



**GENERIC INDUCTION  
BOOKLET CHILDRENS SOCIAL  
CARE  
WELCOME!**

Name of staff member:

Job role and team:

District:

Place of work:

Start date:

This induction pack has been prepared as a working document for you to complete during your first two weeks in employment.

A supervision session will be arranged following your induction period

This induction pack is separated into 6 sections

Section 1 – IT systems

Section 2 – Health and Safety and Buildings

Section 3 – Training and development

Section 4 – Shadowing experiences

Section 5 – Agency visits

Section 6 - Useful Information and important dates

## **SECTION 1: IT SYSTEMS**

### Systems used:

Documentum (also known as SCRM)	Electronic system for scanning and uploading documents to a child's file
ContrOcc	Financial system attached to Liquidlogic
Liquidlogic	Electronic case management system
Oracle	Electronic system used to record annual leave, sickness, mileage expenses etc
Click delegate	Electronic system used to book on training courses accessed via Intranet

All new starters will need to complete LCS e-learning **before** a log in can be issued and an account created. This will need to be completed within the induction period and takes approximately 10 hours to complete. Please could you prioritise this task within your induction period

To access the e-learning, please click here

<http://lccintranet2/corporate/web/?siteid=6758&pageid=44145&e=e>

Once you have completed the elearning I can arrange for an account to be set up. You will need to email me your user ID (e.g. TSykes006) and confirm you have successfully passed the elearning. An account is usually generated within 24 hours

Please read the following policy, sign, date and print this page of the induction booklet out. A copy will be held in your supervision file

## **Internet and Email Acceptable Use Policy**

### **Purpose of this Policy:**

1. Users of Lancashire County Council (LCC) Internet, email and telephone systems (IE&T) are expected to use these systems responsibly and in a way which supports the work of the Council.
2. This policy explains the purpose for which IE&T facilities are provided the limits on private use, acceptable and unacceptable uses of these facilities, monitoring and violation of this policy
3. This policy applies to all employees and other third parties when using Lancashire County Council, IE&T facilities. It also extends to the use of any equipment which may be used in any way to access LCC IE&T facilities whilst working on LCC business.
4. These facilities are not intended for private use. However, LCC does provide some facilities for personal use, the main examples being the Peoples' Network screens in Libraries and Internet cafés on Council premises. This policy does not apply to these facilities
5. If circumstances arise which mean that this policy cannot be followed or is required to be varied for business reasons, employees and contractors must obtain authorisation for an alternative procedure from the relevant Director, in consultation with the Corporate Information Assurance Manager.
6. This policy does not apply to County Councillors, members of the public or Lancashire County Council employees in schools where different arrangements are in place.

7. IE&T facilities are used by LCC to support its business activities and the use of these facilities is determined by the business requirement they are intended to support. IE&T facilities will not be provided where it is not justified to carry out official duties.

8. Before being given access to IE&T all users must accept the Employee Agreement covering the use of LCC Internet, email and telephones in the manner approved at the time of application.

9. Use of these facilities for communication with Union representatives or employee-relations reasons, and brief communication with home for co-ordinating work and family life are regarded as coming within the definition of business use and are therefore acceptable.

10. All messages and transmissions generated using these systems are regarded as the County Council's property and responsibility. All emails and records associated with use of these facilities will be treated as business records. Non-business email will generally be treated in the same way as business email and monitored, handled and archived as if it is business email. Personal emails cannot therefore be regarded as private in all circumstances.

11. During paid time, an individual's use of IE&T without reference to management is limited to the use of telephone, email and web browsing to allow communications and to access information available on the Internet for business purposes. This excludes social media sites such as

Facebook, unless a specific business case has been approved. Your business email address must not be used for non-business purposes. Exploitation or uses of Internet services which go beyond this basic level, although they may be initiated by anyone, must be approved on a business case basis through line management.

12. Individuals' use of IE&T facilities may be monitored by management and records examined without reference to individuals.

13. The County Council permits some non-business use but only when "clocked off" or otherwise not working within your contracted hours. All use of these facilities for personal purposes remains subject to Acceptable Use Rules relating to purposes and content as outlined in this and associated documents. Please note that IE&T facilities have been configured for business purposes and so there are some inherent limitations on personal use of LCC facilities. The limitations on email use are greater as personal and professional internet personas should be kept separate. This means that LCC email addresses may only be used in a personal capacity when communicating with the Union and home or family in the way described in para 9 above.

14. At no time must these facilities be used in ways which are defined by LCC as unacceptable.

Unacceptable use can be defined as any one of the following: inappropriate purposes, inappropriate content or excessively time consuming uses. The linked document provides examples of each. <http://lccintranet2/corporate/web/viewdoc.asp?id=63794>

15. Particular unacceptable uses of Lancashire County Council owned mobiles and blackberries also include driving while holding a mobile phone, excessive personal use during paid time (including texting), inappropriate use of camera functions and using LCC supplied SIM cards in any non LCC owned device.

16. Business emails containing personal data must be sent using secure methods (e.g. Zixcorp or Government Connect or through specific SIRO approved arrangements already in place)

17. Comments contained in email or posted to any other system visible on the Internet will not necessarily be considered by the County Council as formal statements issued by, or the official position of, the County Council and should not be phrased as such. A Disclaimer appears on all outgoing emails.

18. Unless specifically approved through management channels for business purposes (see 4 above) LCC Internet and email must not be used at any time for business or financial transactions including barter to access social networking (Facebook, Twitter) or other interactive services (Web 2.0).

19. LCC rules and conventions which govern the disclosure of personal and other sensitive data and the expression of opinions about LCC or service users in public areas continue to apply if you use Web 2.0 services, such as Facebook, in your personal capacity outside work.

20. Users are personally responsible for the content of all text, data, audio or images that they place on or send over LCC's IE&T facilities Users should report any problems with the policy, the systems or the way they are used to their line manager. They may also use the Whistle Blower's Helpline.

21. Users should report breaches of this policy to their line manager or to the Corporate Information Assurance Manager

22. Managers must ensure that the use of LCC's IE&T facilities support the business activity for which they are responsible and ensure that their staff (including partner and contractor staff) are aware of the provisions of this policy and associated guidance including the information assurance eLearning course available on the intranet.

23. There is an exception list that will be maintained within this policy and agreed by the Corporate Information Governance Group

24. Any employee who abuses LCC's IE&T facilities may be subject to disciplinary action. Serious breaches will be considered as gross misconduct and could lead to dismissal. The County Council will also notify appropriate legal officials of any illegal actions of its employees.

25. Non-employees who are required to follow this policy yet fail to do so will have their access rights to LCC systems removed and will be reported to their own employer.

**Signed:**

**Dated:**

**Section 2: HEALTH & SAFETY, BUILDINGS**

**Health & Safety, building and admin queries:**

**CAPSS**

Childrens Social Care

Tel

The door code is:

On-site parking

Health & Safety is located in the front Reception area

This includes property log book, fire log book and first aid/accident forms. Information is also kept on the 'R' drive pathway:

Link to health, safety and wellbeing team site:

<http://lccintranet2/corporate/web/view.asp?siteid=3726&pageid=18222&e=e>

**CAPSS**

Childrens Social Care

The door code is

On-site parking

You will require a fob to access this building. Please see .....to request a fob. You will also require a front door key and information about the alarm.

Health& Safety is located in the front Reception area.

This includes property log book, fire log book and first aid/accident forms. Information is also kept on the 'R' drive pathway:

Link to health, safety and wellbeing team site:

<http://lccintranet2/corporate/web/view.asp?siteid=3726&pageid=18222&e=e>



## **CAPSS**

Childrens Social Care

The door code is - (N/A) entry by fob only

On-site parking

Health & Safety is located in the front Reception area.

This includes property log book, fire log book and first aid/accident forms. Information is also kept on the 'R' drive pathway:

Link to health, safety and wellbeing team site:

<http://lccintranet2/corporate/web/view.asp?siteid=3726&pageid=18222&e=e>

## **Fire Procedures**

Please sign in on the staff sheet in reception. The Fire Assembly Point is in front of the building on the car park.

The fire alarm is tested each Wednesday afternoon.



FIRE evacuation  
procedure updated S



Document UD01 Fire  
Evacuation Procedure

## **Risk Assessments**

Up to date risk assessments are in place for day to day tasks and use of equipment. These are located in the property log book and also on the 'R' drive.

**Please familiarise yourself with this information.**

## **ID Badge**

Follow the link below:

<http://lccintranet2/corporate/web/?siteid=2681&pageid=40692&e=e>

You will need to bring with a passport sized photo

## **DSE Assessment**

Your line manager should ask you to complete a self-assessment checklist for display screen equipment. See link below:

<http://lccintranet2/corporate/web/view.asp?siteid=3726&pageid=13613#anchor6295>

### **SECTION 3: TRAINING AND DEVELOPMENT**

**There is an intranet page from the Principal Social Worker that can be accessed here at this link.**

[http://lccintranet2/corporate/web/?Principal\\_Social\\_Worker\\_Blog/33477](http://lccintranet2/corporate/web/?Principal_Social_Worker_Blog/33477)

**She produces and distributes a blog every month for all social workers within children's services. This contains a range of information and links which you will find useful. The intranet page contains links to the learning and development offer, ASYE intranet page and there are archives of all previous blogs. Please take the time out to read this as it will contribute to your Continuous Professional Development.**

#### **Induction E-Learning (to be completed within induction period)**

Corporate Induction	<a href="#">Click Here</a>
Information Assurance	<a href="#">Click Here</a>
Driving at Work	<a href="#">Click Here</a>
Display Screen Equipment	<a href="#">Click Here</a>
Health and Safety	<a href="#">Click Here</a>
Lancashire Way	<a href="#">Click Here</a>
Equality and Diversity – Level 1	<a href="#">Click Here</a>
Introduction to Safeguarding and Child Protection – Level 1	<a href="#">Click Here</a>
Common Assessment Framework (CAF)	<a href="#">Click Here</a>
Child Sex Exploitation	<a href="#">Click Here</a>
Female Genital Mutilation	<a href="#">Click Here</a>
Child Death Overview Panel (CDOP)	<a href="#">Click Here</a>
Extremism and Radicalisation	<a href="#">Click Here</a>
Private Fostering Regulations	<a href="#">Click Here</a>
Introduction to Safeguarding Adults	<a href="#">Click Here</a>
Mental Capacity Act and Deprivation of Liberty	<a href="#">Click Here</a>
Undertaking effective carer assessments	<a href="#">Click Here</a>
Care Act	<a href="#">Click Here</a>

***You will receive an electronic certificate upon completion of each e-learning course. Please print out a copy of this certificate and pass to Case Support to add to your supervision file***

**It is also essential that you read and familiarise yourself with Lancashire County Council's Practice Standards for Childrens Social Care. These set out what is expected in terms of your practice and they are set out below.**

**Please sign and date here to confirm that you have read these**

**Name**

**Signature**

**Date**

# **Children's Social Care Service, Practice Standards**

## **Introduction**

A commitment to embedding practice standards will play a vital role in making Lancashire County Council a child friendly community where children feel safe, where joint working to improve outcomes for the most vulnerable children, will improve, and where compliance is evidenced.

At the heart of this document is a new, restorative philosophy that seeks to work with children, young people and families, building on their strengths to better manage the risks and challenges they face.

Standards are the rules that describe the (minimum) service or practice that can be expected by the service user. Most of them are legally set through government legislation and guidance, or are based on evidence based research. They are mandatory for all workers.

## **STANDARD – General management**

Managers will ensure that all responsibilities for children and young people for whom the Local Authority has a responsibility, will be carried out in line with the standards set out in this section and the rest of the practice standards manual. Managers will monitor compliance to ensure that children and young people are protected, receive appropriate services and achieve.

### **STANDARD: Scrutiny**

Managers will ensure all recording and reports are of good quality and are completed in a timely manner.

Managers will ensure that thorough enquiries are undertaken that produce good quality assessments and analysis of needs, leading to well-reasoned and evidenced recommendations for actions to be taken.

Managers will aim to observe and give constructive feedback to social workers on an annual basis.

### **STANDARD: Service Culture and Support**

All managers will lead their staff group and ensure that staff work in a professional environment that is conducive to delivering good professional practice. This includes having a staff culture that brings support, constructive challenge and professional rigour to daily practice.

## **Statement of Assurance**

We want children, young people and their families to receive the right support, at the right time delivered in the right way.

We understand that in order for this to happen social work staff need access to the following:

- Good levels of support including the time for reflective supervision.
- Training appropriate to needs and role.
- A caseload that is regularly reviewed and tailored to experience and above all manageable to support the delivery of safe and effective practice.
- Management support and time, from managers who are visible and prioritise the observation of front line practice.

The DCS plays a fundamental role in ensuring the above is in place and will provide regular evidence via the Quarterly Safeguarding Reports presented to the Leader, Cabinet Member for Children, Young People and Schools and the Chief Executive.

It is recognised and agreed that the national recommended guidelines for social work and IRO caseloads is the desirable position, but fluctuating and, at times, increased demand for statutory social work means this will not always be achievable. However, the priority will be to ensure that the commitment is given to the achievement of:

Assisted & Supported Year in Employment	15
1-3 years	20
3 years plus	23

## **Allocation Standards**

It is recognised that child protection investigations require a level of experience above that of a worker in their first year post qualifying.

For the first 6 months of post qualifying employment ASYE will shadow experienced workers then for a further 6 months will undertake joint section 47 enquiries with a more experienced social worker who is not ASYE.

No ASYE social worker should be allocated any high risk casework.

It is recognised and agreed that this approach is the desirable position, but that at times, increased demand for statutory social work means this will not always be achievable.

A tracking system will be developed to monitor compliance with the above standards.

## Management Standard

STANDARD	KEY AREA
1.1.	I can evidence regular auditing of case records to ensure that practice standards are met routinely.
1.2.	I always follow up corrective action requirements arising from audits.
1.3.	My signatures / electronic equivalents and scrutiny of social worker activity shows that this has met agreed practice standards.
1.4.	I can evidence that appropriate steps are being taken to address poor or unacceptable performance of social workers to bring about improvements.
1.5.	I can evidence that regular quality supervision is taking place with all staff.
1.6.	My management advice and decisions are well evidenced and professionally sound.
1.7.	My recording of supervision demonstrates reflective practice.
1.8.	Supervision contracts are in place for all workers.

1.9.	Annual appraisals take place and play an active part in the recognition and development of staff skills and are linked to service priorities.
1.10.	I have a proactive approach to developing staff professional skills.
1.11.	I acknowledge and give credit to good practice and promote this within and outside the staff group.
1.12.	I keep up to date with key policy and guidance changes and research findings and makes sure that this is shared with staff, with an expectation that they do the same.
1.13.	I ensure that the work demands are matched to the skills and abilities of staff members, and staff capacities and capabilities are defined and managed fairly.
1.14.	I ensure that good communication takes place within the staff group, and all staff are informed of important matters affecting their work.
1.15.	I facilitate regular team briefings / meetings and they are properly set up, chaired and recorded. Staff briefings have formal agendas and are fully minuted.
1.16.	I cultivate a staff group atmosphere that is mutually supportive and respectful, and an office atmosphere that is calm and purposeful, and one in which staff are focused to work. I promote a positive work life balance and consider the emotional well-being of workers.
1.17.	I set an example as to how to conduct oneself as a professional and set expectations of good practice that must be adhered to, and create an atmosphere of professionalism.





**SINGLE ASSESSMENT – All children and young people for whom the local authority has a responsibility will have a good quality social work assessment and analysis of needs which informs their plan, is on their record and produced within specified timescales.**

STANDARD	KEY AREA
2.1.	I have clearly recorded the reasons for the assessment with issues, risks and concerns evident.
2.2.	I have made it clear to parents and child/young person why Children’s Social Care is involved, what we will be doing and the likely outcomes.
2.3.	The family know I have conducted an assessment and their views and opinions are recorded within the assessment. I have seen evidence of the parent’s identity where necessary (state document/s seen).
2.4.	I have advised the original referrer and all relevant agencies what will happen next.
2.5.	I have seen the child/young person alone and where possible gained their views and separately recorded them (if I have not seen the child/young person I have recorded reasons why not).
2.6.	I have ensured that all children/young people in the family have been considered as part of the assessment. I have identified if there are any other children living in the household, (not from the family I am assessing) or connected to it, and ensured that their safeguarding needs are being met.

2.7.	I have paid regard to race, ethnicity, gender, disability, religion and nationality of <b>the</b> family and my assessment reflects these areas.
2.8.	I have identified all adult members of the household in my assessment including those who may be temporarily absent (e.g. in custody, in psychiatric hospital).
2.9.	I have reviewed the family finances with the parents and have included a financial breakdown within the assessment.
2.10.	I have ensured that previous case history including past referrals and assessments (including early help assessments) and old case files in respect of any member of the household has been considered and incorporated into the assessment. I have ensured that the child's chronology is updated and included the case history of significant events for the child.
2.11.	I have held a C&F assessment planning meeting, requested information from those agencies involved with the child/young person and involved them in the decision making regarding next steps. I have contacted those agencies involved with the child/young person and family who were unable to attend the meeting to ensure their views inform the assessment.
2.12.	I have ensured that risk and protective factors have been clearly identified and assessed. I have been careful to distinguish fact from opinion.
2.13.	My record clearly shows what I have found and what I think should happen next including the rationale for this.
2.14.	The child/young person is central to my assessment and my assessment identifies the needs of the child/young person (and family). I have included a realistic, detailed picture of the child/young person and what it is like to be a child in this family.

2.15.	I have used appropriate questionnaires, scales or other tools to inform the assessment.
2.16.	I have used risk assessment tools where necessary to identify and manage risk.
2.17.	My assessment evidences that research findings have been used to assess risk and inform my decision-making.
2.18.	In my assessment I have recorded a picture of the parents, their parenting strengths and weaknesses and any areas where they are not meeting the child/young person's needs.
2.19.	I have ensured that the child and their family know what will happen next.
2.20.	My analysis and decision making clearly evidences my findings, links back to the original concerns and any other issues, including history of all family/household members, and I have made recommendations for any future work within children's social care or early help.
2.21.	I have completed my assessment within the timescales that meet needs of children / young people and family (not more than 45 days) and it has been sent to my manager for sign off.
2.22.	I have given a copy of the completed assessment to the family and young person where relevant, and have invited them to comment.
2.23.	I have undertaken a re-assessment when a significant incident has occurred or every 12 months.

**CHILD PROTECTION ENQUIRIES – All children and young people for whom the local authority has a responsibility will be protected from further significant harm by a thorough enquiry that identifies need and risk, is timely and is recorded on their record.**

STANDARD	KEY AREA
3.1	I have undertaken a multi-agency strategy discussion.
3.2	As part of section 47 enquiries I have seen the child within 24 hours or as directed by my Practice / Team Manager and spoken to them alone (where appropriate) within the first week.
3.3	I have identified all concerns regarding significant harm including likelihood, and I have identified all potential risks, including those posed by frequent visitors to the household.
3.4	My S47 assessment is multi-agency and recognises the potential needs and safety of siblings and any other children in the household (and other households where relevant).
3.5	I have made sure that protective factors (and potential protective factors) have been identified and recorded.
3.6	I have followed the Lancashire Safeguarding Children Procedures for S47 enquiries.
3.7	I have updated the child's chronology having fully interrogated the case history on all members of the household and the investigation is informed by this

	perspective.
3.8	I have identified the key agencies involved with the child, completed all checks and information from those agencies and incorporated their information and views into the assessment.
3.9	My investigation concludes with an evidence judgement about “harm” and whether or not it is considered “significant” (as defined by the Children Act 1989).
3.10	I have clarified what action is required to secure the safety of the child/young person concerned.
3.11	I have checked back on the S47 referral details and I am certain I have investigated all the allegations made, and followed all the instructions given by the Practice Manager / Team Manager.
3.12	<p><b>Initial Child Protection Conference (ICPC)</b></p> <p>My report for the ICPC summarises and analyses all information from the assessment to date and all pre-existing records relating to the child, family and any other household member.</p>
3.13	I have completed the ICPC report and I have shared it with the family, the chair and other agencies at least 2 working days before the conference and noted their comments.

**WORKING WITH CHILDREN SUBJECT TO CHILD PROTECTION PLANS – All children and young people for whom the local authority is responsible for will have a multi-agency child protection plan that is regularly reviewed and updated, that manages risk and is recorded in their record.**

STANDARD	KEY AREA
2.24.	I have ensured that the first Core Group meeting takes place within 10 working days of the ICPC. During the meeting I ensured all actions to be taken under the child protection plan were identified, and agreement reached about what actions would be taken by whom, including timescales, to complete the C&F assessment on time.
2.25.	I have ensured at the initial Core Group that parents/carers know what change/s need to be made by them, including timescales.
2.26.	I have ensured that minutes of the Core Group are produced and circulated to all members of the Core Group within 5 working days.
2.27.	I have ensured that a detailed SMART multi-agency Child Protection Plan is developed by the initial Core Group, that this is reviewed and updated following every subsequent Core Group and is recorded on the child's record on LCS.
2.28.	I ensure the child/young person is seen as per frequency agreed by a manager (but as a minimum monthly) and that the visits are purposeful and focus on the identified risks. I have seen the child/young person on their own (where appropriate). This is evidenced in my recording.

2.29.	The focus of all my work is to maximise the safety and well-being of the child/young person and I have undertaken both announced and unannounced visits to the child/young person. Each of my visits adds to the knowledge about the child/young person and what life is like for them and helps in further understanding and achieving the outcomes needed.
2.30.	I regularly ascertain the child/young person's wishes and feelings and keep the child/young person up-to-date with the child protection plan and any developments or changes.
2.31.	I continue to assess and re-assess the needs of the child—I can answer the question “What is it like to be this child in this family”?
2.32.	I ensure that I understand the role of fathers and male partners in the household and ensure that new partners or new household members are properly assessed.
2.33.	I check the kitchen cupboards, fridge, toilets, bathroom and all bedrooms as needed (especially where neglect is an issue) and I am clear about what constitutes an acceptable standard.
2.34.	I have ensured the core group meets regularly (as a minimum monthly) and progresses the implementation of the child protection plan. If the outcomes required are not being delivered through the plan, I will ensure the core group agrees actions to address this.
2.35.	I have ensured that the core group have prepared the report for the CP Review Conference at least 48 hours before the Review Conference and share it with parents, carers and children/young people in advance.
2.36.	I use supervision to explore my feelings about the case and to ensure that I am



	putting the child/young person first in my considerations.
2.37.	If I identify anything in my work with the child/young person or family, or household members, that gives rise to additional concern for the safety of the child/young person I discuss it immediately with my manager, or a covering manager and agree actions to be taken.

**CHILDREN IN CARE – All children and young people whom the local authority has a responsibility to, has a placement that meets their needs, has a multi- agency care plan that is timely and is reviewed regularly.**

STANDARD	KEY AREA
2.38.	I have arranged to see the child/young person within the timescales relevant to the type and duration of the placement.
2.39.	I have arranged a multi-agency care planning meeting within 5 working days of the placement.
2.40.	I have made sure contact between a child/young person and his or her family and friends is actively promoted and facilitated, provided that this is in their best interests. (Ensure planning clearly outlines all contact, and the venue is in the child/young person's best interests).
2.41.	I have clearly explained to the child the reasons for coming into care. I have explored possible family and friends placements and discussed the foster placement, carers and contact arrangements with parents, siblings and friends, and endeavoured to answer all the child/young person's concerns.
2.42.	I have ensured that all the requisite CIC paperwork, including the risk assessment and placement plan is completed to a high standard and that the carer/residential unit have a copy. If the child/young person is accommodated under S20 of the Children Act 1989 I have obtained the signature of a parent who has parental responsibility. I have ensured that the parent has the capacity to consent and have used an interpreter if necessary.
2.43.	I have made the necessary arrangements for a health assessment.
2.44.	I have regularly seen the child/young person in accordance with procedural requirements.

2.45.	The child/young person has my contact details and knows how to get in touch with me if they need, or want to. (This includes email address and mobile telephone number, as well as office number and number if I am not available.)
2.46.	I have seen the child/young person alone (if not I have recorded the reasons why not), and I have taken account of their views and feelings, and where this is not possible I have explained why in an appropriate way.
2.47.	I have completed the 'my goals' work with the children/ young person.
2.48.	I have given the child/young person information regarding advocacy and independent visitor services and encouraged them to utilise these services where appropriate.
2.49.	I have ensured that the parents have the relevant written paperwork regarding their child coming into care, that they understand the reasons why, and what might happen next. I have kept in regular touch with them and involved them in assessments and plans as appropriate. Where necessary I have used an interpreter or advocate ensuring that they understand what is happening
2.50.	I have made sure that children / young people, their parents or carers are aware of the complaints procedures.
2.51.	I have promoted the child's identity through life story work (where planned) and by ensuring that they have personal possessions, information, photos and material relating to their family.
2.52.	There is an assessment completed for the child/young person in care at least every 12 months.
2.53.	I have ensured that a PEP (Personal Education Plan) planning meeting takes place and that there is an up-to-date PEP recorded on the child/young person's case record.

2.54.	I have consulted health, education and other agencies/individuals involved with the child/young person (or their family) as part of the process of assessment and care planning.
2.55.	I have taken account of the child/young person's needs in relation to race, ethnicity, language, disability, gender, sexuality and placement with siblings.
2.56.	If the young person is 16+ I have ensured there is an up-to-date Pathway Plan recorded on the child/young person's case record.
2.57.	I have consulted with the child/young person about who is in attendance at their children looked after review meeting and they know they can be accompanied by a relative, close friend or advocate to enable them to participate and provide them with support.
2.58.	The child/young person has been encouraged and assisted to participate in their review meeting either directly, or by other means (e.g. video recording, written submission etc).
2.59.	I have encouraged parents to participate in the review process.
2.60.	I have shared and discussed my report with the child/family in advance of the review.
2.61.	I have ensured that all relevant consultation documents have been completed and provided for every review (child/carer/parent).
2.62.	I have ensured that I have recorded fully the achievements of the child/young person and that these are included in their Life Story work where appropriate (e.g., swimming badges, youth awards, school team membership etc).
5.26.	<u>Care Leavers</u> – I have met the same level of standards for care leavers as per CLA, but in accordance with leaving care regulations.

**GOOD PRACTICE IN CASE RECORDING – All children and young people for whom the local authority has responsibility for have records that include an accurate chronology, genogram, plan and reviews with up to date case notes and evidence case notes of management oversight of key decisions.**

STANDARD	KEY AREA
6.1.	As far as possible, I have recorded information as I go along; in any event case notes will be recorded within five working days.
6.2.	My recording evidences that I regularly see the child/young person alone (where it is appropriate to do so e.g. in relation to age, language etc).
6.3.	My recording reflects the complexity of the child’s life and the interventions of key people in their life. My recording differentiates between observed fact, reported fact and interpretation/opinion. I have included relevant research in the analysis section.
6.4.	I have recorded where interpreters, specialist workers or tools and activities have been used to facilitate communication, this is clearly recorded.
6.5.	I have ensured that the child/young person’s views are clearly identified in the case record. As far as possible I have recorded what the child/young person told me, in their own words and I have confirmed this with the child or young person.
6.6.	I have cross-referenced entries in LCS, where necessary and relevant, and where I have duplicated, across siblings/family members, I have ensured that the information is pertinent to each particular child, and is personalised as necessary.
6.7.	I have made sure that my recording is respectful to the child, young person and their family.

6.8.	I have ensured that where other professionals or family/friends have provided information, the case notes reflects the person's name, contact number and who they are.
6.9.	I ensure that the Case Chronology is updated on a monthly basis and that the entries are relevant to the child/young person.

We have also developed a key messages for practice document, this was designed to pull out the main factors and considerations to think about when undertaking statutory children's work :



key messages to  
develop practice.doc

### **Useful information and links**

- A-Z of learning and development [Learning and Development webpage](#)
- Lancashire Children's Trust Website <http://www.lancashirechildrenstrust.org.uk/>
- Lancashire Safeguarding Children Board <http://www.lancshiresafeguarding.org.uk/>
- Research In Practice (RIP) <http://www.rip.org.uk/>
- Research In Practice for Adults <https://www.ripfa.org.uk/>
- NSPCC Website <http://www.nspcc.org.uk/>
- Information on the Professional Capability Framework (PCF) for Social Workers and completion of portfolio <http://www.tcsw.org.uk/pcf.aspx>
- Social Care Institute of Excellence <http://www.scie.org.uk/>
  
- **There is also a link below to the ASYE intranet page:**

[ASYE CYP Documents and Guidance](#)

Please click on the link above for the Learning and Development webpage and apply for the following courses:

- LCS Commissioning Module
- LCS Child in Need
- LCS Child Looked After
- LCS Child Protection
- LCS Introduction Module
- Political Awareness
- Serious Case Review Briefings For CYP Directorate Staff
- Social Care Complaints - Effective Complaints Handling Stress is Normal, It's How You Manage Your Staff With it That Counts
- Stress Risk Assessment
- Welcome to CYP

### **Supporting Your Future**

Information on Supporting your future and support in relation to the restructure can be found on the following sites:-

- [Supporting your future](#)
- [Learning and Development](#)
- [Employee Support](#)
- [Knowledge Management](#)
- [Health and Wellbeing](#)
- [Occupational Health](#)

## SECTION FOUR: SHADOWING OPPORTUNITIES

# SHADOWING OPPORTUNITIES



The following shadowing opportunities have been arranged for you during induction. Please can you make contact with each worker prior, to and confirm they have arranged suitable shadowing opportunities. These could include home visits, meetings, or time at the desk looking at caseloads and work.

The purpose of these shadowing arrangements are to

- (a) Get to know your colleagues
- (b) Insight into their and your own practice – strengths and area's to develop via joint visits
- (c) Familiarise yourself with cases for which you hold responsibility
- (d) Familiarise yourself with Lancashire County Council's processes and procedures

Date	Time	Worker	Designation
			Experienced social worker
			ASYE
			ASYE
			ASYE
			Senior CSW
			CSW
			CSW / Leaving Care
			CSW



It is important that you utilise the induction period to familiarise yourself with the process and procedures within duty

**Other tasks to complete during induction**

- Read and familiarise self with supervision procedure
- Book in supervision sessions with your manager

**SECTION FIVE: AGENCY VISITS**

# AGENCY VISITS

It may not be possible, and is not essential to complete agency visits during your induction period. Below however is a list of agencies who we routinely work with (and who new social workers are asked to visit as part of their induction). Those highlighted in red and recommended agencies to request a visit to

For example:

Agency	Contact person	Contact details
Women's Aid		
Sure Start		
Children's Centre		
Young Carers		
CAMHS		
Inspire		
YMCA		
School Nurse		
Health Visitor		
Awaken Team (CSE		
MASH – The Hub Accrington		
Aspire Futures Support YP		
YP Service – The Zone		
YP Service – The Zone		

**Newly appointed Social Workers to Lancashire**

**CART & MASH Induction/Shadowing**

**Actions needed prior to Induction/Shadowing**

Action Needed	Date Completed	Name and Signature
Training and Access to LCS		

	Date	
Understanding of where to access Tri-X and Pan Lancashire Safeguarding Procedures	Date	
Understanding of where to access Lancashire's Continuum of Need guidance	Date	

### Induction/Shadowing

Day	Date		Name and Signature	CART PM Signature
Day One		<ul style="list-style-type: none"> <li>• Tour of Customer Access/CART/MASH</li> <li>• Shadowing of Customer Access covering Mailbox and Telephony</li> <li>• Shadowing of CART/MASH</li> <li>• Shadow CSA in CART/MASH</li> <li>• Shadow MASH Early Help</li> </ul>		
Day Two		<ul style="list-style-type: none"> <li>• Shadow Social Worker In MASH</li> <li>• Reading of CART/MASH Processes Procedures</li> <li>• Complete case using LCC and Pan Lancashire procedures and CART/MASH processes.</li> </ul>		
<b>Feedback on Induction Shadowing.</b>				
<b>Ideas for Improving the Induction/Shadowing</b>				







## **Regular Meetings that take place in your district**

- Team Briefs are held every Tuesday morning at 9.30am and must be attended by all social workers, practice managers, and support workers. Team Manager's lead the team briefs. You can attend whichever brief is nearest to your diary commitments for that day
- Locality Team meetings are held on a monthly basis. Team Managers lead team meetings. These are held for each separate team (e.g. Team 1a, 1b, 1c and Team 2a, 2b, 2c and Team 3a, 3b, 3c)

Team 3 locality team meetings are held at YPS

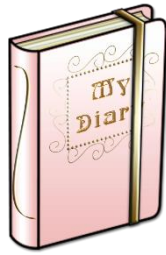
- Some teams have mini meet's separately (i.e. Team 3a – Team 3b – Team 3c). These are arranged by the Practice Manager
- Development days – These are held every 6 months and led by the Senior Manager. One event focusses on learning and development; the other focusses on team building
- Managers (Senior, Team and Practice) meet every Monday morning for a managers briefing. These are held at 9.30am
- Locality Management meetings are held on a monthly basis for Senior, Team and Practice Managers. These are held on a rotation basis across the different bases within the locality
- Agency Panels are attended by Senior, Team and Practice Managers and these are held on a monthly basis on a rotation basis across the different bases

Please can you add all these routine meetings to your diary.....

Monday – Management brief at 9.30am MANAGERS ONLY

Tuesday – Team Brief at 9.30am

I will forward you the dates of the Locality Managers monthly meetings; Agency Panel monthly meetings and Locality monthly team meetings



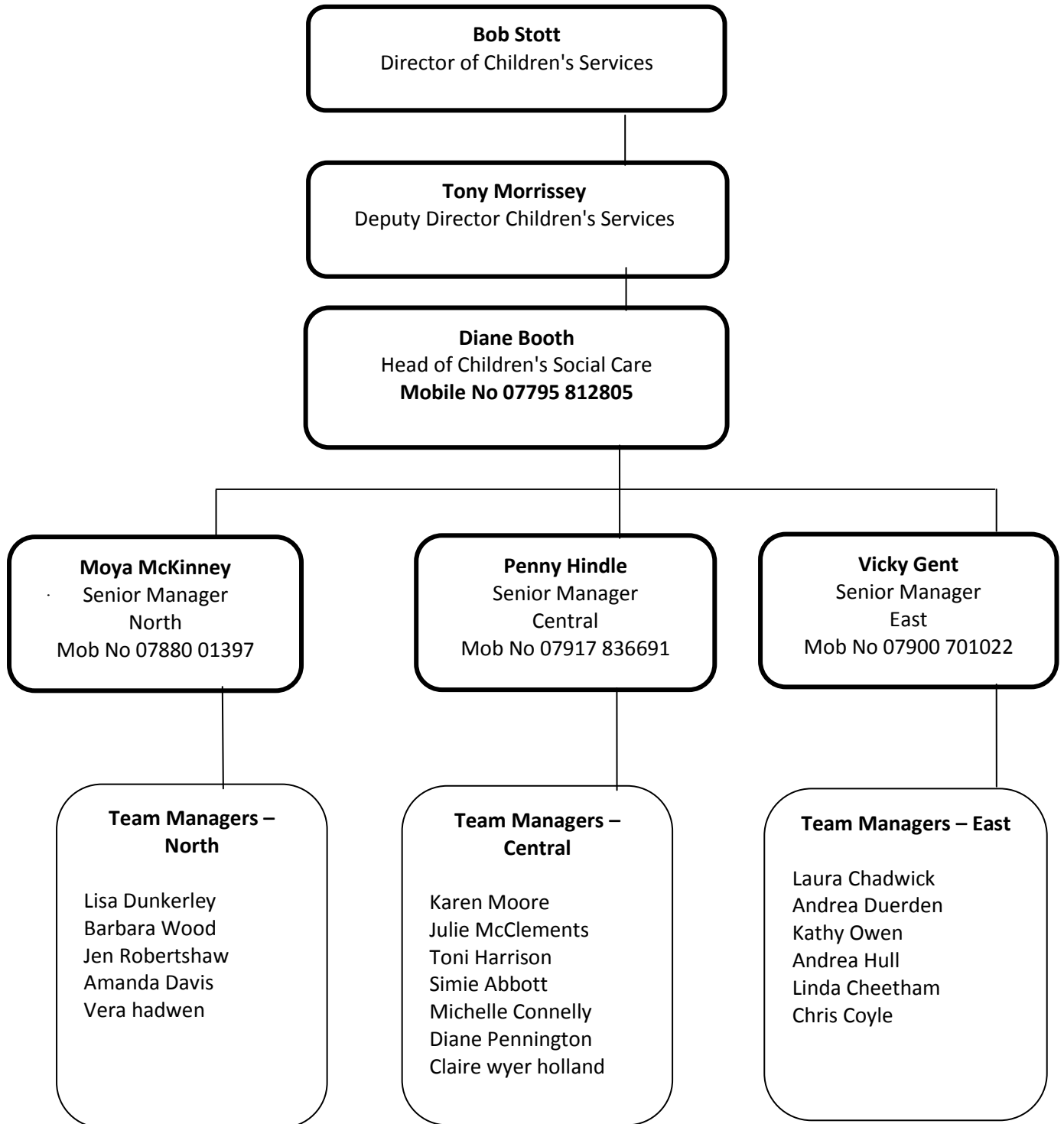
**Dates for your diary**

<b>Date</b>	<b>Time</b>	<b>Venue</b>	<b>Event</b>
			Probation review meeting – month 1
			Probation review meeting – month 3
			Probation review meeting – month 6
			Meeting to discuss ASYE
			Team 3 management meeting
			Locality Team Meeting



You also need to know who the senior managers are within the organisation. Here is a structure chart.

### Children's Social Care Management Team structure



**You also need to know who makes what decisions as this is for different managers to make. The link below takes you into the scheme of delegation document. This explains which level of management agrees what.**



Casework Scheme  
of Delegation (3) - 2