**GETTING THE BASICS RIGHT**



Social Work Practice Standards

**Trafford**

**Social Work Practice Standards**

**WHY DO WE NEED PRACTICE STANDARDS?**

* All social workers, supervisors and managers have clear guidance on their roles and responsibilities.
* To provide a consistent approach to social work tasks across Trafford.
* Children have told us they want to see a consistent service from every social worker we deal with.
* To set clear expectations of what is expected of social workers and front line managers which they can measure themselves against.
* To provide a set of standards that quality assurance work can measure against
* A tool to reflect and address the quality of work.
* To deliver a Restorative Service that works “with” and is respected by families and professionals and champion the needs of children through work and provide challenge where required to promote the welfare of children.
* *“To enable social workers to exercise professional judgement… also to improve their expertise”* Professor Eileen Munro 2011

**The Social Work Practice Standards are to be used in conjunction with:**

Trafford Procedures set out in Tri –X

<https://www.proceduresonline.com/trafford/cs/chapters/contents.html>

GM Procedures set out in GM Tri –X

<https://greatermanchesterscb.proceduresonline.com/chapters/contents.html>

Supervision and Supervision Standards

Quality Assurance Framework

IRO Practice Standards

Trafford Threshold Statement

Case Recording Policy

Adherence to the professional standards set by the Social Work England

**TRAFFORDS OBSESSIONS ARE:**

* **The Right Children are Looked After**
* **Children Living at Home are Safe**
* **The Right Support for Our Families**

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| **Trafford’s Key Messages for Childrens Social work Practice Standards:**   * Our work with children and families will be grounded in relationships * An ambition to ensure that all children and families in Trafford who access children’s services receive the right level of service at the right time * High quality social work services that begin from early and responsive intervention at the point of contact * The safeguarding and welfare of the child is the focus for all that we do as social workers * Families will be treated with respect and honesty and kept informed throughout any social work intervention * The strengths of families as well as concerns will be assessed and used to safeguard children * The work with children and their families will be based on the achievement of identified improved outcomes that are measurable so that the child sees an improvement in their circumstances and feels safer | **EVERY SOCIAL WORKER SHOULD KNOW:**   * How does the child feel? * What does it feel like living in the family * What is the impact of our intervention on the child’s circumstances? * How do we know this   **For all open cases there must be:**   * At the point allocation the Team Leader will record on LCS the case issues, desired outcomes and tasks to be carried out by the allocated social worker with timescales set out * A clear and concise case file summary which has been updated within the last 3 months * An up to date assessment (within the last 12 months) on each child and has been authorised by a manager * Team Leaders to identify progress; outcomes, impact achieved and what difference we made * A chronology of significant events and their impact that includes risk and protective factors * An agreed plan for the intervention with the child and their family is reviewed in supervision and through multi- agency planning meetings (i.e. Child in Need Meetings; Child Protection Conferences/Core Groups, Looked after Reviews and Pathway reviews) * A record of supervision, management oversight i.e. authorisations, managers case notes and evidence of audit activity |

**Front Door – Trafford Children’s First Response**

All contacts will be screened for consent and decisions made by what action are required by a Team Leader within 1 working day. This will be recorded in a decision making case note on the child’s record

**Level 4 & 5 (Child in Need & Child Protection)**

* Initial decisions will be made about the action required within 1 working day by social work Team Leader
* Referrals will be actioned by a social worker within 1 working day and will be overseen by the duty desk Senior Practitioner
* If a referral is for a Section 47 Child Protection Enquiry, the child / children will be seen by the Social Worker the same day, and the Child and Family assessment will run concurrently. The Service Manager or Team Leader will have oversight and authorise this
* Within 5 days of the Section 47 being initiated, the Social Worker and social work Manager will discuss the progress of the Section 47 Enquiry, and agree further actions
* All cases will be allocated to a social worker to complete a Child and Family Assessment within 3 working days. The Team leader will allocate the worker on LCS and place a case note on the child’s record detailing the work to be completed
* All assessments will be reviewed by the Team Leader within 15 working days. If further assessment is required this will be noted on the child’s record and an agreement made in respect to timescales, and action required. Assessments must all be completed within 45 days
* When a management decision is made that a strategy discussion is required, this must happen within 1 working day and should be chaired by a social work manager.
* All strategy discussions will be recorded by the social worker, and chaired and authorised by a social work manager. A case note will also be added to the child’s record
  + If the Child and Family Assessment identifies that the case needs to transfer to a Neighbourhood Team at Child in Need, the Children`s First Response Team will notify the Neighbourhood Team via email, giving at least 5 days’ notice.  Within the 5 days’ notice period, the Children’s First Response Social Worker and the allocated Neighbourhood Team Social Worker will complete a joint visit to the home to introduce the new worker to the child and their family and discuss the assessment and plan

**Level 1-3 (Early Help or Universal Services)**

* Initial decisions will be made about the action required by an Early Help Team Leader.  This will be recorded in a decision making case note on the child’s record.

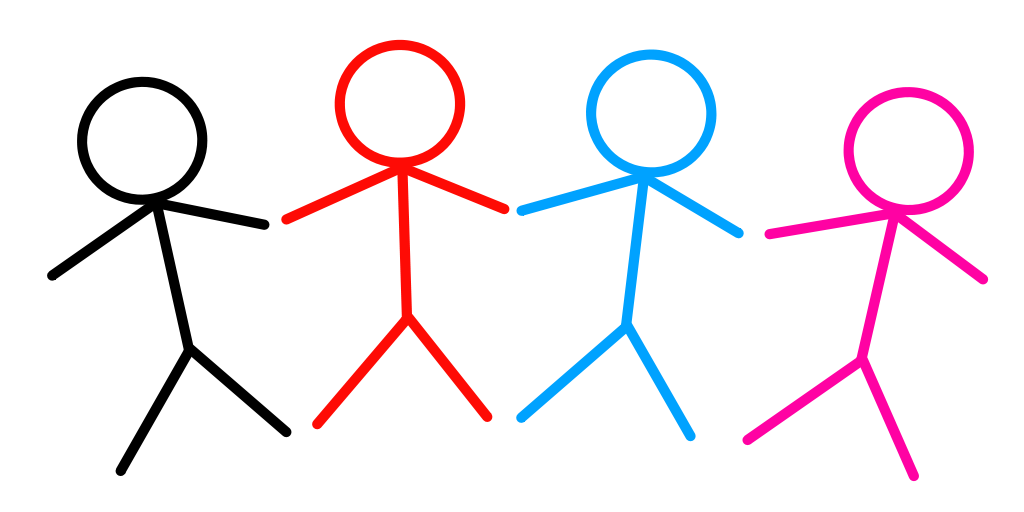
**For all assessments**

* The child (depending on age and understanding) and the family know about the assessment and are actively involved in any assessment. Their consent to undertake agency enquiries has been gained and recorded unless there is a clear safeguarding issue that makes this inappropriate (this decision will be recorded by the appropriate manager). All Child & Family Assessments are completed in a timely manner in line with Trafford’s’ procedures, statutory guidance and as directed by the Team Leader and recorded on LCS
* The child is seen and spoken to alone with their views, wishes and feelings recorded. If the child is non-verbal, observations, parental support and professional input should be sought to in order to evidence this. If the child is not seen alone the reason and rationale must be recorded and agreed as a management decision
* All members of the household will be in included — i.e. all adults and children living in the home; those that spend significant periods in the home or have child care responsibilities supporting the family
* Partners, estranged parents — i.e. fathers or mothers not living with their child and extended family — will be identified and their role and involvement in the family understood within the assessment
* Due regard will be given to race, ethnicity, gender, disability, religion and communication needs of the family
* The concerns of other professionals are listened to, clearly recorded and this information is used to inform the assessment
* The history of previous involvement is read, understood and used to inform the current thinking and a chronology of significant events and their impact is completed
* Assessment tools are identified and used where appropriate, their use is identified in recordings and the resultant analysis is used clearly in the assessment. These tools should be uploaded into LCS and attached to the assessment
* Risk and protective factors are identified, analysed and assessed with rationale for the decisions being made
* If a child has an EHC Plan due consideration must be given to this within the assessment and when planning for the child
* The assessment provides evidence for the findings, all sources of information are identified and there are clear recommendations including for future work or no further action, referral to other agency or stepping down to Early Help
* The scope and purpose of the assessment should be clear and concise and indicate what we are worried about and why
* Where the concerns relate to children or young people suffering neglect a Graded Care Profile 2 should be completed with the parents or carers
* The assessment has been read by Team Leader and management comments and feedback recorded as part of the authorisation process
* The assessment is shared openly with the child and family and their feedback sought and their views recorded

**S47 Investigation and Initial Child Protection Conference**

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| * The Greater Manchester and Trafford procedures are followed and referenced in records and decisions * Concerns of significant harm that indicate a S47 investigation is required have been recorded and fully discussed with the Team Leader / Service Manager and the decision to undertake a S47 agreed and recorded on LCS by the manager * A strategy discussion within 24 hours involving all relevant agencies is undertaken, this will be in the form of a meeting – face to face, where ever possible, the plan for the enquiries and decisions recorded and a record sent to all participating professionals. If no face to face meeting is held this needs to be recorded and authorised by the Team Leader * An interim plan will be considered and put in place that includes the plan for the enquiries, arrangements for seeing the child and the requirement for any written agreement with the parent is fully recorded * Checks with all relevant agencies will be under taken and recorded on the S47 form within LCS * The S47 is led by a qualified and experienced social worker * A Child and Family Assessment will be completed as part of the S47 * The child will be seen and spoken to alone and their presentation, views, wishes and feelings recorded. All siblings in the house will be considered as part of the investigation * The history will be read, understood and used to inform the current investigation | * Risks have been identified and analysed using recognised risk assessment tools * The strengths of the family and support network have been considered and used to inform any decision * The evidence based assessments and a judgement about the level of the risk of harm will determine the action required to safeguard the child * The outcome will be discussed with the Team Leader and a management decision is recorded in relation to the next stage — i.e. NFA; Step-Down; Child in Need; Initial Child Protection Conference; Child After becoming looked ; Pre proceedings, issuing proceedings * If required the Initial Child Protection Conference is convened within working 15 days of the initial strategy discussion |

**The social worker’s report to the ICPC is a Child & Family assessment and should include:**

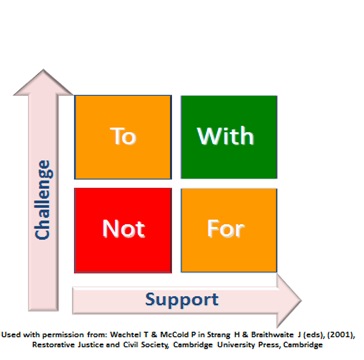
* Summary of the reason for the referral and information analysed as part of the investigation (referral, assessment)
* An up to date Worry Statement detailing why we are worried and the impact on the child
* Chronology of significant events including risk and protective factors.
* Child’s current and past developmental needs
* Parent’s capacity to keep child safe from harm and respond to needs
* Childs views, wishes and feelings including any other children within the household
* Analysis of risk and protective factors, the impact on the child and the understanding of the parents of these factors
* The report will be shared with family at least 3 the days prior to conference and their comments recorded
* The report will be sent to the child protection chair 3 working days before the conference the report must be signed off by a Team Leader
* The parents will be prepared for attending the conference and consideration to be given to whether the child should attend for at least part of the conference, and if they are 12 or over they should be offered an advocate to support them to attend the conference. If they are not attending the conference they will be encouraged to contribute in an age appropriate way and their views recorded in the social work report if appropriate providing there are no safeguarding issues that would prevent this
* The child protection chair will also seek the child’s views independently
* The outline child protection plan devised in line with Restorative principals at the conference will address what needs to change in order to protect the child and the outcomes to be achieved
* The child protection chair will set the date of the next conference; the date of the first core group together with the membership if it is agreed a Child Protection Plan is required
* The child protection chair will be responsible to escalate any non-engagement by partners in the child protection process to the IRO Service Manager

**Working with children subject to a Child Protection Plan**

* Following the ICPC, the outcome of the conference and the outline child protection plan (should the child be made subject to a plan) and the allocated worker are recorded immediately on the LCS
* The first core group must be held within 10 days of the conference and is used to put detail on the outline CP plan, agree outcomes to be achieved, set realistic SMART targets to monitor progress and ensure that the family and child understand the concerns and have been part of developing the plan
* Visits to a child subject to a CP plan will take place at least every 4 weeks and the child is seen at each visit on their own as appropriate. This is recorded on LCS. Children can and should be seen more frequently if the case demands and there should be unannounced visits in addition. A statutory CP visit must not be recorded on the child’s file unless the child was seen at home
* If a child is not seen alone the Team Leader must authorise the reason for this and make an assessment with regard to risk together with action to be taken
* The child’s wishes and feelings are regularly ascertained using direct work tools and their perception about whether things are improving for them recorded on LCS in red
* Visits must be purposeful, focusing on the identified risks; the CP plan recommendations; work with parents is collaborative and not punitive. They should be helped to understand the risks and what they can do to reduce those risks. We will work “with” parents in a restorative way
* The role of fathers, estranged parents and any partner living in the home is properly assessed and understood
* The home conditions are assessed at visits and the child’s bedroom checked especially where neglect is an issue. The Graded Care Profile 2 should be completed with all neglect cases to ensure there is clarity around concerns and expectations.
* The multi –agency plan and the targets agreed and outcomes expected are reviewed at every core group and progress recorded. Parents and all members of the core group will be given an updated copy of the plan
* The review report for the review child protection plan is recorded in the plan update prior to conference. This plan update must provide a comprehensive but concise update on the progress or lack of it since the last Child Protection Conference. This report must be shared with parents at least 3 days prior to the review conference, and their views recorded
* The report will be available to the conference chair at least 3 days prior to the review conference
* If progress of the child protection plan is not sufficient to consider de-planning a child when they have been subject to a plan for 12 months, a professional thinking time meeting to consider how professionals can work “with” the family in a different way to support change should be held and record on LCS
* If the risk is not reduced within the child’s timeframe and the child remains at risk of significant harm a referral to legal for legal advice should be made and consideration given to the use of Public Law Outline
* If a young person is on the edge of care and there is a risk they will become Looked After a referral should be made to Family Focus by emailing the team with the child’s details and presenting concerns.

**PUBLIC LAW OUTLINE (PLO)**

* If there are concerns that the threshold for proceedings has been met a written referral to legal for advice must be made by the social worker, which should include chronology, latest assessment and multi-agency views including the IRO’s views and authorised by Team Leader
* If PLO is agreed at Legal Gateway a timetable for progression of the process should be agreed at the meeting, with dates provided for filing of parenting, connected person’s assessments etc.
* The first PLO meeting with parents and their solicitor should take place **within 10 days** of the date on the PLO letter. If the parent chooses not to instruct a solicitor then the meeting should still proceed.
* If a FGC has not already happened parents should be asked to consent as part of the PLO process. Referral should be made within 3 working days of the first PLO meeting.
* Viability Assessment requests for screening need to be made to Family Placement Team **within 3 working days** of the initial PLO meeting, or immediately following Family Group Conference, if family or friends are identified as potential alternative carer
* PLO minutes including agreed expectations and how these will be achieved to be distributed to parents and their legal representation **within 7 days of the meeting** and uploaded onto LCS
* Review PLO meetings with parents to be held every 4-6 weeks to monitor progress and consider the risks
* A review legal planning meeting will be held at 12 weeks - the allocated solicitor from legal will attend .If threshold is still met a decision about whether to go to Legal Gateway meeting for a Strategic Lead to consider whether Care Proceedings should be initiated will be made. In exceptional circumstances a further period of 4 weeks will be agreed in PLO
* If the case remains in PLO a Legal Gateway meeting will be convened at **16 weeks** with Strategic Lead oversight. If it is decided to initiate proceedings the timescales for filing SWET and additional supporting documents will be agreed at the Legal Gateway meeting
* If threshold is no longer met the PLO process should end and a meeting with parents and their legal representation will be held to discuss this and the potential consequence of changes not being sustained



**Working with Children in Need**

* If a Child and Family Assessment has been completed and this indicates that a child requires a CIN service to promote their safety and wellbeing a Child in Need Plan should be developed with the child and family which has clear timescales and focuses on outcomes. The plan will include the strengths of the family and what it is that professionals are worried about and why. All actions will be timely and measurable to enable the family and professionals working with them to evidence progress made towards achieving the desired outcomes
* If a child is de-planned from a child protection conference the chair of the conference will ensure that there is an outline CIN plan and will set the first CIN meeting within 20 days and identify the professionals involved and their roles
* When a case transfers from Trafford Childrens First Response the initial CIN meeting must take place within 10 days. CIN review meetings will be held at least every 6 weeks
* The CIN Plan should be reviewed at every Child in Need Review. If satisfactory progress is not being made consideration will be given to the impact on the child and whether the delay in achieving outcomes put the child at risk of significant harm and therefore a strategy discussion will be required to consider the need consider ICPC
* The decisions and minutes from the CIN meeting will be recorded by updating the child and family plan on LCS. Everyone involved in the CIN meeting will receive a copy of the updated CIN plan following every child in need meeting
* The CIN meeting should be held in an environment that ensures that family and the child (dependent on age) can easily attend e.g. family home; school, children and family centre; other
* A child subject to a CIN plan will be seen at least every 6 weeks or more frequently if the child and family plan requires. The visit can only be recorded as a CIN visit on the child’s case file if they have been seen at home
* The progress of the CIN plan should be monitored through supervision which takes place in line with the supervision policy. A supervision recording of progress and barriers to progress will be recorded on the child’s file with recommended actions
* If it is agreed that sufficient progress has been made the case will be considered for stepping down to Early Help / universal services and the lead professional will be agreed and recorded at the last CIN meeting

**Children in Care**

* When a child becomes looked after an up to date assessment of their needs should be in place (Child and family assessment or UASC Age Assessment). This assessment will inform the selection of a placement in meeting the child’s needs. Placement with siblings will be taken into account when planning a placement. If it is an emergency / unplanned admission the assessment will be completed within 20 working days
* When a child needs to come into care a placement with family and/or friends will be considered and a Connected Persons assessment completed if appropriate. Following a conversation with the Placements Team to ensure Fostering Regulations are adhered to, temporary approval of the connected person as a foster carer MUST be agreed by the ADM before the child is placed
* Consideration of a family group conference will be part of the assessment and planning and if this does not take place the reason why must be recorded and agreed by the Team Leader
* The child will be visited within 1 working day of coming into care or having a change in placement
* When a child is placed all the information (including strengths, vulnerabilities and family history) needed to care for the child will be recorded in the placement plan and a written copy shared with the carer at the point of placement
* The placement meeting will be held within 3 working days to share additional information, agree delegated authority for all areas and to agree how the placement will meet the child’s needs. These details should be added to the placement plan and an updated copy given to the carers within 5 working days of the placement beginning
* The risk of going missing and child sexual exploitation will be considered and risk assessed. A plan will be agreed and recorded in the placement plan / care plan to reduce the risk and try and prevent future incidences and this will be authorised by the team leader
* The child’s needs in relation to race, ethnicity, language, communication, disability, gender, sexuality will be taken into account and evidenced
* Arrangements for family time with parents and other significant family members will be made at the time of the child coming into our care and reviewed at least every 8 week until the plan for permanence is agreed..
* Family time will be in the best interest of the child and supported and supervised as necessary
* The child will be provided with a coming into care pack, children rights leaflet within 3 weeks
* When a child becomes looked after the business support based within Quality Improvement will be informed immediately for the allocation of a reviewing officer. All other professionals involved with the child will be informed of the child’s legal status within 5 working days
* An initial health assessment will be requested and carried out within 20 working days
* A PEP meeting will be arranged within the school within 20 days and subsequently reviewed within the statutory guidelines at least 1 per term
* All looked after children will be seen within 1 working day of placement. Statutory looked after visits must happen weekly until the first looked after review and then a minimum of every 6 weeks thereafter until the plan for permanence is finalised. Statutory visits can only move to 12 weekly when the young person has settled into a permanent placement and been there for over 12 months. Visits may need to be more frequent at different points in the child’s journey in care and should be based on developing a positive and meaningful relationship with the child. Visits can only be recorded as a statutory looked after visit if the child is seen
* An up to date care plan will be recorded on the electronic system within 10 days of placement and this will include the child’s needs, consider intended outcomes and placement and service provision that is needed to meet the child’s needs
* The initial Looked After Review must take place within 20 working days of the child becoming looked after
* At the point of the second review (if not in proceedings) the child must have a permanency plan included in their care plan
* For young people in our care their aspirations for the future including their interest, views on careers and how they want their lives to develop should be included in the care plan from early teens
* All young people will be encouraged to participate in and plan for their review. They will be given the opportunity to speak to their IRO on their own. Parents will be encouraged to participate in the review process and their views should be recorded
* A pathway plan will be started when the young person is 15 years 6 months and will be reviewed by the IRO as part of the statutory review. When a young person begins transitions into the care leaving stages there will be; an up to date pathway plan; up to date chronology; birth certificate; National insurance number and passport (if appropriate)
* The social worker and relevant other professionals will provide a written report for the review and this will be with the IRO 3 days before the review. The social worker will ensure that the review and care plan has been discussed with the child, family and / or carer prior to the review
* The IRO will be informed of any changes in the child’s circumstances at the time they happen and a new LAC review will be set in accordance with the timescales
* The IRO will contact the child between reviews to ensure the progress of the plan and to gather the child’s views and what is going well for them and if there are any issues for the child to express in line with the IRO role and responsibility
* The plan for permanence for all Children in our care must be reviewed regularly to ensure that a care order is still required to ensure the child’s needs are met, consideration should be given to Special Guardianship Orders and / or discharging the care order if threshold is no longer met
* Any significant changes to a child’s care plan or legal status should not be made without first discussing it at a review. If there is an indication of instability in a placement plan a Support Meeting will be held and chaired by the Team Leader to look at ways of sustaining the placement

**Role of the Independent Reviewing Officers**

* Ensure the child is at the centre of all they do
* The IRO will ensure that the child’s wishes, views and feelings are given full consideration and recorded on the case file
* The IRO should be satisfied that each placement is meeting the identified needs of the child
* The IRO must ensure that each child knows who their IRO is and how to contact them between reviews and this should be clearly recorded in the record of the review
* The IRO will challenge where there is drift in care planning. An informal challenge will be made alerting the allocated worker. If the challenge is not resolved within 5 working days a formal dispute will be raised. The formal dispute resolution process should be completed from start to finish within 20 working days and each stage recorded on the child’s file in LCS
* The IRO pro-actively monitors the progress of the care plan and the implementation of the review decisions
* The IRO will provide both positive and constructive feedback to all the stakeholders in order to achieve good outcomes for children

**Adoption**

* If a child under the age of 6 enters PLO or proceedings they will be allocated a Trafford adoption social worker and a family finder from adoption counts, for
* Arrange SHOPBA (Should be placed for adoption meeting) with the Agency Decision Maker (ADM). This needs to take place after the area teams final care planning meeting (where adoption is the agreed plan for permanence) but prior to legal need to submit the paperwork for the Issues Resolution Hearing (IRH)
* The adoption Social Worker will complete the Childs Permanence Report (CPR) ready for the SHOPBA including why all family options have been exhausted
* Parents will be sent a letter detailing the outcome of the SHOPBA signed by the ADM.
* If the Court make a Placement Order in respect to the child the case will transfer from the area team to the adoption social worker and they will continue to undertake statutory visits and reviews in line with the looked after children’s policy
* When a match is identified and agree at adoption panel the ADM ratifies the decision and a meeting is held to plan the introductions and placement of the child
* Once the child is placed weekly statutory visits will take place until the first Looked After Review and then visits will be a minimum of 6 weekly until the Adoption Order is Granted
* The Adoption Social Worker will complete Lifestory book and a Later Life Letter for the Child
* Once the children have been in placement with the adopter for 10 weeks they can make an application for an Adoption Order. The Social Worker will complete the Annex A suitability report for Court

**Fostering**

* Trafford Children’s Social Care will only place children in placements with Independent Fostering Agencies that have a Requires Improvement or above Ofsted rating
* Trafford foster carers are visited at least once every six weeks and a record of this visit is recorded on LCS within 3 working days
* All Trafford foster carers will have an unannounced visit at least once every 12 months
* All Trafford foster carers will have an annual review including an updated Safer Caring Policy and Health and Safety Checklist recorded on their case file which has been chaired by an IRO or presented to Fostering Panel
* Every foster carer will have an annual review presented to the Fostering Panel at least every three years. If a foster carer has been subject to a complaint or allegation their next review must be presented to the Fostering Panel
* All foster carers will have updated statutory references, medicals and DBS checks at least every three years
* All Trafford foster carers must have clear terms of approval including the number and ages of children for whom they are able to care
* All Trafford carers will be supported with a comprehensive training programme based upon individual professional development plans which are updated annually as part of the annual review. All Trafford foster carers must update their core training at least every three years
* All Trafford foster carers will be invited to contribute to the child’s care plan as part of he looked after review process
* When a child is matched with a foster carer, the matching checklist on the Request for Family Placement form must be completed by the duty Supervising Social Worker and must be agreed by a Team Leader in the Family Placement Team before the placement is made
* If consideration is given to placing a child who is outside the foster carer’s terms of approval, permission must be sought from the Strategic Lead for Children in Care before the child is placed for a Variation of the Terms of Approval. This can only be given for up to 6 working days
* If consideration is given to placing more than 3 children in a fostering household permission must be sought from the Strategic Lead for Children in Care for an Exemption to the Children’s Homes Regulations before the child is placed
* Temporary approval of the Connected Person as a foster carer must be agreed by the Agency Decision Maker before a child is placed. Temporary approval is for 16 weeks but can be extended for a further 8 weeks. This must be considered by the Fostering Panel and agreed by the Agency Decision Maker



**Good Practice in Case Recording**

* Adhere to the case recording policy and timescales within them
* Records clearly show when a child has been seen, spoken to and their wishes and feelings included, the child’s voice should be recorded in red
* As part of the planning with children and families adequate time to record work with them is allowed for and any event or contact is recorded within 3 days
* Any direct work or assessment tools used are identified and analysed
* If interpreters, specialist workers or communications tools are needed this is clearly recorded
* Records tell the story of the child’s journey and the purpose and outcome of any contact is clear and analysed
* Facts and opinions are separated in the recording and any relevant research or tools used identified with appropriate references
* All records are respectful of the child and their family including education, communication, language, cultural, gender, sexuality, disability and diversity is celebrated
* If information is provided by other professionals or family / friends the records give the person’s name and their relationship to the child
* Management oversight is recorded on LCS including case discussions, supervision, management decisions and authorisations together with the rationale for the decision made
* Audits carried out are placed on the file with actions and the Service Manager and Team Leader ensure through supervision that any actions are completed and recorded to ensure that the case is of the highest standard
* Evidence in supervision of the CP; CIN; Care plan being addressed and outcomes are being achieved