COGS Business Processes and Procedures


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The purpose of this document is to give an overview of back office COG procedures using the Early Help Module (EHM, previously eCAF). It highlights the steps to take when receiving an Early Assessment or request from the SPOC. All incoming referrals and requests for support are received in to the Early Help SPOC. Triage activity is then undertaken and a decision is made on what should be allocated to each COG locality. The COG Manager / Senior Targeted Family Support Worker will filter out requests which can be supported at the following levels:

- **Universal** - Single Agency Response
- **Universal Plus** – Cases that can be managed by Commissioned Services and Approved Lead Professionals. Note some Universal Plus cases may be allocated to the COG where there is no approved Lead Professional. In these cases administrative support will be given and the appropriate worker from the allocated COG area will offer advice and guidance.
- **Level 3** – COG/Targeted Support
- **Level 4** – If a request or Early Help Assessment meets the Level 4 threshold the relevant agency will be asked to complete MARF.

The majority of cases that will be allocated to COGs will meet the Targeted Services Response Level Three. These will be allocated to the appropriate COG area where the COG Manager/ Seniors will decide which Service would best meet the needs of the Child and Family and allocate the case to the appropriate key worker.

This document should provide you with enough information on how to manage a case systematically. If you require further information please contact the ISM Team Helpdesk for advice and guidance.

Please note a separate document outlines the Early Help Desk processes and procedures.

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The ISM Team is part of the Children and Families Service (CYPS) of Sandwell Children’s Trust and is responsible for deploying and administering the Early Help Module.

As EHM access is not restricted to Sandwell Children’s Trust staff, the team’s role also extends to non-trust services, such as Sandwell MBC, health trusts, schools and voluntary organisations.

**Telephone 0121 569 8102**

**Email – ecaf_queries@sandwell.gov.uk**
The first data protection principle requires, among other things, that you must be able to satisfy one or more “conditions for processing” in relation to your processing of personal data. Many (but not all) of these conditions relate to the purpose or purposes for which you intend to use the information.

The conditions for processing take account of the nature of the personal data in question. The conditions that need to be met are more exacting when the information being processed is sensitive personal data, such as information about an individual’s health or criminal record.

However, our view is that in determining if you have a legitimate reason for processing personal data, the best approach is to focus on whether what you intend to do is fair. If it is, then you are very likely to identify a condition for processing that fits your purpose.

One of the conditions for processing is that the individual has consented to their personal data being collected and used in the manner and for the purposes in question. You will need to examine the circumstances of each case to decide whether consent has been given. In some cases, this will be obvious, but in others the particular circumstances will need to be examined closely to decide whether they amount to an adequate consent.

Consent is not defined in the Data Protection Act. However, the European Data Protection Directive (to which the Act gives effect) defines an individual’s consent as:

“…any freely given specific and informed indication of his wishes by which the data subject signifies his agreement to personal data relating to him being processed”.

The fact that an individual must “signify” their agreement means that there must be some active communication between the parties. An individual may “signify” agreement other than in writing, but organisations should not infer consent if an individual does not respond to a communication – for example, from a customer’s failure to return a form or respond to a leaflet.

Consent must also be appropriate to the age and capacity of the individual and to the particular circumstances of the case. For example, if your organisation intends to continue to hold or use personal data after the relationship with the individual ends, then the consent should cover this. Even when consent has been given, it will not necessarily last forever. Although in most cases consent will last for as long as the processing to which it relates continues, you should recognise that the individual may be able to withdraw consent, depending on the nature of the consent given and the circumstances in which you are collecting or using the information. Withdrawing consent does not affect the validity of anything already done on the understanding that consent had been given.
You should review whether a consent you have been given remains adequate as your organisation’s relationship with an individual develops, or as the individual’s circumstances change.

Consent obtained under duress or on the basis of misleading information does not adequately satisfy the condition for processing.

The Data Protection Act distinguishes between:

- the nature of the consent required to satisfy the first condition for processing;
- the nature of the consent required to satisfy the condition for processing sensitive personal data, which must be “explicit”.

This suggests that the individual’s consent should be absolutely clear. It should cover the specific processing details; the type of information (or even the specific information); the purposes of the processing; and any special aspects that may affect the individual, such as any disclosures that may be made.

As explained above, a particular consent may not be adequate to satisfy the condition for processing (especially if the individual might have had no real choice about giving it), and even a valid consent may be withdrawn in some circumstances. For these reasons, an organisation should not rely exclusively on consent to legitimise its processing. In our view, it is better to concentrate on making sure that you treat individuals fairly rather than on obtaining consent in isolation. Consent is the first in the list of conditions for processing set out in the Act, but each condition provides an equally valid basis for processing personal data.

Information Sharing is covered in Integrated Working Training (Safeguarding Level 2)-
www.bookwhen.com/sandwellearlyhelptraining

Sandwell Safeguarding Board -
http://www.sandwelllscb.org.uk/

Please consult your line manager if you have any queries regarding consent.
## Timescales

The table below highlights the timescales that apply to all cases that come into the Early Help Desk and allocated to the COG area and Services.

<table>
<thead>
<tr>
<th>Service</th>
<th>Task</th>
<th>Timescales</th>
<th>Review meetings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single Point of Contact (SPOC)</td>
<td>Receipt of referral to allocation</td>
<td>24 hours</td>
<td>N/A</td>
</tr>
<tr>
<td>COG Management</td>
<td>Decision and allocation</td>
<td>24 hours</td>
<td>N/A</td>
</tr>
<tr>
<td>Universal+ Coordination</td>
<td>Allocation and hold initial Team Around the Family (TAF)</td>
<td>20 working days</td>
<td>12 weekly</td>
</tr>
<tr>
<td>COG –Services Coordination</td>
<td>Initial Home Visit</td>
<td>10 working days from allocation</td>
<td>As appropriate (weekly)</td>
</tr>
<tr>
<td>COG –Services Coordination</td>
<td>Outcome Star / My Star</td>
<td>Within 20 working days from allocation</td>
<td>12 weekly and closure</td>
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<tr>
<td>COG –Services Coordination</td>
<td>Child Wishes and feelings</td>
<td>12 weekly</td>
<td>As appropriate</td>
</tr>
<tr>
<td>COG –Services Coordination</td>
<td>Case Summary</td>
<td>12 Weekly</td>
<td>12 Weekly</td>
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<td>COG –Services Coordination</td>
<td>Troubled Family Criteria Form</td>
<td>Initial from Allocation</td>
<td>After each TAF and Closure</td>
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<tr>
<td>COG –Services Coordination</td>
<td>Progress to meeting</td>
<td>20 working days from allocation</td>
<td>12 weekly or as appropriate</td>
</tr>
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</table>

They operate from point of receipt to first intervention and subsequent reviews. It is essential that these timescales are adhered to so it meets Early Help’s commitment to Children, Young People and Families in providing the right services in a timely fashion.

“Delivering services at the right time and in the right way to help families help themselves to meet the needs of their children”

These timescales are reported on in various reports that are presented to senior management and the DfE. If you have queries regarding these please consult your line manager or the ISM team.
Output Routes to COG - V1.7

- **Case referred into SPOC**
  - **Decision within 24 Hours**
    - Universal
      - Decision: SPOC Senior EH coordinator recommendations added.
      - Close - Single Agency
    - Universal Plus
      - Decision: COG Manager / Senior Targeted Family Support Worker
    - **Level of service required**
      - **Step Down from Level 4 Services SAAT/GEN**
        - Decision: SPOC Senior EH coordinator recommendations added.
        - Please follow relevant ‘Step Down’ process for Level 4 service
        - Decision: COG Manager
      - Targeted Services recommendations added by SPOC EH Senior Coordinator Decision: COG Manager
    - Task assigned to appropriate worker
    - Universal plus chair meeting
      - (initial EHC support if appropriate)
      - Universal plus types up meeting
    - Early Help COG arrange first TAF
    - Universal plus chair meeting
      - (initial EHC support if appropriate)
      - Universal plus types up meeting
    - Review meeting
      - Notify Early Help to send invites for next meeting
    - Close or escalate through COG or MASH
  - **Level of service required**
    - Level 4 service
      - Decision: SPOC Senior EH coordinator recommendations added.
      - Universal Plus
        - Decision: SPOC Senior EH coordinator recommendations added.
        - Please follow relevant ‘Step Down’ process for Level 4 service
        - Decision: COG Manager
      - Targeted Services recommendations added by SPOC EH Senior Coordinator Decision: COG Manager
    - Task assigned to appropriate worker
    - Universal plus chair meeting
      - (initial EHC support if appropriate)
      - Universal plus types up meeting
    - Early Help COG arrange meeting
    - Universal plus chair meeting
      - (initial EHC support if appropriate)
      - Universal plus types up meeting
    - Early Help COG arrange meeting
    - Early Help COG arrange meeting
      - Follow process Targeted Services Progress to multi-agency
    - COG Business Support Officer type up minutes
    - Review meeting
      - Yes
        - Early Help Co-Ordinator chairs review meeting
        - COG Business Support Officer types meeting
        - Review meeting
          - No
            - Close to Universal or escalate
    - No
      - Yes
        - Early Help COG arrange meeting
        - Early Help Co-Ordinator chairs 3rd meeting and hands over to Universal Plus

- **Decision** within 24 Hours
  - Yes
    - Universal plus chair meeting
      - (initial EHC support if appropriate)
      - Universal plus types up meeting
    - Review meeting
      - Notify Early Help to send invites for next meeting
    - Close or escalate through COG or MASH
  - No
    - Yes
      - Universal plus chair meeting
        - (initial EHC support if appropriate)
        - Universal plus types up meeting
      - Review meeting
        - No
          - Early Help COG arrange meeting
          - Early Help Co-Ordinator chairs 3rd meeting and hands over to Universal Plus
    - No
      - Yes
        - Universal plus chair meeting
          - (initial EHC support if appropriate)
          - Universal plus types up meeting
        - Review meeting
          - Yes
            - Early Help Co-Ordinator chairs review meeting
            - COG Business Support Officer types meeting
            - Review meeting
              - No
                - Close to Universal or escalate
  - Yes
    - Universal plus chair meeting
      - (initial EHC support if appropriate)
      - Universal plus types up meeting
    - Review meeting
      - Notify Early Help to send invites for next meeting
    - Close or escalate through COG or MASH

- **Universal**
  - Decision: SPOC Senior EH coordinator recommendations added.
  - Close - Single Agency

- **Universal Plus**
  - Decision: COG Manager / Senior Targeted Family Support Worker
  - Task assigned to appropriate worker
  - Universal plus chair meeting
    - (initial EHC support if appropriate)
    - Universal plus types up meeting
  - Early Help COG arrange meeting
  - Universal plus chair meeting
    - (initial EHC support if appropriate)
    - Universal plus types up meeting
  - Early Help COG arrange meeting
  - Early Help Co-Ordinator chairs 3rd meeting and hands over to Universal Plus

- **Targeted Services recommendations added by SPOC EH Senior Coordinator Decision: COG Manager**
  - Follow process Targeted Services Progress to multi-agency

- **Progress to Initial Home Visit/ Meeting**
  - Yes
    - Universal plus chair meeting
      - (initial EHC support if appropriate)
      - Universal plus types up meeting
    - Review meeting
      - Notify Early Help to send invites for next meeting
    - Close or escalate through COG or MASH
  - No
    - Yes
      - Universal plus chair meeting
        - (initial EHC support if appropriate)
        - Universal plus types up meeting
      - Review meeting
        - No
          - Early Help COG arrange meeting
          - Early Help Co-Ordinator chairs 3rd meeting and hands over to Universal Plus
    - No
      - Yes
        - Universal plus chair meeting
          - (initial EHC support if appropriate)
          - Universal plus types up meeting
        - Review meeting
          - Yes
            - Early Help Co-Ordinator chairs review meeting
            - COG Business Support Officer types meeting
            - Review meeting
              - No
                - Close to Universal or escalate

- **Service allocates worker**
  - Worker arranges TAF
  - Chains meeting
    - Types meeting
      - Review meeting
        - No
          - Early Help COG arrange meeting
          - Early Help Co-Ordinator chairs 3rd meeting and hands over to Universal Plus
      - Review meeting
        - Yes
          - Early Help Co-Ordinator chairs review meeting
          - COG Business Support Officer types meeting
          - Review meeting
            - No
              - Close to Universal or escalate
    - Yes
      - Early Help Co-Ordinator chairs review meeting
      - COG Business Support Officer types meeting
      - Review meeting
        - No
          - Close to Universal or escalate
Output Routes to COG

Responsibility – Early Help Representative within SPOC

The Early Help SPOC Senior will review all incoming Early Help Assessments along with the Triage Checklist once they have been inputted by the Early Help Business Support Officer.

They will use both the Assessment and the Triage checklist, which identifies other agencies working with the family to make an informed decision about the route that the episode will follow.

The decision routes are:
- Universal – Single Agency
- Universal+ Coordination
- Step Down from Level 4 Services
- Allocate to Integrated Services

Universal – Single agency

Responsibility – Early Help Representative within SPOC

The Early Help SPOC Senior Coordinator has made a decision that the case does not require multi-agency support as the issues recorded relate to only one service. In this situation, the episode completed stage will be chosen and the case closed. The Parents/guardians/young person will be sent a letter informing them of the decision and which agency it is advised that they contact. The referrer will update either by letter or electronically.

EHM Data Entry Checklist

Responsibility – All Staff

The following is a checklist of key data fields that you must keep up to date on EHM. As a result, the work carried out by you and your partners, with children and families will be accurately recorded and reported on. In addition, there is important information about families, such as CIN codes and ethnicity which must be recorded for each child. All data must be up to date by the last day of each month.
<table>
<thead>
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<th>Guidance</th>
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| Adding key agencies            | ✓ If you are working with a child, ensure that you are listed on the key agencies tab  
|                                | ✓ If there are other agencies working with a child, add them to the list on the key agencies tab  
|                                | Note: If these are not kept up to date, invites and expected attendance at TAF meetings will not be accurate  
| Closing key agencies           | ✓ When you are no longer working with a child, end date your involvement on the key agencies tab  
|                                | ✓ If other agencies are listed and you are aware that they are no longer working with the child then end date them too  
| Lead Professional (LP)         | ✓ When checking TAF minutes ensure that the agreed Lead Professional’s name has been inputted - the default setting is the Episode Coordinators name which is not always correct  
|                                | ✓ Input the agency for whom the Lead Professional works  
|                                | Note: This will automatically update all siblings listed in the meeting area  
| CIN Codes                      | ✓ For all new cases allocated to the COG Integrated Services Team and Universal+, it is the COG Manager’s responsibility to add at least one Primary CIN Code and a Secondary CIN Code (if required), which can be found on the Further Details tab.  
| Ethnicity                      | ✓ If no ethnicity is recorded, clarify at first TAF meeting and update system accordingly. Ordinarily the Chair would be responsible for this however, any worker can update ethnicity.  
| Locality coding - Children’s Centre cluster | ✓ If the case is being assigned to a Children’s Centre Cluster to manage then you must update their locality on the personal details tab to show their cluster  
| Case notes and consent         | ✓ When sending case notes to other active users please ensure that they are on the consent statement or they will not be able to receive the case note. In order for them to have access you must check the consent statement from the case pathway and if their name is not listed then add them to it  
|                                | Note: When creating or updating consent the system will automatically update all siblings listed in the Family Grouping  
| Address and Phone Number       | ✓ When updating/changing an address on the system, ensure that you tick the other relevant family members that will also be moving/have moved to that address.  
|                                | Note: The system will show a tick box of which family members to be included in address change.  
| Complete initial Troubled Families form | ✓ If the family meet the criteria for the Troubled Families Agenda they should be flagged as such in personal details. This needs to be case noted using the appropriate drop down option ‘Troubled Families Indicator’ and the COG Manager and TF Co-coordinator need to be notified.  

[IL0: UNCLASSIFIED]
Note: For each of the above (unless otherwise stated), you must carry out the same action for each sibling in the family. Certain elements are not automated by the systems family working functionality as it is not appropriate. For example, different CIN classification may apply to different family members as each child’s needs should be looked at individually.

Should you have any queries please speak to your COG Manager in the first instance.
Progress to Meeting Commissioned Services/Approved LP v1.3

1. **SPOC Early Help Representative** select 'progress to meeting' and 'Home Visit', and assign to the COG worktray.
2. **COG Manager** makes the decision that the case can be managed by Universal+.
3. **COG Manager** follows relevant process for allocation to Universal+ dependent on agency.
4. **Commissioned Service / Approved LP** pick up from worktray.
5. Set up date, attendees and send out invites by appropriate method.
6. Meeting takes place.
7. Meeting outcomes (minutes/action plan) typed up by relevant worker saved and reassigned to relevant chair of meeting.
8. Chair of meeting reviews and amends as appropriate, then finalises TAF plan.
9. Task appears in managers worktray.
10. **Task returns to Coordinator tray**.

**Yes**

- **Allocated worker** 'Completes meeting'.
- From Active Episode – Decisions tab, Allocated worker selects next step.
- Review meeting.
- Next step identified from TAF plan or Manager decision: Process from Decision re: route of progress.

**Rejected**

- **Give reason**.
- **Make necessary amendments and finalise**.
- **Task returns to Coordinator tray**.

**No**

- **Review Outcomes / TAF plan**.
- **Allocate worker** 'Completes meeting'.
- From Active Episode – Decisions tab, Allocated worker selects next step.
- Review meeting.
- Next step identified from TAF plan or Manager decision: Process from Decision re: route of progress.
Universal+ Coordination

Responsibility – Early Help Representative within SPOC & COG Manager

A decision has been made by the Early Help SPOC Senior Coordinator that the case meets the criteria for a multi-agency Team Around the Family Meeting (TAF).

Early Help SPOC Business Support process the Early Help Assessment and complete the Triage checklist.

Early Help SPOC Senior Coordinator reviews the Early Help Assessment and checklist and selects ‘progress to meeting’ from the decisions tab within the Assessment they then select the COG group to be the meeting arranger and assign it to the relevant COG work tray.

The COG Manager will make the decision that the case is not complex and can therefore be managed by a commissioned service or an approved, trained Lead Professional. The COG Manager will then reassign the ‘progress to meeting’ task to the appropriate group tray and add the agency to Key Agencies within the child and siblings’ demographics. The COG Manager will also send a case note to both the agency group, ISM group and Triage Group with a type of Lead Professional Allocation to ensure that the agency are aware and the case transfer can be completed.

An up to date list of all Approved Lead Professionals is available on the shared drive and is updated after each readiness meeting.
Transfer to Family Offer. Multi-Agency Case – eCAF Process V1.6

Allocation to Children’s Centre at point of referral

Decision made by COG Manager to refer to CC at point of receipt.

COG Manager adds to consent the appropriate Children’s Centre group:
- Action for Children (A4C)
- Smethwick
- Oldbury
- West Bromwich
- Wednesbury
- CC: Murray Hall
- Tipton
- Rowley Regis

COG Manager to add appropriate Children’s Centre to Key Agencies
COG Manager/Senior Targeted Family Support worker to complete Initial Troubled Families Form

COG Manager creates case note to log transfer with type of ‘Lead Professional transfer’, including siblings and copies in: ISM Team
Relevant Children’s Centre Cluster Group
Triage Group

Click on the meeting box in flowchart, select task details and select reassign task enter any comments in the ‘reason for decision’ tab

At the bottom of the list select other user and choose appropriate cluster group from all groups in address book and reassign the organise meeting task

END
Transfer to Schools - eCAF process v1.6

Locality – Allocation to Schools at point of referral

- Decision made by Key worker or TAF Members to transfer to School at point of referral
  - Discussion with COG Manager to approve transfer
  - Check are all outstanding tasks are up to date? i.e. minutes
    - Yes
    - Key Worker adds to consent the appropriate members of School Staff
    - COG Manager/ Senior Targeted Family Support Worker creates case note to log transfer with type of ‘Lead Professional transfer’ and include an update of case including siblings and copies in:
      - Key worker
      - COG Business Support
      - ISM Team
      - Relevant School Staff
    - Key Agencies to be updated by COG Manager to reflect end date of Current Key Worker for child and siblings. Add School member of staff and comment to state LP role and date of transfer
  - No
    - Other tasks to be completed by Key Worker
    - If minutes - Casenote and raise with locality Business support to complete minutes.

- Check Episode History. If episode coordinator is internal then carry out case transfer to new worker
- Reassign any tasks to new worker

END
**Step Down from Care Management CIN Plan – 6.2**

26/10/2017

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**Within 24 hours of receipt of case note**

- SW adds a case note on LCS using case note Type ‘CIN Step-down’ to ‘Early Help SPOC’ tray with date of meeting. Minimum 10 working days notice – DO NOT CLOSE OR TRANSFER ON LCS

- COG Manager/advisor decides if case can de-escalate and liaises with COG Manager and Social Worker/Team Manager.

- SW sends general note using type ‘CIN Meeting’ to both Appropriate COG Tray and Triage group advising of receipt of invite and restrict to eCAF Group.

- Early Help SPOC Sr Coordinator logs on EH MASH DB with source of: LCS Stepdown – Step Down Decision

- Outcome of: Awaiting Step Down Decision

- Add action notes as appropriate

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**Within 5 days of CIN Meeting**

- SW updates CIN meeting minutes & appropriate documents on LCS and completes plan with an outcome of Referral to EHM and sends to CMTM for authorisation.

- CMTM closes case on LCS as appropriate

- Early Help SPOC Sr Coordinator updates EH MASH DB outcome to Step Down Accepted – Awaiting handover

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**Workflow not received after 5 working days.**

- Early Help SPOC Sr Coordinator updates EH MASH DB outcome to ‘Step Down Accepted – not Workfl owed’. Case note added on LCS using type ‘case update’ with SW and TM notified to request

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**Exception:**

- Query

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**Follow dispute resolution process**

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**END**
Step Down from Level 4 Services

Responsibility – Early Help Representative within SPOC & COG

There are a number of points in the Children’s Social Care process when a child/young person and their family may be 'stepped down' to Integrated Services:

- At any point in a Child in Need (CIN) Plan when it is agreed that Children’s Social Care no longer have a role
- After a Single Assessment has been carried out by Safeguarding and Assessment and Children’s Social Care intervention is not required

If a social worker requires assistance during the Step Down process they may contact the Early Help SPOC representative for support and consult the Early Help SPOC Senior Coordinator.

Step Down from Care Management CIN Plan

In order to ‘step down’ a case to Targeted Services where the child is subject to CIN the allocated Social Worker should send a case note on LCS using case note type CIN stepdown to MASH Managers tray with the date of the next CIN meeting (minimum of 10 days notice)

Upon receipt of the email the Early Help Business Support Officer creates the child on EHM if their record does not already exist and sends a general note using type ‘CIN Meeting’ to the appropriate COG work tray and the Triage Group. Early Help Desk Senior Coordinator records this on the Early Help database to show outcome of ‘Awaiting Step Down Decision’.

The COG Manager will review the details of the meeting and allocate a Key Worker to attend the meeting. This should be recorded in general notes with the type ‘Integrated Services Key Worker Allocation’ and the worker notified. The COG manager will also record in Key Agencies the name of the allocated worker with appropriate start date.

At the meeting, the Early Help representative should ensure they take accurate minutes and that consent is explained and sought. The Early Help Representative and the members of the meeting will decide whether it is appropriate for the case to be transferred to Integrated Services.

CIN Meeting – Rejected

If it is agreed that the case remains with a Care Management then the Early Help Representative should record this decision on general notes with type ‘CIN Meeting – Rejected’ and send to both the COG Manager and Triage Group. She / He should also provide a copy of their minutes to the COG Business Support Officer to type up and attach in documents and restrict to ‘eCAF Group’. The Early Help Desk Senior Coordinator will update the Early Help database appropriately to reflect outcome of ‘Step Down Rejected’.
CIN Meeting – Accepted

If it is agreed that the case may be transferred to Early Help or Targeted Services the Targeted Services Representative should record the outcome of the meeting in general notes with the type ‘CIN Meeting – Accepted’ and send to both the COG Manager and the Triage group. The Early Help Desk Senior Coordinator updates the Early Help database appropriately to reflect that the case has been accepted ‘Step Down Accepted - awaiting handover’.

The Care Management Team will, within five working days, update LCS with the new plan and minutes with an outcome of transfer to EHM. The Social Worker sends this to the Team Manager for authorisation. The Team Manager adds the Management decision case note and authorises the transfer and selects the information to step down. This should include most recent plan, CSE Screening Tool, Management Decision case note and consent.

The Early Help BSO will complete the transfer on EHM. The Early Help Desk Senior Coordinator will update the Early Help database outcome to ‘Step Down Accepted’.

If after 5 working days the workflow on LCS has not been received the Early Help Senior Coordinator should choose ‘Step Down Accepted – not workflowed’ should be chosen. This report will be run from the Early Help database on a daily basis to ensure that no child/family wait longer than five working days for Integrated Services intervention.

After the five working day waiting period the Early Help SPOC Business Support Officer will then begin the Early Help Episode for the child/family on EHM with the start reason of ‘Step Down from Care Management – CIN’ and a start date of the CIN Meeting; input the consent and within the Early Help Assessment question ’Please identify the child and/or family's needs’ will input ‘please see attached CIN Plan and Minutes’ or if no workflow has been received ‘CIN meeting – Accepted not received via workflow’. The Early Help SPOC Business Support Officer will populate and finalise the Early Help Assessment and carry out the Triage Checklist. She / He will send a letter to the parent/guardian/young person to inform them that Early Help have received the handover and attach the CIN Plan and minutes to documents restricted to ‘eCAF group’. The decision task is then reassigned to the Early Help Desk Senior Coordinator.

The Early Help Desk Senior Coordinator then chooses progress to meeting and selects the COG Business Support worktray as meeting arranger.

The COG Business Support officer then progresses the meeting in one of two ways dependent on if the minutes were received within the 5 working day period.
CIN Minutes Received
The COG Business Support officer creates the meeting from the date of the CIN Meeting and utilises the Social Worker’s minutes as the initial Team Around Family (TAF) meeting. The COG Business Support Officer will finalise the minutes and send to the COG Manager for authorisation. The Early Help Representative’s minutes will be attached in documents and restricted to ‘eCAF group’. Future meetings will be arranged as per the ‘progress to meeting integrated services process’.

CIN Minutes not-received
The COG Business Support officer creates the meeting from the date of the CIN Meeting and utilises the Early Help Representative’s minutes as the initial Team Around Family (TAF) meeting. The COG Business Support Officer will finalise the minutes and send to the COG Manager for authorisation. The Social Worker’s minutes will be attached in documents and restricted to ‘eCAF group’ as and when they are received. Future meetings will be arranged as per the ‘progress to meeting integrated services process’.

Step Down from Safeguarding and Assessment Team (SAAT) – Single Assessment

In order to step down a case from Single Assessment the SAAT Team Manager contacts the relevant COG Manager to discuss the case. If the step down is agreed the SAAT Team Manager sends a case note to MASH Managers Tray with full details and date of next home visit with family minimum 5 working days notice.

The case note should be forwarded to the Early Help SPOC Business Support Officer who will then create the child on EHM. They will then send a general note to both appropriate COG Tray and Triage group advising of receipt Early Help Desk Snr logs on early help database with source of: LCS Stepdown – Step Down Decision and an outcome of: Awaiting Step Down Decision Add action notes as appropriate.

The COG Manager allocates a worker and records in case note with type ‘Integrated Services Key Worker Allocation’ restrict to ‘eCAF Group’

Once the home visit has taken place:

Step down Rejected
If it is agreed that the case remains with Children’s Social Care then the Early Help Representative should record this decision on general notes with type ‘Singla Assessment Visit – Rejected’ and send to both the COG Manager and Triage Group. She / He should also provide a copy of their minutes to the COG Business Support Officer to type up and attach in documents and restrict to ‘eCAF Group’.

The Early Help Desk Senior Coordinator will update the Early Help database appropriately to reflect outcome of ‘Step Down Rejected’.
**Step Down – Accepted**

If it is agreed that the case may be transferred to Services the Early Help Representative should record the outcome of the meeting in general notes with the type ‘Single Assessment visit – Accepted’ and send to both the COG Manager and the Triage group. The Early Help Desk Senior Coordinator updates the Early Help database appropriately to reflect that the case has been accepted ‘Step Down Accepted - awaiting handover’.

The Social Worker completes the Single assessment with an outcome of referral to EHM and sends to SAAT team Manager for authorisation. The Team Manager adds the Management decision case note and authorises the transfer and selects the information to step down. This should include most recent assessment, CSE Screening Tool and Management Decision case note.

The Early Help BSO will complete the transfer on EHM.

The Early Help Assessment is processed by the Early Help Desk as shown in the process.

The COG Manager will pickup the task from the COG Work tray and review the case and allocate an Integrated Services Key Worker. She / He will add the worker to Key agencies with the appropriate type:

- Targeted family Support Worker
- Early Help Social Worker

The COG Manager will add a case note with type ‘Integrated Services Key Worker Allocation’ to record the decision.

Dependent on allocation the COG Manager may request that a standalone Early Help Assessment be completed to gain further information. If this is the case then a case note should be added to reflect this request.

The COG Manager will add attendees to the meeting and reassign the organise meeting task to the relevant COG Business Support Group work tray.

The meeting will be arranged as per the ‘progress to meeting – integrated services’ process.
COGS Business Processes and Procedures V4_7

Progress to Meeting Targeted Services 1.9

1. EH SPOC Trage decision to allocate to COG for Targeted Services
2. EH SPOC Sr selects 'Progress to meeting'
3. EH SPOC Sr selects COG tray as meeting organiser
4. COG Manager decides level of need
5. EHSW or TFSW
6. CDG Manager selects self as organiser, add worker to key agencies, add TFS Key Worker allocation to case note, add attendees and reassign to TFSW or EHSW worker's tray.
7. COG Manager/Senior initiates and completes the Initial Troubled Families Form.
8. COG Manager/Senior add Case Summary into case note.
9. EHSW or TFSW contacts family to arrange visit/meeting
10. EHSW, TFSW Worker carries out visit/meeting
11. Meeting takes place
12. Reassign meeting task to COG BSO tray and send case note to advise which information should be input into the meeting outcomes.
13. Meeting outcomes (minutes/action plan) typed up by relevant Business Support, saved and reassigned to relevant chair of meeting.
14. Chair of meeting reviews and amends as appropriate, then finalises TAF plan.
15. Assign to COG manager for Approval/Rejection
16. Task appears in manager's work tray.
17. Allocated worker 'Completes meeting'
18. Review meeting
19. Next step identified from TAF plan or COG Manager decision:
   - Closure — single agency
   - Step Down to Universal+ Transfer to LCS
20. Update consent to include or remove meeting attendees
21. COG Manager/Senior updates Case Summary on Case Notes every 3 Months
22. Give reason
23. Task returns to Coordinator tray
24. Make necessary amendments and finalise

Follow 'Universal+ Coordination' process
Targeted Family Support

For the Targeted Family Support Worker allocation the COG Business Support officer will contact the family and referrer in order to arrange a suitable date and venue. She / He will send invitations to the meeting in the following way:

- Parent/Guardian/Child/Young Person - letter
- EHM User – internal invite via EHM
- Other professionals – secure email / MoveIT

The method of invitation is recorded on the meeting task within EHM.

The Targeted Family Support Worker will attend the meeting and formulate the plan and minutes and arrange a further meeting date if appropriate. These will be handed in to the COG Business Support Officer within 24 hours and will be typed within five working days.

A copy of the plan and minutes will be sent to the Parent/guardian /Young Person via the post. Professionals will be expected to check the system. If the Lead Professional does not have access to the system they will be sent a copy electronically and booked onto EHM training.

Responsibility – Early Help Representative within SPOC & COG

The Early Help Desk Senior Coordinator makes the decision that the case is to be managed by Targeted Services. She / He chooses the ‘progress to meeting’ option and selects the appropriate COG Work tray.

The COG Manager will pickup the task from the COG Work tray and review the case and allocate a Targeted Services Key Worker. She / He will add the worker to Key agencies with the appropriate type:

- Targeted Family Support Worker
- Early Help Social Worker

The COG Manager will add a case note with type ‘Targeted Services Key Worker Allocation’ to record the decision.

Dependent on allocation the COG Manager may request that a standalone Early Help Assessment be completed to gain further information. If this is the case then a case note should be added to reflect this request.

The COG Manager will add attendees to the meeting and reassign the ‘organise meeting’ task to either:

- the relevant COG Business Support Group work tray if it is for Early Help.
- directly to the allocated worker’s tray if it is for Early Help Social Work or Intensive Family Support identifying the appropriate timescales in comments, please refer to the timescales table.
Early Help Social Work

For Early Help Social Work allocation, the key worker will contact the family to make arrangements to visit family or hold first meeting within 10 days.

The Early Help Social Worker will carry out the relevant activity and case note the COG BSO tray with case note type ‘meeting’ to advise a brief overview of what should be included in the minutes of the first meeting and who attended. They should also reassign the ‘organise meeting’ task to the COG BSO tray.

The BSO will type up the EHSW first meeting using the details from the case note and using the meeting type of either:

EH SW Initial Home Visit.
The Key Worker should also be listed as the Lead Professional within the meeting.

The COG Business Support Officer will then reassign the meeting outcomes to the Key Worker who will check, finalise and select the COG Manager to authorise.

The COG Manager will either approve the minutes or reject them. If the minutes are rejected they will automatically be returned to the Key Worker tray for amendment and resubmission.

Once the minutes are approved there are 4 pathways which to case may follow:

- Arrange next meeting
- Step Down to Universal+
- Closure – Episode Completed
- Transfer to LCS

If there is to be a review meeting the COG Business Support Officer will arrange the meeting according to the date and time recorded in the minutes.

Support visits as required and EHSW to record as a Visit and Case note added with advice and guidance.

If the decision is to Step Down to Universal+ then the relevant process should be followed dependent on the Lead Professional / Commissioned Service to which the case will be assigned. Please see Transfer of case from Level 3 to Level 2.

If the case is to be closed then the closure process should be followed. This will vary dependent on the reason for closure.

If the case is to be ‘stepped up’ to Children’s Social Care’ please follow the Transfer to LCS process.
Outcomes Star

Responsibility – COG / Universal+ / Lead Professional

To be completed within 20 days of allocation and then 12 weekly and at point of closure

Outcomes Star should be completed for each family/child dependent on the case and following the guidance given during training.

Both the Family Star Plus and the My Star are available to complete within the minutes of a meeting of EHM or as a standalone form if conducted outside of a Team Around the Family Meeting.

Full instructions on how to complete the Outcomes Stars are available as a manual on request from the ISM team via email ecaf_queries@sandwell.gov.uk.
Transfer of cases from Level 3 to Level 2

Transfer to Schools - eCAF process v1.5

Locality – Allocation to Schools

Decision made by Key worker or TAF Members to refer to School after work carried out

- Key worker to add casenote type of 'Case Summary' to provide and update of case to date
- Discussion with COG Manager to approve transfer
- Check are all outstanding tasks are up to date? i.e. minutes

If minutes - Casenote and task with locality Business support to complete minutes.
Other tasks to be completed by Key Worker

- Yes
  - Key Worker adds to consent the appropriate members of School Staff
- No

COG Manager creates casenote to log transfer with type of ‘Lead Professional transfer’, including siblings and copies in:
- Key worker
- COG Business Support
- ISM Team
- Relevant School staff

- Key Agencies to be updated by COG Manager to reflect end date of Current Key Worker for child and siblings. Add School member of staff and comment to state LP role and date of transfer

- Business Support
- ISM Team

Reassign any tasks to new worker

Check Episode History, if Episode Coordinator is internal then carry out case transfer to new worker

END
Transfer of cases from Level 3 to Level 2

Responsibility – Early Help Desk, COG & ISM Team

The Transfer to Level 2 Services process varies slightly depending on the service which will be managing the case. In all cases there should be a discussion between the Key worker and COG Manager to agree the handover and all outstanding tasks should be completed. A ‘Case Summary’ case note should be added for each transfer by the current Key Worker.

Transfer to Schools

Once handover to Schools has been agreed between the COG Manager and Targeted Services Key Worker the Key Worker should ensure that the appropriate school based members of staff are added to the consent statement, if they are not already listed.

The COG Manager will create a case note to log transfer with type of ‘Lead Professional transfer’, including siblings and copies in:

- Key worker
- COG Business Support
- ISM Team
- Relevant School staff

Key Agencies to be updated by COG Manager to reflect end date of Current Key Worker for child and siblings. Add School member of staff and comment to state LP role and date of transfer.

The COG Business Support Officer will reassign any relevant tasks to the School member of staff’s Work tray on EHM
The ISM Team will carry out the Case Transfer on EHM.
Transfer to Family Offer. Multi-Agency Case - eCAF process v1.7

Locality – Allocation to Children’s Centre

Decision made by Key Worker or TAF Members to refer to CC after work carried out.

- Key worker to add case note type of ‘Case Summary’ to provide and update of case to date.
- COG/Locality Manager adds to consent the appropriate Children’s Centre group:
  - Action for Children (A4C)
  - Smethwick
  - Oldbury
  - West Bromwich
  - Wednesbury
  - CC- Murray Hall
  - Tipton
  - Rowley Regis

Key Worker creates case note to log transfer, including siblings and copies in:
- COG Manager
- COG Business Support
- ISM Team
- Relevant Children’s Centre Group

Key Agencies to be updated to reflect end date of current Co-Ordinator for child and siblings.

Check outstanding tasks are up to date i.e. minutes

Reassign any tasks to new worker

END

Check Episode History. If episode coordinator is internal then carry out case transfer to new worker

END
Transfer to Children’s Centre

Once handover to one Children’s Centres has been agreed between the COG Manager and Key Worker. The COG Manager should ensure that the appropriate Children's Centre Cluster group are added to the consent statement, if they are not already listed.

The COG Manager should update the personal details within the child’s and siblings’ basic demographics on EHM and select the appropriate locality dependent on the area. The available localities are:

Action for Children (A4C)
- Smethwick
- Oldbury
- West Bromwich
- Wednesbury

CC- Murray Hall
- Tipton
- Rowley Regis

The COG Manager will create a case note to log transfer with type of ‘Lead Professional transfer’, including siblings and copies in:
- Targeted Services Key Worker
- COG Business Support
- ISM Team
- Children’s Centre Cluster Group

Key Agencies to be updated by the COG Manager to reflect end date of Current Key Worker for child and siblings. Add the Children Centre and comment to state LP role and date of transfer.

The COG Manager / Senior Targeted Family Support Worker will reassign any relevant tasks to the Children’s Centre Cluster Group work tray on EHM.

The ISM Team will carry out the Case Transfer on EHM once the relevant agency has replied to advise which of their workers the case has been allocated to.
Decision made by Key Worker or TAF Members to close to a single agency after work carried out

Key Worker sends case note to COG Manager requesting closure using casenote type "Closure" and include a closure summary

COG Manager approves outstanding minutes, completes meeting and chooses ‘episode completed’ from decision tab with active episode

Complete episode completion process with end reason of single agency with appropriate agency:
Single Agency - Barnardos Families Support Sandwell Families
Single Agency - Children’s Centre Oldbury Area
Single Agency - Children’s Centre Rowley Area
Single Agency - Children’s Centre Smethwick Area
Single Agency - Children’s Centre Tipton Area
Single Agency - Children’s Centre Wednesbury Area
Single Agency - Children’s Centre West Bromwich Area
Single Agency - Children’s Centre Young Services
Single Agency - Connexions
Single Agency - DECCA
Single Agency - Health
Single Agency - Options for Life
Single Agency - Other
Single Agency - School

Input end date and complete retention record

COG Manager to update key agencies with end date of current & key Worker and all other agencies. Input end dates for CIN codes
COG Manager sends case note to CDG Business Support Officer advising of closure so that they may send a letter to parents advising them which agency to contact

CDG Business Support Officer sends letter to parent/guardian/Young person advising of closure

END
Responsibility - COG

If it is decided at a TAF meeting that multi agency involvement is no longer required the IS Key Worker will ensure that the minutes are complete and up to date before sending a case note to the COG Manager requesting closure.

If the COG Manager feels that this is appropriate they will approve outstanding minutes, completes meeting and chooses ‘episode completed’ from decision tab with active episode.

The COG Manager completes the episode completed stage and selects one of the following end reasons:
- Single Agency - Children's Centre Oldbury Area
- Single Agency - Children's Centre Rowley Area
- Single Agency - Children's Centre Smethwick Area
- Single Agency - Children's Centre Tipton Area
- Single Agency - Children's Centre Wednesbury Area
- Single Agency - Children's Centre West Bromwich Area
- Single Agency - Young Parent's Services
- Single Agency - Connexions
- Single Agency - DECCA
- Single Agency - Health
- Single Agency - Other
- Single Agency - School

The COG Manager will update the Key Agencies with the end date of the current Integrated Services Key Worker and all other agencies and input end dates for the current Primary and secondary CIN codes. They will then send a case note to the COG Business Support Officer to advise them of the closure.

The COG Business Support Officer sends a letter to parent/guardian/young person to advise them of the closure with details of which agency will be working with them.
Step up – Level 2 -3/4

Step up Universal+ to Levels 3 or 4 v1.4

Decision made by Universal Plus/Lead professional that needs have increased and additional support required

Level

Level 4—Child protection

Phone MASH 0845 351 0131

Follow Level 4 referral process

Accepted by CJC

Make sure all meetings and information up to date. If at decision stage Select ‘transfer to ICS’ otherwise start step manually

Early Help Team/Lead Professional to ensure all minutes are up to date and complete

Concerns remain.

Bring TAF meeting forward or Support for LP from Targeted Services

Issues resolved remain at Tier 2

Concerns eased

Weekly COG process followed

Refer to Weekly COG

Lead Professional to ensure all minutes are up to date and complete

Early Help Note/Weekly COG referral form completed with up to date information and submitted

End

Level 3

Call COG Manager/Senior Targeted family Support Worker

Discussion takes place to decide on next step

Weekly COG process followed

End

[IL0: UNCLASSIFIED]

COGS Business Processes and Procedures V4_7

13/12/2018
Step up Universal + to Targeted Services – Business Support v1.5

COG Manager - reviews and finalises Targeted Service referral Form and liaises with BSO.
Manager to casenote BSO with appropriate vulnerability level, Primary need, Reason, if siblings are to be included, consent)
Updates CIN Codes

COG BSO - Start Early Help episode (inc. siblings), select Appropriate start reason:
- Step Up – Universal+ to EH\OW
- Step Up – Universal+ to FST
- Step Up – Universal+ to IFS
- Historic cases:
  - Step Up – CAF to CIN
  - Step Up – CAF to FST
  - Step Up – CAF to FIP

Complete Consent Statement as appropriate

COG BSO creates EHA, stating in ‘Please identify the child/family needs’ the comment ‘please see Targeted Services Referral Form’ Populate and finalise

COG BSO performs system checks/uploads Triage Support Checklist and reassigns to COG tray with comment ‘Please review Targeted Service Referral and allocate’

COG Manager makes decision progress to meeting allocates and reassigns to key worker (following progress to meeting process)

End

24 Hours
Step up – Level 2 -3/4

Responsibility – COG

If a decision is made by a Universal+ Coordinator that they feel the case has become more complex and can no longer be managed at Universal+ level there are two routes they should follow dependent on the need of the family.

Immediate Child Protection Concerns

The Universal+ Coordinator should follow their agencies Child Protection policy and procedures. In order to refer in to Children’s Social Care the worker should call MASH on 0121 569 3100 and express their concerns.

The Universal+ Coordinator should Make sure all meetings and information up to date. If at decisions stage Select ‘transfer to ICS’ otherwise start step manually.

The COG Business Support Officer will process the request and start and reassign episode closure task to Universal+ Co-Coordinator to complete.

No Child Protection Concerns

If the Universal+ Coordinator does not have immediate child protection concerns but feels that the case has escalated they should in the first instance contact the relevant Early Help Coordinator at the COG relating to the area in which the child lives. They will offer appropriate advice and guidance which may result in any issues being resolved.

Once this discussion has taken place and it is agreed that additional support is required there are three routes which may be taken

- Bring TAF Meeting forward
- Refer to weekly COG
- Escalate to Level 3 immediately

The Targeted Family Support Worker should inform the COG Manager of their discussion and record the outcome on a case note.
If the decision is to bring the TAF meeting forward the Targeted Family Support Worker will attend the meeting. Once the meeting has taken place a discussion will occur between the Targeted Family Support Worker and Universal+ Coordinator regarding the next step. If the issue has been satisfactorily resolved the case can remain at Universal+ level and Targeted Family Support Worker can cease involvement. If it is deemed that the case should Step up to Targeted Services the Universal+ Coordinator should complete the Targeted Services Referral Form on EHM and send a case note to the relevant COG Manager outlining that they have done so.

If the agency wishes to refer the child/family to the Weekly COG meeting or the decision from the discussion with the Targeted Family Support Worker is to refer immediately to Integrated Services then in both cases the referrer should complete the Targeted Services Referral Form on EHM and send a case note to the relevant COG Manager outlining that they have done so and ensure all minutes and plans are up to date and approved.

Once the Targeted Services Referral Form has been received it will be reviewed by the COG Manager. If it is agreed that the case should refer to COG panel then the COG Panel referral route will be followed. If it is deemed by the COG Manager that the case should be managed by Integrated Services they will close the Universal+ episode with the end reason ‘Step Up Universal+ to Integrated Services’, update the key agencies and vulnerability level. The COG Manager will then send a case note to the COG Business Support Worktray advising that they wish for the COG Business Support Officer to open a new episode at Integrated Services level. The COG Manager should include appropriate vulnerability level, primary need, reason, which siblings are to be included and consent.

The COG Business Support Officer will process the request as per the ‘Step up Universal+ to Integrated Services – Business Support’ process.

The COG Business Support Officer will start the episode with the appropriate start reason and the information provided from the COG Manager. The COG Business Support Officer creates EHA, stating in ‘Please identify the child/family needs’ the comment ‘please see Targeted Services Referral Form’. They then populate and finalise the assessment.

The COG Business Support Officer performs system checks/uploads Triage Support Checklist and reassigns to COG tray with comment ‘Please review Targeted Service Referral and allocate’.

COG Manager makes decision progress to meeting allocates and reassigns to key worker (following progress to meeting process).
Referrals to Other Services
Responsibility – Lead Professional / Key worker

Referral to Family Solutions

Referrals in to FST – v1.4

1. Early Help Desk BSO: Create child on eCAF
2. BSO to load with start reason “FST Crisis Response”
3. Vulnerability level as appropriate
4. Complete consent as appropriate
5. Complete eCAF with “See case note for information”
6. BSO to add additional case information/reason for referral in case notes using case note type “FST Crisis Contact”
7. Populate and finalize
8. Triage Checklist carried out
9. Click Submit Referral

Senior Co-ordinator to update the MASH Database, progress to meeting & selects Family Solutions Team Group as meeting arranger. Senior Co-ordinator checks FST Referral form and clicks send to FST.

FST Manager Accepts/ Rejects Referral Form. FST Manager allocates worker & updates worker in key agencies with “FST Early Help Key Worker” & re-assign meeting task to allocated worker.

FST Manager adds case note with case note type “FST Worker Allocation” with key worker and copies in ISM Team for case transfer.

FST Worker contacts family

Notes from visit typed up in Meeting Outcomes, KW to choose “FST First Visit” as meeting type finalise plan & send to FST manager to approve.

Management Decision

Further work required

Escalate to Children’s Social Care following the Step Up process

Step down to TAF. Follow Step Down Process

Co-working Withdraw involvement, return case to allocated team

JB to end key agency of worker, Add case note “Closure Summary” to allocated COG manager & worker to inform them of decision

FST Worker to add case note “Closure Summary” including JB. JB to end episode with appropriate end reason

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13/12/2018
Referral to Family Solutions Team

Responsibility – Lead Professional / Key worker

If it is felt by the key worker that the family require the services of the Family Solutions Team (FST) they should in the first instance discuss this with their line manager. If clarification is required for a Key Worker or Lead Professional External COGs advice can be sought from the COG Manager. If it is deemed that the case should Step up to FST the worker should complete the FST Referral Form on EHM and send a case note using type ‘referral’ to the relevant COG Manager outlining that they have done so.

The completed form is automatically forwarded to the Early Help SPOC Representative for processing then on to the FST Team.
Referral to Black Country Women’s Aid

Sandwell Women’s Aid Inbound v1.4 – May 2015

- **Self referral**
- **Allocated by SWA**

**Via BST**
- Workflow received on ICS to EH Desk
- SWA representatve
- EH Desk records on EH Desk MASH database with appropriate outcome
- SWA receive contact from BST representative
- SWA to workflow internally on system and allocate worker
- Allocated worker to offer family EHA
- Accept – Decline

- Start episode and record as consent denied
- Complete EHA on eCAF and submit
- EH Desk process as usual and tie up with EH Desk MASH database
- Episode completed

**Via MASH**
- Workflow received on LCS to EH SPOC
- SWA to workflow internally on system and allocate worker
- Allocated worker to offer family EHA
- Accept – Decline

- Complete EHA on eCAF and submit
- EH Desk process as usual and tie up with EH Desk MASH database
- Episode completed

**Internal transfer**
- SWA worker to complete EHA on eCAF
- SWA to complete casenote to COG tray and DAA worker to advise of allocation (case note type 'DAA Allocation') reassign task to COG tray
- COG Manager to add DAA to key agencies
- DAA to take load on case
- DAA will work alongside Integrated Services Key Worker and add notes and documents as appropriate

**Via COG (Integrated Services)**
- Referral Form completed by COG worker on eCAF
- Referral received into SWA Group tray
- SWA to complete casenote to COG tray and DAA worker to advise of allocation (case note type 'DAA Allocation')
- SWA cases
- Co worked cases

**SWA to workflow internally on system and allocate worker**

**All other levels – contact within 48 hours**

**High Risk – contact within 24 hours**

- SWA to workflow internally on system and allocate worker
- Allocated worker to offer family EHA
- Accept – Decline

**Progress to meeting selected. SWA group tray selected as organiser**

**SWA to complete casenote to COG tray and DAA worker to advise of allocation (case note type 'DAA Allocation')**

**COG Manager to add DAA to Key Agencies and casenote ISM Team to carry out case transfer**

**COG Manager to add DAA to Key Agencies**

**DAA to take load on case**

**DAA will work alongside Integrated Services Key Worker and add notes and documents as appropriate**

**COG Manager to add DAA to Key Agencies**

**DAA to take load on case**

**DAA will work alongside Integrated Services Key Worker and add notes and documents as appropriate**

**COG Manager to add DAA to Key Agencies**

[**IL0: UNCLASSIFIED**]
Referral to Black Country Women’s Aid

Responsibility – Lead Professional / Key worker

If a lead Professional within a COG wishes to make a referral to Black Country Women’s Aid (BCWA) they should in the first instance discuss this with the COG Manager.

If it is deemed that the case would benefit from intervention with SWA the worker should complete the SWA Referral Form on EHM.

SWA will then review the referral and allocate as appropriate notifying the COG Manager via case note type ‘DAA Allocation’.

If it is felt that the case should remain with the Lead Professional and be co-worked with SWA the COG Manager will add the Domestic Abuse Advocate (DAA) to key agencies and the DAA will work alongside the Integrated Services process.

If the case can be transferred to SWA as the Lead Professional the COG Manager will complete a case transfer case note to the ISM Team. The DAA will follow the ‘Integrated Services Progress to Meeting’ process.
Referral to Multisystemic Therapy

MST Process v1.2

MST Referral Process

Worker identifies need for MST

Worker calls MST Clinical Supervisor to discuss case and agree suitability

Meets inclusion and exclusion criteria

Worker to liaise with Team Manager / Group Head to gain approval for referral

CSE screening tool to be completed and attached to Early Help System

Referral form completed from drop down on Early Help System and submitted to MST

Form received into MST tray

Form picked up by MST Clinical Supervisor, who will review and make a decision

MST supervisor advises MST BSO of outcome and records on Early Help System

Referrer advised of panel date and expected to attend

Panel Meeting

- Accepted
  - Panel meeting outcome recorded on Early Help System
  - Referrer and family notified of decision
  - An MST Therapist will gain additional information
  - MST Therapist contacts family within 24 hours of decision
  - MST Therapist and supervisor meet family within 5 days to check consent and MST readiness. Complete visit/risk assessment template and consent form
  - Case allocated to therapist, recorded on Early Help System and Key agencies updated

- Not accepted
  - Panel meeting outcome recorded on Early Help System

MST supervisor advises MST BSO of outcome and records on Early Help System

Referrer notified of decision and reasons

MST BS0 to create record on Early Help System and input referral form and attach CSE screening tool

CSE Screening tool completed electronically and emailed from a secure email address to MST_Team@sandwell.gov.uk

CSE screening tool to be completed and attached to Early Help System

Dudley

Sandwell

See ‘MST episode recording process’
Referral to Multisystemic Therapy

Responsibility – Lead Professional / Key worker

If it is felt by the key worker that the family require the services of the Multisystemic Therapy Team (MST) they should in the first instance discuss this with their line manager. The Worker should then contact the clinical supervisor for MST to discuss the case 0121 569 8272. The worker must then gain approval from their line manager to complete the referral to MST.

If it is deemed that the case meets the criteria for MST the worker should complete the MST Referral Form on EHM.

The completed form is automatically forwarded to the MST team for processing; the worker will be expected to attend the panel meeting to discuss the case.

The MST Clinical Supervisor can advise the date and time of the panel when the case is discussed.
Children Missing Process not known to EH v1.1

Not known to Early Help / Targeted Services

Call from parent / family member to COG Manager/Integrated Services Key Worker/EH Desk to advise child is missing

Caller to be informed that they MUST contact the Police

Refuse

If person refuses COG Manager/Integrated Services Key Worker/EH Desk to take details and call Police on their behalf

Agree

COG Manager/Integrated Services Key Worker to add general note to child’s record with note type: ‘missing status: missing’

Copy in worker Rob Cotterill – Barnardos Black Country Base

Barnardos worker to begin the missing notification form on the CSE workspace and follow the CSE procedure for missing/ found and return interviews

For advice and information regarding missing children please call,
Barnardos on 01922 644338 and speak to Rob Cotterill, Beth Wooldridge or Anemarie Griffiths
Or contact Rob on 07710937341 or by email robert.coterill@barnardos.org.uk
Rob is based within MASH on Tuesdays and Thursdays
Open to Early Help Services

Call from parent / family member to COG Manager/Integrated Services Key Worker/EH Desk to advise child is missing

Caller to be informed that they MUST contact the Police

Agree

COG Manager/Integrated Services Key Worker/EH Desk to add casenote to child’s record with casenote type ‘missing status: missing’ and

Copy in worker Rob Cotterill – Barnardos Black Country Base and COG Manager

If person refuses COG Manager/Integrated Services Key Worker/ EH Desk to take details and call Police on their behalf

Refuse

Barnardos worker to begin the missing notification form on the CSE workspace

Barnardos notified

Child Found

Early Help Service Notified

Rob Cotterill – Barnardos Black Country Base to add casenote to child’s record with casenote type ‘missing status: found’ and

Copy in worker Rob Cotterill – Barnardos Black Country Base. CSE BSO complete the found notification on CSE workspace

Barnardos worker carries out return interview within 72 hours of return, including completing CSE Screening tool and inputs onto to child’s record on eCAF. This is then automatically sent to the CSE Manager for decision

For advice and information regarding missing children please call, Barnardos on 01922 644338 and speak to Rob Cotterill, Beth Woolridge or Annemarie Griffiths Or contact Rob on 07710 917141 or by email robert.coterill@barnardos.org.uk Rob is based within MASH on Tuesdays and Thursdays

Children Missing Process v1_1

For advice and information regarding missing children please call, Barnardos on 01922 644338 and speak to Rob Cotterill, Beth Woolridge or Annemarie Griffiths Or contact Rob on 07710 917141 or by email robert.coterill@barnardos.org.uk Rob is based within MASH on Tuesdays and Thursdays
Child Sexual Exploitation (CSE) and Missing

**CSE**

Where key workers believe there is a CSE concern, complete CSE screening tool and send.

When conducting the CSE screening tool please attach the document using the type Internal Document: ‘CSE Screening Tool’.

If the CSE screening identifies no concerns then no case note is required however, if any areas of need are identified then a case note with the outcome using case note type ‘CSE Screening’ should be added and the CSE Team Group notified.

The CSE Screening Tool should be reviewed as and when appropriate according to CSE guidelines.

Should the CSE Screening Tool raise additional concerns these should be discussed with the COG Manager and where required the CSE Team Manager. If a step up to CSC is required please follow the **Transfer to LCS Process**.

**Missing**

**Responsibility – COG**

Should the COG Manager or Services Key Worker receive a call from a parent or family member to advise that a child is missing they must in the first instance advise the caller to contact the Police. If the caller refuses to contact the Police the COG Manager or Integrated Services Key Worker should do this on their behalf.

The COG Manager or Targeted Services Key Worker will then need to determine if the family is known to Early Help.

If the family are not currently open to Early Help the COG Manager or Services Key Worker should create the child’s record, if required, and add a general note using the case note type of ‘Missing Status: Missing’ and copy in the Barnardo’s worker based within the CSE Team.

If the family are known to Early Help the COG Manager or Services Key Worker should add a case note using the case note type of ‘Missing Status: Missing’ and copy in the Barnardo’s worker based within the CSE Team.

The Barnardo’s worker or CSE Business Support will begin the CSE episode and missing notification form on the CSE workspace and follow the CSE team processes. The Barnardo’s worker should notify the COG manager via case note when the child is found.
Children Missing Education

CME Process v1_1 from September 2015

Refer to Early Years

Is child/young person (for whom the LA is responsible) of statutory school age (5-16)?

No

Under 5

No further action required

No

and missing education (CME) or missing from education (CfME)?

No

Age 16-21 and NEET

Refer to Connexions

Yes

Is the child/young person on school roll/EHE or Alternative Provision?

No

Age 16-21 and NEET

Refer to Connexions

Yes

School admission form completed?

No

Signpost/contact admissions for school

application form 0121 569 8147

Under 5

No

Over 16

No

Refer to Connexions

Yes

Check regular attendance

≤89%

NFA/monitor

≥90%

≤89%

≥90%

You/school/provider to consider a referral to Attendance and Prosecution Service

Contact admission for progress 0121 569 8765

No

School allocated to child/young person

Yes

Person responsible for attendance to complete request for Support Form

Send details to 0121 569 8147 attendance_service@sandwell.gov.uk

No

School allocated to child/young person

Contact Senior Practitioner for area:

North: Wendy Butler

Central & South West; Charlotte Rowley 0121 569 8347

At School Partnership

With admissions awaiting outcome

Referred to CME Officer Louise Morris 0121 569 8347

Outcome

Please see Attendance and Prosecution Team guidance for contact details for A&PO for schools and COG contacts

NB: Mahmood Ahmed is named contact for YOS/Integrated Services/Early Help

Mahmood to check half termly data on all CME & CME (for whom the authority are responsible)
Children Missing Education

Responsibility – COG

For those children aged 5-16 who are receiving support from Early Help, Targeted Services Key Worker workers are requested to confirm education provision and regular attendance plus refer where required.

The definitions of Children Missing Education statuses are:

**CME (children missing education):** Children and young people not on a school roll and not in receipt of education at school or otherwise (electively home educated / alternative provision).

**CMfE (children missing from education):** Children/ young people on a school roll and not in receipt of full time education (those on part-time time tables etc). DfE guidance confirms that part time provision should be temporary only and that there should be a plan of reintegration for the pupil to return to full time learning a.s.a.p. (unless medical circumstances prevent this).

**Not on School Roll**

If the child is CME or CMfE and they are not on school roll then the Integrated Services Key Worker should confirm whether a schools admission form has been completed.

If not, then the Targeted Services Key Worker should signpost the parent or contact directly the schools admissions service to obtain a form.

If a school admission form has been completed then the Integrated Services Key Worker should contact admissions for the status of the application for a school place.

**On School Roll**

If the child is CME or CMfE and is on school roll the Targeted Services Key Worker should check the regular attendance. If this is 90% or higher, this should be monitored as part of the ongoing support to the family. If it is 89% or lower, the person responsible for attendance should complete a Request for Support Form. If this is not suitable or is refused the Services Key Worker should complete the form and email to attendance_service@sandwell.gov.uk.
Early Help Note (EHN) completed by practitioner

Submit

Business Support Officer to check Early Help Note tray and determine locality in which the family live from address (using postcode checker)

If it is for the area in which you cover click ‘pickup’

If the locality within the EHN is incorrect, amend accordingly, save changes and then reassign to COG Group tray

CDG Manager/EH Co-Ordinator will review the EHN, check within the ‘pre-assessment forms’ tab for previous EHNs and determine if the case needs to be reviewed at the monthly CDG Panel meeting

Are there any previous EHNs, if so use professional judgement to determine if further action required.

Have family been offered EHA? Is there a consent issue?

Does case require CDG Panel?

End

Click in to the Finalise Early Help Note Page
Select Yes
Enter reasons
Finalise the EHN by clicking complete button
Add to agenda for next CDG panel meeting

Click in to the Finalise Early Help Note Page
Select No
Enter reasons
Finalise the EHN by clicking complete button

The agency should review after 6 weeks
Business Support can chase this upon receipt of report
Have family refused EHA? If so, use professional judgement as to whether CDG involvement required
**Early Help Note (EHN)**

*Responsibility – COG*

An Early Help note may be completed by a professional working with the family who are not currently known to Early Help at any time. This enables the professional to determine if an EHA is required. They should register the EHN on EHM when:

- Needs can be met by the Service without progressing to EHA
- An EHA is offered to child/family but refused

The EHN is also used for open cases where the following conditions apply:

- Family Non-Engagement
- Agency Non-Engagement
- Spot Purchase Request
- Service Required Not Available

Upon receipt of the EHN into the Early Help Note tray which is monitored by all COG BSOs. The COG BSO should check in which locality the family live, if this is the areas for the COG in which they work they should click ‘pickup’ and amend the locality within the form if required. The form should then be reassigned to the COG Worktray for the COG manager to review.

The COG Manager will then review the EHN and make the decision if the case requires COG intervention:

- If no and the details do not raise concerns on Finalise Early Help Note page select no and enter the reason and finalise
- If yes, on Finalise Early Help Note page select yes, enter reason, finalise and add to agenda for next COG meeting.
To be completed by COG Manager

Decision made by COG manager to escalate to CSC following Weekly COG or discussion with CM TM

Log in to eCAF and search for child

Select correct child record and ensure all necessary documentation is complete. Ensure Key Agencies are up to date (Note: this task could be completed by COG BSO)

On the Basic Demographics Tab under Actions select 'Create a new Contact'

Utilise Family working if applicable and include siblings – Start Contact

- Complete Contact Details
- For Details of person making contact select any other professional & add your details
- Source Type - Other or COG
- Contact Method - Select Weekly COG Discussion
- Reason - MASH New Contact – Child Protection (C)
- MASH New Contact – Child In Need (C)
- Add details - add appropriate information regarding the Step Up

Click Save and Finalise Record

The Contact has now automatically gone to SPOC/MASH

MASH Manager to feedback to COG Manager via Casenote Type CSC
- Accepted
- CSC Rejected (within 24 hours)

Pick up Active Episode task and Select Early Help Episode Completed. Close episode as appropriate

END
Transfer to LCS – LCS and EHM Process

Responsibility – COG

If a decision is made to step up a case to Children’s Social Care by the Services Key Worker then they should have the discussion with the COG Manager.

The case may be referred to Children’s Social Care by someone other than the Service Key Worker, if this is the case then the referrer should notify the Service Key Worker via case note.

The COG manager will log the contact on EHM and the case will be reviewed in SPOC.

Once it is agreed that the case meets the threshold of Children’s Social Care – within 24 hours – then the case should be closed on EHM and case responsibility will pass to Children’s Social Care.

The COG Manager or IS Key Worker should ensure that all tasks and minutes are up to date and approved.

The COG Manager should carry out the Episode Completed task and as the case has been open to Targeted Services the end reason ‘Refer to CSC’ should be selected.

Step Up to CSC Checklist

Please ensure that the following checklist is adhered to when completing a contact on the ICS system to step up a case to Children’s Social Care

**Step Up to Children’s Social Care – COG Manager Checklist**

*Make sure that you…*

- Ensure Child’s basic details are up to date (Name, Date of Birth, Address).
- Provide the Family Composition: siblings, parents including significant members of the family or anyone at the address. **Please include Dates of Birth.**
- Include details of request: be clear and succinct, a synopsis of the case.
- Include details of the Child Protection Concerns.
- Provide any additional information regarding the case to be added to EHM case notes which will be collated by Early Help Desk and brought to MASH meeting.
- Advise regarding consent from parents: Parents/carers/guardians should be made aware of the referral and that a MASH discussion will be taking place so they are aware of the fact we are sharing their information.
- Record the parent’s views/response whether positive or negative.
- Record the Child’s view.
Dispute Resolution

If at any point during the process a member of staff does not agree with the decision taken they should in the first instance discuss this with the relevant COG Manager.

In exceptional circumstances where a member of staff does not feel that the correct decision has been undertaken at the point of referral and an agreement cannot be reached the dispute will follow the respective line of escalation:

1) COG Manager / SPOC Manager
2) Early Help SPOC Senior Coordinator
3) Group Head – SPOC / Early Help

A resolution will be reached within 24 hours. The outcome of the discussion should be recorded by the appropriate manager as a case note using type ‘dispute resolution’.