to look after a child is perhaps one of the most serious that can be made. For some children, becoming looked after is a good thing, in that it means they achieve outcomes they would not otherwise have done. However, for too many children the reality of the care system means that it is far from a positive experience and can result in poor outcomes – and possibly worse outcomes than if they had remained at home with the right sort of support.

It is therefore imperative that local authorities have a robust process in place for making such decisions. Islington is currently reviewing this process. As a first stage, the referral process to the Looked After Children Planning Team is changing to enhance the role and responsibility of Team Managers in the decision making process.

The instructions outlined below build on the existing procedures in the Department's LAC Procedures Manual, but amend them to clarify expectations of Team Managers and introduce a number of new requirements.

### **1.2 Change of placement requests**

When a child is looked after, changes of placement are the most damaging experiences that will happen to them. Changes – especially unplanned ones – can undermine the stability in a child's life. Such stability is essential if a child is to thrive, have good outcomes and be happy. Therefore, changes of placement must be kept to an absolute minimum. Where they are necessary they must be carefully planned, involve the child and carers and involve key partner agencies such as health and education.

### **1.3 LAC Risk Assessment Policy**

Assessing and managing risk is implicit in the work we do with children and families every day. For looked after children it is essential that a full assessment of risk is made before a child becomes looked after and that this is then reviewed regularly. This will help to ensure that the child is matched with the right placement, that their needs will be identified and met and that all involved are safe. It will thus promote placement stability.

## **2. Instructions**

### **2.1 Decision making about a child becoming looked after**

1. When a social worker is of the professional view that a child should be looked after, they must consult with their Deputy Team Manager (DTM). If the DTM concurs, the DTM must approach their Team Manager (or another Team Manager in the absence of their own).
2. The Team Manager must evaluate all the available information and come to a professional judgement on whether they think the child should become looked after. To do this they must take particular account of:
  - The Core Assessment.
  - The chronology
  - Evidence that a full range of alternatives has been considered and weighed, and that service options in the Council's Children's Services Directory have been explored. The social worker will need to provide evidence of this in the referral form.
  - The possible negative impact for the particular child: impact on educational arrangements, health arrangements, family and social ties.
  - The evidence that becoming looked after will actually achieve the desired outcomes.
3. The Team Manager must make a written statement in which they summarise their professional opinion and the grounds on which they have based it, with supporting evidence. This will be included in the referral form to LAC Planning Team if the Team Manager's view is that the child should be looked after.
4. If the Team Manager's professional view is that the child should be looked after, then the Team Manager is responsible for making the referral to the LAC Co-ordinator for children in Year 5 or less or the BLA multiagency panel for children in Year 6 or above and their younger siblings if included in the request. The DTM or social worker will complete the majority of the request form. The Team Manager will then complete their statement in the request.

5. Only a Team Manager can initiate a referral to the LACPT.
6. The Team Manager and LAC Co-ordinator will then discuss the case in the case of younger children. The LAC Co-ordinator might also discuss the case with the social worker and/or DTM to obtain more information. In the case of older children the request is presented by the social worker and one of their Managers to the BLA panel, which meets weekly.
7. The LAC Co-ordinator and the BLA panel are responsible for providing an objective challenge to ensure that all issues have been considered and that becoming looked after really is in the child's best interests. The LAC Co-ordinator / BLA panel then makes the final decision about whether the child should be looked after. This may involve the chairing of family support meetings and or legal gateway planning meetings in cases where care proceedings are being considered. The LAC Co-ordinator / Chair of the BLA panel will then summarise in writing the rationale for their or the Panel's decision.
8. If the Team Manager is seriously concerned about the LAC Co-ordinator's / BLA Panel decision, they should raise this with the Manager of the LACPT. If, following this, they continue to be concerned, they should raise their concerns with their Operational Manager/ Head of Service. If their Operational Manager / Head of Service shares the concerns, the Operational Manager must then discuss with the Service Manager for Quality and Performance to agree a way forward.
9. The "Request for Child to be Looked After Referral Form" for the relevant age groups and circumstances is on ICS.

In addition to the above:

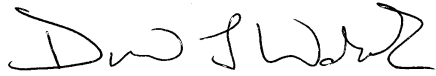
- From 1<sup>st</sup> April 2005, no child can become looked after without a Family Group Conference having first been held (except in extreme emergencies).
- No referral should go to the LAC Planning Team without a completed Core Assessment (again, except in extreme emergencies) and chronology. This applies to the Assessment Teams, Whittington Team and Disabled Children's Team immediately, and to the Child Care Planning Teams with effect from 1<sup>st</sup> February 2005.
- No child of school age should become looked after without consultation with the relevant person in Education to identify impact on education. Negative impact on education arrangements will be a major contra-indicator. This will be undertaken by the duty LAC Co-ordinator or the Education representative on the BLA panel.

## **2.2 Changes of placement**

A request for change of placement must be recommended by the Team Manager, with relevant further authorisations if the move is within 12 months of last change of placement.

## 2.3 Risk Assessment

- A risk assessment as outlined on ICS needs to be completed prior to a child becoming looked after.
- It must then be reviewed every time a placement is requested and prior to each statutory review.



**David Worlock**  
**Assistant Director**  
**Children & Families Service**

DivisionalMemo2005-1



# ISLINGTON

**Children and Families Service**  
**Divisional Memorandum**

Children's Services Department  
Laycock Building  
Laycock Street  
LONDON  
N1 1TH

Tel: 020 7527 8912

19/04/06

Reference: DM2006-3

Date effective: 20<sup>th</sup> April 2006

**TITLE: School Attendance and Looked After Children**

## **1. Origins**

Getting a good education is not only a fundamental human right; in many respects, it holds the key for individuals' future happiness and quality of life. This is why good parents strive so hard to support their children in education.

This is true for all children, but has a particular relevance for looked after children. For children who have experienced such disadvantage, education can be the means through which they are able to break free and create a positive and hopeful life for themselves.

Yet we know that many looked after children still fare poorly in the education system compared with their peers: more changes of school, poorer exam results, fewer going onto further and higher education.

One of the causes of poor educational outcomes are the high level of non-attendance of too many looked after children.

As good corporate parents, we are planning to reverse this and ensure our children do attend. This will not be an easy task as the circumstances of some young people are not straightforward. To achieve it, co-operative work will be needed by all involved, including social workers, foster carers, residential staff, teachers, REACH.

Our aim is to create an urgency and determination to the non-attendance of our looked after children that any good parent would display in respect of their own child.



Set out below are new instructions that clarify the importance of having robust educational arrangements in place for children and young people and make it clear that such arrangements are as important as having “care” arrangements in place. The instructions also introduce Attendance Action Plans for use with young people where there are particular attendance concerns. These are being introduced because recent experience has shown that some children’s non-attendance is lasting much longer than it need to because of lack of clarity between carers, social workers and educational professionals about respective responsibilities and expectations, which can result in no one taking the lead or responding with urgency.

## **2. Instructions**

### **2.1 Becoming Looked after**

Except in extreme emergencies (usually requiring PPO or EPO) no child or young person is to become looked after without there being robust arrangements in place for that child’s education. Either the manager of REACH or the Head of Education Welfare and Social Work Service needs to give agreement that the arrangements are robust.

### **2.2 Change of Placements**

No looked after child or young person is to change placement unless there are robust arrangements for their education in place for the new placement. The manager of REACH will be responsible for giving agreement that the arrangements are robust in the case of school age children. In the case children beyond school leaving age the relevant Connexions worker must be consulted and the REACH Team Manager advised.

### **2.3 Absence for holidays**

No agreement will be given for children to miss school in order to go on holiday.

### **2.4 Medical Appointments**

Every effort should be made to arrange dental and medical appointments to take place outside of school hours. On-going CAMHS appointments must take place outside of school hours.

### **2.5 Core Arrangements for Monitoring and Notification of Non-attendance**

Managers in the Children and Families Service will continue to receive regular attendance reports from the REACH Team Education Welfare Officer. This report is intended to guide discussions and actions that need to be that taken for each looked after child. When managers receive these notifications, they are required to discuss the matter with the social worker to ensure that all appropriate action is being taken. It is important to note that at the point of notification, this data is **provisional**; however, it is an indicator of level of attendance and therefore needs to be acted upon.

Absence notifications will continue to be sent to the following professionals at these trigger points by REACH EWO

<b>Days Absent</b>	<b>Professionals Notified</b>
<b>3</b>	Social Worker
<b>5</b>	Social Worker, Deputy Team Manager, Team Manager
<b>10</b>	Social Worker, Deputy Team Manager, Team Manager, Operational Manager, Head of Service
<b>15</b>	Social Worker, Deputy Team Manager, Team Manager, Operational Manager, Head of Service, Assistant Director
<b>20</b>	Social Worker, Deputy Team Manager, Team Manager, Operational Manager, Head of Service, Assistant Director
<b>25</b>	Social Worker, Deputy Team Manager, Team Manager, Operational Manager , Head of Service, Assistant Director

Other relevant professionals and services are included in these notifications when appropriate.

## **2.6 Attendance Action Plans**

It is expected that in the majority of cases where non-attendance is notified, the relevant social worker, carer, school and REACH will be able to resolve the matter quickly and effectively. In some case, such as a definite illness or injury, the non-attendance will resolve itself.

However, there will be some cases where there is real concern about the nature and quantity of the non-attendance. These are the cases, which will require formal Attendance Action Plans. REACH Team will identify children with attendance issues, for whom Attendance Action Plans will need to be completed, implemented, monitored and reviewed. These plans must include details of the concrete and specific actions that need to be taken to address the poor attendance of the targeted child, by whom and when.

## Attendance Action Plan Procedure

A flow chart has been developed to guide and explain the process of addressing poor attendance of looked after children and is attached. This flowchart shows the daily information coming from Welfare Call to the REACH EWO.

- Looked after children with attendance issues warranting an Attendance Action Plan (e.g. several unauthorised absences, exclusions, and lack of school place as a result of emergency placement change) will be identified by REACH.
- The REACH EWO will contact the social worker to negotiate who is the most appropriate lead professional for the case (this can be, for example, the social worker, designated teacher, member of REACH, foster / residential carer). It is important to note that the lead does not complete all of the work. The lead is the professional who co-ordinates the actions of the people involved and ensures all strategies are put in place.
- The lead professional is to complete the Attendance Action Plan within **two days** of the child becoming targeted.
- The REACH Team Manager and the REACH EWO will assess the quality of the Plan.
- If the plan is not deemed satisfactory further consultation with the lead professional will take place to improve the plan.
- If the plan is satisfactory the lead professional will then co-ordinate the implementation of the identified actions and strategies.

The attendance plans need to be constantly monitored and reviewed. The REACH Team Manager and EWO will have weekly meetings to review targeted looked after children and their Attendance Action Plans. Attendance Action Plans should also be reviewed by the allocated social worker and their manager in formal supervision. If attendance improves it will continue to be monitored with the usual systems. If attendance does not improve further negotiation to identify and implement different plans and educational provisions will be held between REACH Team Manager and the relevant Team Manager.



**David Worlock**  
Assistant Director  
Children & Families Service

DivisionalMemo2006-3



# ISLINGTON

## **Children and Families Service** **Divisional Memorandum**

Children's Services Department  
Laycock Building  
Laycock Street  
LONDON  
N1 1TH

Tel: 020 7527 8912

Reference: DM2006-07

**Date effective: 28<sup>th</sup> June 2006**

**TITLE: Procedures for the application for 'extra' funding for Independent Sector (P&V) placements for looked after children.**

## **2. Origins**

Islington Children's Services has been concerned for about the amount of extra funding being provided for children's placements in the independent sector (i.e. that provided by private / voluntary fostering agencies and children's homes), above the original fee agreed with the provider. In the course of the year this can add up to many tens of thousands of pounds. It is therefore important to have in place clear processes for how such extras are agreed and negotiated. It is important to ensure that any extras are warranted in terms of the needs of the child, and that the extras proposed will actually achieve the desired outcomes for the child. The extras also need to represent good value. This Memorandum sets out clear processes which need to be followed both by staff within the Children and Families Service and the independent sector providers.

What constitutes an extra depends on what services the basic weekly payment to the provider covers; so it can vary from provider to provider. However, extras can include:

- One-off provisions (e.g. extra clothing, bicycles, school trips/holidays etc)
- 1:2:1 support or waking night staff for specific periods of time
- therapeutic services
- educational support.

Extras do not include:

- Contact services (for which there is a separate Divisional Memorandum – DM2006-05, 8<sup>th</sup> May 2006).

## 2. Instructions

### 2.1 New procedures

#### One-Off Payments

Team Managers may authorise one-off payments of up to **£200 per child per year**. If Team Managers do authorise such payments they must notify the CPS duty immediately with full details of the child and the provider, the purpose of the payment & what is being purchased. Team Managers must send a letter to the provider authorising the purchase and a copy of this letter should be sent to CPS duty.

#### Other Requests

All other requests for extra funding must follow the agreed procedure as set out below:

1. Section One of the 'Request for 1:2:1 support & other extras' pro forma must be completed by the provider and then e-mailed to the allocated social worker with a copy emailed to CPS duty.
2. Section Two must be completed by the allocated or duty social worker and then e-mailed to their Team Manager.
3. The relevant Team Manager must complete Section Three and then e-mail this to CPS duty.
4. The CPS officer will complete Section Four of the request pro-forma by undertaking negotiations with the provider about costs. **Social workers must not undertake this negotiation**. CPS will also explore if the proposed provision should be provided through the agreed fees as per the contract and whether or not the request could be provided via any of our in-house services. Upon receipt of the completed pro forma from the Team Manager, the CPS officer will e-mail a completed form to the relevant Operational Manager with budget holder responsibility for the child or young person.
5. The Operational Manager must then complete Section Five of the pro forma with their decision and e-mail this to the CPS Team Manager or, in their absence, the Service Manager for Quality and Performance.
6. If any extra provision is to last for more than four weeks then the relevant Operational Manager, having completed Section Five, must e-mail the form to the Head of Service for agreement. The Head of Service, having completed Section Six with their decision will then e-mail the form to CPS Team Manager, or in their absence, the Service Manager for Quality and Performance as well as the relevant Service Manager.
7. The CPS Team Manager (or in their absence the Service Manager for Quality and Performance) will then write to the provider with the decision of the budget holder.

**All extras will only be agreed for a time-limited period and must be monitored and reviewed by the allocated social worker.**

**The provider may only begin an extra provision once they have received written agreement from either the Manager of the Children's Placement Service or the Service Manager for Quality and Performance.**

If in the exceptional circumstance that the provider wishes to request that the extra provision be continued then the procedures laid out in the request for continuation pro forma must be followed and the form completed .

**3. Cascading these instructions**

Team Managers are asked to ensure that all staff are fully aware of the changes outlined above and that a copy of this is available to staff.



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Children & Families Service**

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