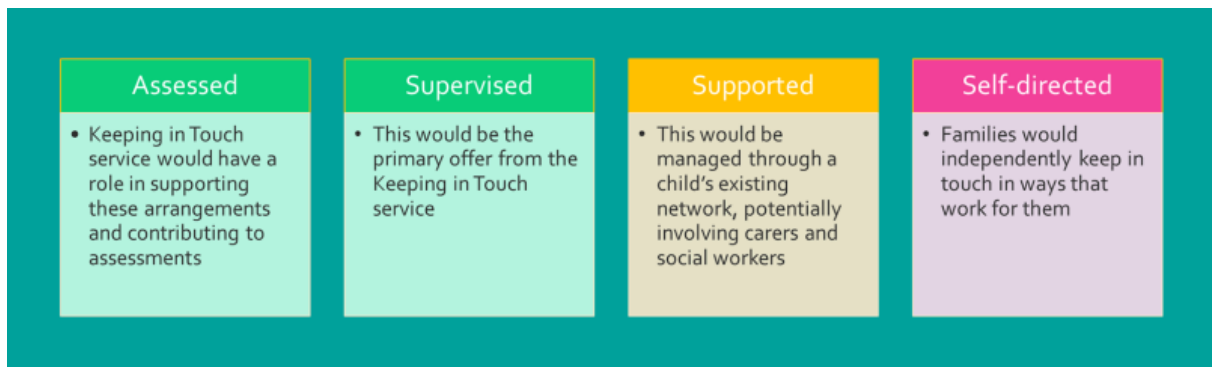


## Keeping in Touch Operational Framework

### 1. Introduction and aim

- 1.1 At Dorset Council we recognise the importance of positive relationship-building and the maintenance of key relationships for children and young people placed within the care system. Entry to care can disrupt important relationships that act as stabilising factors for children, increasing their sense of insecurity and loss at a time of significant change and uncertainty for them. For Dorset this means that staying connected needs to be a central part of a child's journey into care to promote stability and well-being, and to achieve this our Keeping in Touch provision (KIT) will need to be flexible.
- 1.2 The importance of the child's current carer being able to play a major part in supporting and promoting contact with the birth family and other key adults is recognised and is considered to improve communication and the quality of relationships across the child's support network. For Dorset this means that there is an opportunity to seek better involvement of carers to support keeping in touch arrangements; this could be through travel arrangements, agreeing the arrangements or supporting the family time itself.
- 1.3 The quality of a child's experience of keeping in touch is recognised as more important than the quantity of time spent. Less frequent, but more meaningful contact is associated with positive outcomes as opposed to less positive but more frequent contact patterns. Research findings are agreed on the need for contact arrangements to be supported by skilled and emotionally attuned and responsive individuals. For Dorset this means that our KIT service should offer a development pathway with a focus on skilled facilitation informed by relationship- and trauma-informed approaches so that KIT time provides an opportunity to build on and maintain important links for the child.
- 1.4 All these perspectives are reflected in the design of the new KIT service:



## KEEPING IN TOUCH SERVICE MODEL

Fig 1.4 KIT model

- 1.5 Dorset Children's Services Keeping in Touch service (KIT) enables children who are in Care under Section 20 of the Children Act, or who are the subject of Proceedings (or Pre-Proceedings) by Dorset Council, to maintain, enjoy and develop their relationships with their families and other significant people through contacts that are supervised, safe and enabling.

### 2. About this procedure

This procedure sets out the regulatory and policy framework for KIT, the procedures by which it will meet its aims, management arrangements for the service and mechanisms for reporting and review. It meets the requirements of the **Contact and CRW (Children on the Edge of Care, in Care and Leaving Care) Change Management Arrangements version 2**, issued in June 2021.

### 3. The background to our work

#### 3.1 The statutory background

Statutory requirements in relation to Keeping in Touch are set out in the Children Act 1989 Guidance and Regulations Volume 2: Care Planning, Placement and Case Review, sections 2.78 to 2.101.

'The responsible authority has a duty to endeavour to promote contact between the child and their parents, any person who is not a parent but who has parental responsibility for the child, and any relative, friend or other person connected with the child, unless it is not reasonably practicable or consistent with the child's welfare.'  
(2.79)

The wishes of the child in respect to contact should be ascertained, including via the means of advocacy where appropriate. The Guidance notes the importance of

planning contact with parents prior to their child going into care; where a child is taken into care in an emergency, early planning of contact visits is essential. The continuing development of healthy sibling relationships is highlighted as a priority.

### 3.2 Dorset Thrive Model

The foundation of KIT is the Dorset Thrive Model. All of the Thrive priorities are desired outcomes for KIT:

- i) Best Start in Life
- ii) Young and Thriving
- iii) Good Care Provision
- iv) The Best Education for All
- v) Delivering Locally
- vi) Best Place to Live

KIT is also delivered in accordance with Dorset Council's Corporate Parenting Strategy. Its values are: Collaborative, Strengths-based and Restorative. For children in our care this means that their voices are at the heart of everything we do, that they will live with (or have a planned return to living with) their family wherever possible, they will be supported to reach their full potential, and that they will have informed social work and (where relevant) advocacy support.

Quality Assurance Reviewing Officers (QAROs) have a particular role to play in both creating and ensuring the success of KIT arrangements, through their role as Chairs of Child in Care Reviews, and through their quality assurance oversight.

KIT will work closely with QAROs, children's social workers, foster care supervising social workers and relevant business support teams, as well as with those in partner agencies who support the children under our care.

## 4. How KIT works

### 4.1 Who can get help from KIT?

A child or young person and their family may receive support from KIT if the child is a child in our Care under Section 20 of the Children Act, in Care Proceedings (or Pre-Proceedings) or is subject to a Court order and the child's contact with family members or other significant people in their lives must be supervised in accordance with the Court Order or their Care Plan.

Supervised contact will often take the form of a face-to-face meeting, but KIT practitioners may also supervise other forms of contact, such as sending and receiving letters, phone calls and contact via social media.

Children and Families who require KIT support and are already receiving the KIT service may also be supported through assessment and observation, for example, during the course of parenting assessments, where KIT practitioners may observe and report the impact of specialist help on the family.

Children and Young People who do not require supervised contact or assessment may only access KIT with the authorisation of the KIT Manager. The KIT Manager will consult the Service Manager, Corporate Parent and Care Leavers where necessary.

#### 4.2 KIT availability

KIT is available from Monday to Friday 0900 to 1800. As the educational and other commitments of children and young people mean that they are often busy during these times, KIT will also be available by exception from 0900 to 1800 at weekends, subject to KIT practitioner availability. Work that must be carried out outside of these hours requires the prior approval of the KIT Manager.

### 5 Related Children's Services documents

5.1 The governing procedure for Keeping in Touch is Children's Services Procedures Library [5.3.1 Contact with Parents and Siblings](#). This gives detailed guidance on:

- i. Approving and Planning KIT Sessions
- ii. Different Types of Keeping in Touch
- iii. Supervised Keeping in Touch Sessions
- iv. Review of Keeping in Touch Arrangements
- v. Cancellation, Suspension or Termination of Keeping in Touch Arrangements

5.2 All the Children's Services procedures concerning Care Planning, Permanence and Reviews for Children in Care are relevant to KIT and can be found within Section 5 of the Children's Services Library.

5.3 The Pan Dorset [Toolkit for Engaging Families](#) whose children are subject to safeguarding procedures sets out good practice in this area in depth.

### 6 Principles

KIT will embody the six Dorset Children Thrive Principles:

#### 6.1 Puts Children and Families First

For each referral, we will implement arrangements that are planned with children and families; this is the responsibility of the child's social worker, with whom KIT practitioners will liaise closely. So far as possible, we will support KIT Sessions that take place at the time that best suits children and their families, and wherever possible ensure that the same KIT practitioner supports the same child(ren) throughout the engagement. We will develop our service in response to the changing needs of the child and their family.

#### 6.2 Gets it Right First Time

We will ensure that KIT sessions are well-planned and take place when scheduled. KIT practitioners will promote positive interactions with the child(ren).

#### 6.3 Makes Services Easy to Access

We will operate a simple, reliable and prompt referrals system. KIT will be easy to contact.

#### 6.4 Develops our Skilled and Confident Workforce

Job descriptions and context statements for KIT practitioners will set out clearly the skills and abilities required by the role. There will be a formal development pathway for KIT practitioners, monitored via My ROAD Map.

#### 6.5 Provides Good Quality, Efficient Services

We will regularly seek quality feedback from the children and families we support, and we will use this to improve our service. KIT will only be offered for so long as it is the best solution for the child(ren) and their family; other sources of support will then be identified. Managers will regularly review service outputs and performance, to promote both quality and efficiency.

#### 6.6 Measures Success

We will consult with children and families to create a range of measures to demonstrate the difference KIT makes. These will include short- and medium-term benefits. We will share news of our successes with children and families on a regular basis.

### 7 KIT resources

#### 7.1 Leadership and management

KIT is led by the KIT Manager, who reports to the Service Manager, Corporate Parenting and Care Leavers. KIT performance is regularly reviewed by the Children's Services Senior Leadership Team (CSLT).

#### 7.2 Business Support arrangements

Business Support will be provided for KIT. Business Support will be responsible for:

- i) Finding suitable venues for KIT Meetings and making the necessary travel arrangements
- ii) Issuing the quality feedback questionnaire to children and families and collating returns (see 10.2)

#### 7.3 Delivery venues

KIT will only operate at venues that have the prior approval of the KIT Manager.

### 8 Planning for a KIT referral

8.1 In accordance with S3 of our procedure [5.3.1 Contact with Parents and Siblings](#), the child's social worker must assess, in liaison with their manager, whether there is a need for KIT sessions. If there is, the social worker should meet with the family (including the child if appropriate), the foster carer and a KIT representative to develop a KIT Agreement that will outline how KIT will work and any conditions that apply. The Agreement should be signed by the parents and any others having contact. The KIT Agreement must form part of the child's Placement Plan. **No KIT session may take place unless a KIT Agreement and the referral and allocation pathway at 8.1 to 8.5, have been completed.**

8.2 The child's social worker should also complete a risk assessment for the KIT Agreement, which should be signed by their Team Manager.

### 9 Referral and casework

## 9.1 Referral

Referrals to KIT should be made by the child's social worker using the KIT referral form in Mosaic. The KIT Risk Assessment, Placement Plan and KIT Agreement must be attached to each referral. Referrals are notified directly from Mosaic to the KIT Manager and Co-ordinator.

Where Children Services are initiating proceedings, the social worker should include a draft schedule for KIT sessions in their evidence. They should then make a referral to KIT **before the Court hearing**, in order that KIT can respond promptly once judgment is made. Delaying referral until after the judgment is likely to delay the provision of KIT.

## 9.2 Reviewing the risk assessment

The KIT Manager/Co-ordinator should review each referral's risk assessment to ensure that:

- i) Sufficiently comprehensive information has been provided for an effective risk management plan to be developed and allocation to be made
- ii) There are exceptions within the assessment that might mean that the provision of service must be adjusted (for example, additional practitioners attending) or withheld.

Where the KIT Manager/Co-ordinator has continuing concerns regarding the risk assessment, they should escalate these to the Service Manager, Corporate Parenting and Care Leavers.

## 9.3 Allocation

The KIT Manager/Co-ordinator will aim to allocate all referrals within five working days. This is a minimum standard; the KIT Manager/Co-ordinator will use their judgment to identify referrals that need an enhanced response.

## 9.4 Contract meeting

When a referral is allocated, the KIT Manager/Co-ordinator, or the allocated KIT practitioner, will meet with the child's social worker to be briefed on all relevant aspects of the referral.

## 9.5 First contact

On being allocated a referral, the KIT practitioner will contact the foster carer to introduce themselves; they should also speak to the child if the latter is likely to be able to understand KIT arrangements. This should be well ahead of the first KIT Session.

## 9.6 Explaining KIT to children and families

At the first KIT session, the KIT practitioner should confirm the keeping in touch arrangements set out in the Court Order or included in the Pre-Proceedings plan. They should assure the family that the schedule for contact visits will be adhered to by KIT save in exceptional circumstances. They should confirm the mechanism for agreeing, notifying and changing visit times and venues.

Where the child or young person wishes to do so, their social worker should develop a KIT Plan with them, recording their wishes, preferences and concerns regarding contact, and informing them of expected conduct and contact details.

#### 9.7 Contact time and venue

KIT sessions should only take place at venues approved by the KIT Manager and must be held during the opening hours of the KIT service, unless the KIT Manager gives prior agreement to availability at other times.

#### 9.8 Additional forms of contact

The Children Act Guidance (2.92 to 2.94) makes clear that whilst face to face meetings will be the preferred primary form of contact between the child and their family, children should be supported to explore other means too, including letters, phone calls, email and social media. Practitioners should bear in mind, and where relevant help children and/or their carers to manage, the risks that may attend digital communications.

#### 9.9 Responding to incidents and emergencies

The KIT Agreement sets out the conduct that is expected of all who attend KIT sessions. Where there is unacceptable conduct, the KIT worker should manage the situation in accordance with their professional judgment; they should record and report to the KIT Manager any unacceptable conduct at the earliest opportunity.

Where the conduct of one or more people attending the meeting causes or is likely to cause harm, the session should be terminated immediately where possible. However, the first priority of the KIT practitioner is to ensure the safety of the child(ren) in their care. In the event of an emergency, the KIT practitioner should call 999.

Where a KIT meeting is terminated or abandoned in the circumstances set out in the preceding paragraphs, the KIT practitioner must inform the KIT Manager (or Out of Hours Service if outside normal working hours) as soon as possible. The KIT Manager or Out of Hours Service will give guidance and support. The KIT Manager will make the child's social worker and team manager aware of the incident at the earliest opportunity. A review meeting should then be held within 72 hours of the incident to agree and implement a plan that will reduce the risk to the child(ren) and KIT practitioners; this plan must be implemented prior to any further KIT sessions taking place.

#### 9.10 Concluding KIT engagement

KIT is not designed to be a long-term service. It is envisaged that the duration of intervention will be:

- i) For Court-assessed work, up to 26 weeks maximum
- ii) For Court-ordered work, KIT support will begin to taper off following the first Child in Care review after Proceedings

Follow-on support from other services should be identified wherever possible. Where a child remains with the KIT service for a period beyond either of these points, they



should usually be offered service within normal working hours, rather than at weekends.

## **10 Reviewing KIT arrangements**

KIT arrangements for children who are the subject of Court Orders can be varied by the Court and also by agreement between the Corporate Parent and the family as set out at Children Act Section 34 Regulation 8(4). QAROs, as part of their leadership of Child in Care reviews, should record the success or otherwise of KIT arrangements, and any changes agreed, in the review record.

The QARO and the child's social worker should be mindful that KIT is not an open-ended service and should use reviews to identify and promote follow-on arrangements that meet the child's needs wherever feasible.

## **11 Recording, monitoring and governance**

### **11.1 Recording activity**

KIT practitioners should record all activity on Mosaic within their next two working sessions, or within one calendar week, whichever is the sooner.

### **11.2 Quality Assurance monitoring**

After the first KIT Session, KIT will send to the child and family a feedback questionnaire designed to be as accessible as possible to its users. The form will be sent in digital format wherever possible (for instance, via text). The form should ask the child and family to rate:

- i) The overall success of the visit
- ii) The contribution of the KIT worker
- iii) The venue and travel arrangements

The feedback form will then be re-sent to the child and their family every three months.

Feedback from the questionnaire will be shared with the KIT Manager and reviewed under Children's Services Quality Assurance mechanisms.

### **11.3 Governance and oversight**

The performance of KIT will be measured through both reported outcomes and key performance indicators. The outcomes will reflect the priorities of the Dorset Children Thrive Model set out at 2.3 above, and the key performance indicators will include:

- i) New referrals accepted in period
- ii) Referrals closed in period, with details of follow-on arrangements
- iii) Feedback from the child (if possible) and their family
- iv) Feedback from the child's social worker
- v) Numbers of children accessing the service via Court Orders or Pre-Proceedings
- vi) Number of KIT Meetings completed in period
- vii) Performance against the time targets set out at Section 8 above.



**12. Supervision and training**

- 12.1 All KIT practitioners will receive supervision every four weeks, as set out in Children's Services [Standards for Supervision](#). Supervision will meet all the requirements set out in the Standards.
- 12.2 All new recruits to the KIT service will receive a written service-specific induction plan, in addition to the generic Children's Services Induction Plan.

**13. EqIA requirement**

An EQIA was completed for the consultation with staff (Signed by Bridget Downton 3 September 2021).