

# APPENDIX 5

## **Protocols for STEP UP, STEP DOWN and step across for Team Around the Family (TAF) and statutory Children's Social Services (Carmarthenshire)**

**October 2017**

**Reviewed: October 2021**

### **1. Introduction**

The recent Social Services and Well Being Act focuses on the well-being of people and future generations, alongside the promotion that child protection is everyone's business. The emphasis is clearly on early intervention, preventative services, and access for people when they need it; in the way that they need it.

'Everyone is entitled to well-being, and everyone has responsibility for their own well-being, but some people need extra help to achieve this, giving people a stronger voice and greater control over their lives. Well-being means a person is happy, healthy and is comfortable with their life and what they do.' ('The Right Help at the Right Time' CYSUR Doc April 2017)

Team Around the Family, (TAF) is an approach that coordinates services together to support children, young people, and families when they need extra help to maintain happy health and successful lives. We work with children and young people from 0 until 25.

The approach means that TAF work with families acknowledging that the best 'expert' regarding the family is themselves. It listens and assists families to build on their strengths and identify the personal outcomes they wish to achieve. It is part of the preventative services that help to support families facing adverse circumstances often experienced by us all in our day to day lives, but where a family needs extra support, help and guidance.

It is a voluntary approach, and a family can withdraw at any time, or refuse the service.

The service does not:-

- Watch or monitor families.
- Check food cupboards in the home.
- Provide safety checks regarding home conditions.
- Provide respite.
- Provide childcare.
- Operate taxis.
- Provide money.

To work with a family, there must be clearly identified outcomes agreed with the family and reflecting their own wishes and needs. Because of this TAF do not engage

with a family if they do not want the team involved. The family can refuse any of the agencies that make up a TAF plan access to their home; and refuse to share information with any agency. This is overridden (in line with the All Wales Child Protection Procedures) where there are concerns regarding a child being exposed to the risk of significant harm. Families are informed of this. This is the same for any agency that is part of the TAF plan. Where concerns arise concerning the safety of a child the **step-up** procedure is followed.

Within the Mid and West Wales Collaboration Document, 'The Right Help at the Right Time' five categories of support have been identified: -

- Universal support,
- Enhanced support,
- Targeted support,
- Assessment for care and support,
- Protective support.

TAF can operate within the enhanced support and targeted support arenas. However it primarily works in the targeted support arena with families and young people who are experiencing difficulties and need a coordinated response.

## **2. The aim of the protocol**

The aim of this protocol is to outline how cases are stepped up, down or across appropriately between professionals within the agencies involved with the TAF approach and other services, to provide effective support for families, whilst ensuring children are safeguarded.

The desired outcome is that all interventions are proportionate to the child or young person's need and at an optimum level to have the maximum impact and benefit for them and, where appropriate, their family, using resources in the most efficient way. The child or young person and their family should experience the process as seamless and without delay.

**Step up** is where a service request is made to Children's Social Services in relation to a child or young person currently supported by a TAF support plan.

**Step down** is where a request is made by the statutory service in relation to a child currently supported by them, for a coordinated, multi-agency preventative response that allows the case to be closed to the statutory service.

**Step across** is where a person has contacted the Central Referral Team, and the threshold for statutory intervention has not been met but the family are requesting support. CRT will use Part One of the JAFF to refer direct across to TAF.

## **3. The Objectives of the Protocol**

- To ensure professionals work collaboratively for the best interests of the child, young person or family, in an open, honest and transparent way.
- To ensure a safe and smooth transition between services.
- To avoid delay in case acceptance and allocation.
- To minimise risk and help families identify the outcomes they wish to achieve.

- To avoid duplication of services and maximise resources.
- To avoid bringing families into statutory services unnecessarily and encourage them to live as independently as possible.

#### 4. **Referrals to TAF.**

The needs of the child or young person currently being supported by specialist services such as Children's Social Services may diminish or change and require a non-statutory intervention for a period.

All referrals that come into TAF should be on Joint Assessment Family Framework Part 1. These can be found on the TAF page on FIS website [www.fis.carmarthenshire.gov.uk](http://www.fis.carmarthenshire.gov.uk) . Allocation meetings are held weekly at which the TAF coordinator is appointed, and possible supporting agencies identified.

The coordinator will arrange which agency will hold the keyworker role; the individual agency identified will select from their staff who will be the keyworker. The keyworker is responsible for completing part 2 of the Joint Assessment and build a plan of support for the family or young person. This plan is regularly reviewed with the family, at least 3 monthly.

Some agency interventions are time limited to a certain number of sessions and others can support for longer. The overall aim is to support a family to a position when they can once again function without outside support by building links within the wider family and community. Some people will require help on and off throughout their lives and families can be referred more than once.

#### 5. **Process**

It is important that families receive the appropriate level of services dependant on need and assessment of risk, as well as to ensure that the voice of the child, young person and family is not lost and they are full partners with any services offered.

TAF conforms to the Mid and West Wales approach as described within the CYSUR document 'The Right Help at the Right Time' and will use the eligibility for support in this document as the basis of discussion in step up/ step down procedures.

There are a variety of ways in which to meet the needs of children, families, and young people within the TAF approach. Where a particular service is over prescribed, every effort will be made to identify an alternative source of support for the family if they prefer, rather than wait for a particular service.

(The pathways for STEP UP, STEP DOWN and ACROSS are found at the end of this document.)

## 6. Step Down Cases

This is primarily for cases open to social services where the need for an acute high end service is no longer the case but the family still have a need, **and** are accepting of support. For this process to work effectively it is important that there is good communication between the TAF coordinators, the family, and the Social Work team. The family must be able to manage their own safety plan as TAF do not manage safety plans.

### For Cases open to social services, less than 8 weeks.

Where a case has been open to an assessment team, for less than 8 weeks, to complete an investigation, or an assessment, and the decision at the end of this process is that there is no further need of social service intervention; the case should be closed to the department as no further action is required.

However, should the family in discussion with the social worker wish – or need to receive ongoing support they should be assisted to complete Part 1 of the JAFF and proceed as below, or simply be provided with the paperwork for them to make the choice of self- referring to TAF.

If the Social Worker is supporting the family to complete the Part 1 of the JAFF, they should help the family to identify clear outcomes for the help they would like and include the families consent. Where the family have given verbal consent the social worker needs to note this on the form. This form is to be sent to the TAF box; at [TAF@carmarthenshire.gov.uk](mailto:TAF@carmarthenshire.gov.uk) . If not fully complete, the form will be returned to social worker for finishing.

### For Cases open to Social Services for 8 weeks or more.

Where a case has been open to the social services either at Assessment Team, or Child care Team, for 8 weeks or longer

- The Social Worker needs to fully complete Joint Assessment Family Framework (JAFF) **part 1** form and to include clear outcomes for intervention identified with the family; signed family consent for the referral and information sharing. This form is to be sent to the TAF box; at [TAF@carmarthenshire.gov.uk](mailto:TAF@carmarthenshire.gov.uk) . If not fully complete, the form will be returned to the social worker. This part of the process is important as it is the first stage of the assessment process, before sending across it needs to be shared with the family who need to sign the consents to TAF being involved and their information being shared with others.
- In order to ensure transparency in the partnership work undertaken by TAF with families, no extra information in separate e mails will be included in our process. There is a section for the professional to express their views regarding the case, but these will be shared with the family. TAF work is transparent, open and in partnership with families and young people.
- The referral will come to the next TAF allocation meeting (weekly, on a Wednesday at the present time) for consideration, it is here where suitability for TAF will be discussed. The case will either be accepted for the TAF multi-agency, single agency, or declined as not appropriate. A TAF coordinator will be identified, to process the

support from this point if the referral is accepted as TAF, either single or multi agency; and a TAF number allocated, if accepted as multi-agency. If the referral is declined, then the TAF coordinator will contact the referrer to explain the reasons or this, after the allocation meeting. An entry on Care First in the Logs will record this.

- The TAF coordinator will contact the social worker to discuss the decision made at allocation. If the case is accepted by TAF, a stepdown meeting will take place, between the coordinator, the social worker, and the family to discuss contents of the JAFF part 1, in the interests of transparency. This is to confirm the families understanding of TAF; clarify the family's personal outcomes and form a TAF intervention plan in order to allocate a key worker and engage other agency support.
- A date will then be agreed between coordinator, family, and social worker for commencement of TAF support. At this point the date for closure to statutory Children's Services will be made known. If a case is closed to the statutory service before this point, it should be in the knowledge that the outcome of the referral to TAF is unknown and could be declined, if not suitable.
- The process of the case can be checked by the social worker via the recording logs completed by the coordinator on Care First.

## 7. **Step Up Cases**

- This is when the keyworker, identifies with the TAF coordinator, that the situation in the family has reached a point whereby they think that the child and family are in need of an assessment for care and support by social services.
- The TAF Coordinator will discuss the case with the TAF Manager regarding their concerns. If it is agreed, the coordinator may contact the Central Referral Team (CRT) Manager for a consultation.
- If a child is in need of protection and urgent safeguarding a multiagency referral is to be completed by the TAF keyworker, with support from the TAF coordinator or the TAF manager along with a telephone communication with the Manager of CRT.
- If there are any disagreements over thresholds of intervention, the Manager of TAF and the Manager of CRT, will consult together basing the discussion on the CYSUR document 'The right help at the right time' document about criteria for targeted support, assessment for care and support, and protective support, to reach a decision that is then documented at the time of the referral as to the decision made. It is important that at no time should there be any delay in this process that would leave a child exposed to risk of significant harm.
- If a child is at risk of immediate harm or a disclosure has been made, a referral should be made to CRT.
- Any information held by TAF coordinators is available on Care First. Keyworkers records are kept by their agencies who have signed the Information sharing protocol,

so should be open and cooperate with any investigation regarding significant harm to a child.

- When TAF must step up a case and when a S47 is needed, TAF will not close the case until discussions regarding the outcome of the S47 has occurred between the teams. The case will remain open to TAF if there is no further involvement from Statutory Children Services.
- When TAF step up a case and an ACAS is needed, the case will not close automatically to TAF until further discussions between TAF and Assessment Teams. If the case is going to be open to the Statutory Service long term the case will close to TAF.
- With single agency cases before stepping up the keyworker consults with the TAF manager or coordinator if a multi-agency team should be the next step. If this is not done the single agency reflects this in the MARF and the reasons for this.

## **8. Step Across**

- The Central Referral Team are the 'gateway' into social care services for children and families. Many of these referrals require statutory intervention and move to the assessment teams. However, some referrals demonstrate that the family are not eligible for statutory services but indicate that a family needs help and support with the challenges facing them; and the preventative services would be the most appropriate agencies to be involved. The CRT can directly signpost a family to a single agency, but where the issues appear to need a team approach the CRT will refer direct to the TAF central support and coordinating team for the weekly allocation discussion. If unclear, then CRT can phone, or e mail a TAF Coordinator or the Manager to discuss.
- If referring to TAF for single or multi agency support, CRT are to complete Joint Assessment Family Framework (JAFF) **part 1** form to include clear outcomes for intervention identified with the family and signed that family have given verbal consent for the referral and information sharing. This is because the contact the CRT have with a family will be by telephone. This form is then to be sent to TAF box.
- In terms of referrals from CRT to TAF, CRT will gather all the information that is required for a TAF referral (Part 1 of JAFF) as the contacts with parents can often be brief. If CRT is unable to gather all the necessary information, they should gather as much information as possible and add to the referral form and include, ( NOT DISCUSSED) in sections that have not been discussed with parent(s).
- The referral will come to next TAF allocation meeting (weekly) for consideration, where the suitability for TAF will be discussed. The case will either be accepted as TAF multi-agency, TAF single agency, or be declined. The TAF Coordinator will be identified if referral is accepted as TAF. If the referral is declined, then the TAF coordinator will contact the referrer to explain the reasons, after the allocation meeting. The TAF Coordinator will record the decision made at allocation on Care

First and let CRT know via e mail. A Key worker will be identified if it is an acceptable referral to TAF for support.

- A date will be agreed with the family and the Key worker for commencement of TAF support. This information will be entered on Care First in a recording log.

## **PATHWAY TO STEP UP FROM TAF TO STATUTORY SERVICES BOTH**

### **SINGLE AGENCY AND MULTI AGENCY**

- TAF Coordinator discusses open TAF case with TAF Manager regarding concerns. The Mid and West Wales document 'The right help at the right time' will be used for this process. If agreed, Coordinator contacts Central Referral Team (CRT) Manager/deputy for informal consultation. If TAF manager not available, then discussion is direct with manager of CRT.



- If a child is in need of protection and urgent safeguarding a referral to be completed by the TAF keyworker, with support from TAF coordinator or TAF manager along with telephone communication with Manager or deputy of CRT.



- If any disagreement over thresholds of intervention, the Manager of TAF and Manager/deputy of CRT, will consult based on the Mid and West Wales document 'The right help at the right time' about criteria for targeted support, assessment for care and support, and protective support, to reach a decision that is then documented at the time of the referral.



- At no time should there be any delay in the process that could leave a child exposed to risk of significant harm, including differences in professional opinion.



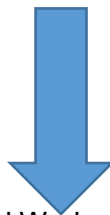
- Information held by TAF coordinators is available on Care First. Keyworkers records are kept by their agencies who have signed the Information sharing protocol, so should be open and cooperate with any investigation regarding significant harm to a child.

## PATHWAY TO STEP DOWN FROM STATUTORY SERVICES TO TAF

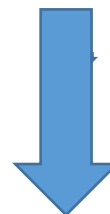
- If Case open to Social Services for under 8 weeks then case should be closed if no further intervention is required from statutory services. Families given Part one of JAFF to self-refer, or social worker supports to complete.
- If case open to Social Services for 8 weeks or more; the social worker to fully complete the Joint Assessment Family Framework (JAFF) **part 1** form to include clear outcomes for intervention identified with the family; signed family consent for the referral and information sharing. Form to be sent to TAF box. If not complete, form will be returned to social worker.



- Referral to come to next TAF allocation meeting (weekly) for consideration, where suitability for TAF will be discussed. Case either accepted as TAF single agency, TAF multi-agency, or declined. TAF Coordinator will be identified if referral is accepted as TAF.



- TAF Coordinator will contact Social Worker to discuss decision made at allocation. If accepted by TAF, a stepdown meeting will take place, between Coordinator, Social Worker and family to discuss contents of the JAFF part 1, in the interests of transparency, to confirm the families understanding of TAF; clarify the family's personal outcomes and form a TAF intervention plan in order to allocate a key worker and engage other agency support.



- Date agreed at the step-down meeting, with family and social worker for commencement of TAF support. Case then closed to statutory Children's Services from this agreed date, provided records on Care First are complete.

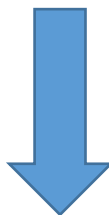


## PATHWAY TO **STEP ACROSS** FROM CRT TO TAF.

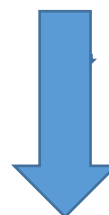
- CRT to fully complete Joint Assessment Family Framework (JAFF) **part 1** form to include clear outcomes for intervention identified with the family; signed that family have given verbal consent for the referral and information sharing. Form to be sent to TAF box.



- Referral to come to next TAF allocation meeting (weekly) for consideration, where suitability for TAF will be discussed. Case either be allocated to a TAF single agency, TAF multi- agency or declined. A TAF Coordinator will be identified if referral is accepted as TAF.



- TAF Coordinator will record decision made at allocation on Care First and let CRT know via e mail. Key worker identified.



- Date agreed with family and Key worker for commencement of TAF support. Information entered on Care First in recording log.