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1. **Warrington, Our Children – Our Vision**

*‘We want every child in our care to be healthy, happy and safe, and feel loved, valued and respected.’*

1.1. The Warrington ‘Children in Care & Care Leavers Strategy’ recognised that care is a vital part of our child protection system. Most children and young people in care say that their experiences are good and that it was the right choice for them. But more needs to be done so that the children and young people that we care for are healthy and safe; have the same opportunities as their peers; and are ready to lead successful adult lives.

There is always more that we can do. We need to constantly challenge each other and ask ourselves “If this were my own child would it be good enough?” Everyone who works with our children in care and care leavers has an important role to play in improving the services we provide to our children and young people so that they get the best possible experience as they move through care and become care leavers.

1.2. Our strategic outcomes are for children in care and care leavers to:

- Live in settled families
- Stay safe
- Be healthy
- Get the best from school and college
- Be prepared for independence
- Have successful adult lives.

These priorities are based on what we know about:

- The needs of our children and young people,
- What they have told us about what would make a positive difference to their lives; and
- The changes we need to make to the way we run our services for children in care and care leavers.

1.3. **Priority 1 – Live in Settled Families** means that in order to be a good corporate parent we are responsible for making sure that children and young people live in settled families where they can thrive, and that there is good, early decision-making and excellent multi-agency planning so that children don’t ‘drift’ in the care system. This means seeking legal permanence for children and young people at the earliest opportunity so that they know where they are going to be living for the rest of their childhood and who their carers are going to be.

1.4. Children in care tell us that they value relationships with people who:

- Are always there for them
- Care about their health and wellbeing
- Love, accept and respect them for who they are
- Are ambitious for them and help them succeed
- Stick with them through thick and thin.
What we will do:

- Make sure that we get legal permanence for children and young people at the earliest opportunity.
- Continue to work with children and young people to plan their care, understand who are the important people in their lives and where they would be best living.
- Prevent placement breakdowns by continuing the support we give to the people who look after our young people.
- Where adoption is the best plan, we will start to make arrangements as soon as we possibly can.
- Where children and young people are living with their family members we will work with both the child in care and the family members to explore whether a Special Guardianship Order may be more appropriate, so that legal permanence for the child can be achieved.

1.6 The ‘Children in Care & Care Leavers’ Strategy is underpinned by the Children & Young Plan 2019-21 states that we intervene in a timely way and act decisively to achieve permanence for all children. In this we pledge to ‘help children and parents to live in safe, supportive and loving families, to live as independently as possible’. We will do this by:

‘Ensuring legal permanency is achieved for our children in care, underpinned by a commitment to permanency being our obsession, promoting special guardianship and adoption where appropriate’.

1.7 The purpose of these procedures is to ensure all workers within Children’s Services have a robust understanding of ‘Permanence’ and securing ‘Permanence’ for ‘Our Children’ becomes central to the work we all undertake from the outset. High quality plans are intrinsic to the prevention of drift and delay to effect permanent placement as early as possible for children. We need to ensure children and young people are, from the earliest stages of involvement with social care, provided with information and supported to make sense of their life story and journey to permanence.

2. Defining Permanence

2.1. Permanence is defined as a framework of emotional, physical and legal conditions that gives a child a sense of security, continuity, commitment and identity.

2.2. Permanence for children and young people has three particular aspects:

a) Legal permanence (ensuring whoever is caring for the child has Parental Responsibility or that there is somebody in a position to effectively exercise Parental Responsibility);

b) Psychological permanence (when the child feels attached to an adult who provides a stable, loving and secure relationship);
c) Physical or environmental permanence (involves a stable home environment within a familiar neighbourhood and community which meets the child’s identity needs).

3. Roles and Responsibilities

3.1. The Lead Member, as a member of the Council Executive, has political responsibility for the leadership, strategy and effectiveness of Warrington Children’s Services. The Lead Member for Children’s Services is also democratically accountable to local communities and has a key role in defining the local vision and setting political priorities for Children’s Services with the broader political context of the Council.

3.2. The Executive Director of Families / Wellbeing & the Operational Director of Children’s Services both have professional responsibility for the leadership, strategy and effectiveness of Warrington Children’s Services. Both Directors are responsible for securing the provision of services which address the needs of all children and young people, including the most disadvantaged and vulnerable, and their families and carers.

3.3. The Operational Director of Children’s Services is responsible for overseeing the implementation of this policy across Children’s Social Care and Early Intervention and with relevant partners.

3.4. Heads of Service (Child in Need & Children in Care / Care Leavers) are responsible for monitoring and ensuring the effectiveness of Permanence Planning within the scope of the policy.

3.5. Service Managers across Children’s Social Care have responsibility for ensuring high standards of practice and timeliness in the implementation of this policy in practice.

3.6. Team Managers across Children’s Social Care oversee the effectiveness of care planning for individual children taking into account relevant research and current best practice including ensuring timely Permanence planning.

3.7. Social Workers lead on care planning for children, obtaining the views of the child and family members and taking these into account when proactively implementing the Permanence Plan.

3.8. The child’s Independent Reviewing Officer (IRO) has a key role in providing independent review, advice and challenge to the plan and advocacy for the child in line with the IRO handbook. They also ensure every child has a Permanence Plan at the 4 month Child in Care Review.
4. **Key principles in Permanence Planning**

4.1. Wherever possible, care should be provided within the extended family network unless clearly identified as unsafe. Where it is necessary for a child to leave his or her family and become cared for, contact with the family and extended family should be facilitated, unless it is deemed harmful.

4.2. Where possible, care should be provided locally unless it is clearly identified as not in the child’s best interests.

4.3. Placement decisions for children and young people cared for should be for as short a period as needed to secure a safe supported return home or, if they cannot return home plans must be made for permanent care with birth family members or within the network of family and friends. Where this is not in the child’s best interests, permanent placements outside the family including different legal options such as Adoption or Permanent Foster Care should be considered depending on the child’s needs. This will usually mean planning for a number of contingency plans alongside each other at any one time.

4.4. Residential group living, in a children’s home or supported lodgings placement types, should be provided when a need for this is identified within the Care Plan and when substitute family care or other forms of permanent care are not appropriate.

4.5. The professionals involved including the child’s foster carer (if in a foster placement) will work in partnership with parents/families to meet the above objectives. The wishes and feelings of the child will always be taken into account and where this does not correspond to the assessed needs of the child, the child will always have access to an advocate and the oversight of the Independent Reviewing Officer.

4.6. When undertaking permanence planning, everyone has a duty to promote the child’s links with his or her racial, cultural and religious heritage by promoting placements wherever possible that allows the child to be brought up within the same heritage, cultural and religious environment as his or her birth family.

4.7. Where this is not possible, it is important to ensure a placement is identified which can promote links for the child with his or her heritage, culture and religion.

4.8. The professionals involved need to support children and young people to understand their origins and their life journey to date with life story work and later life letter (in the case of adoption).
5. **Options for Permanence**

Permanence can be achieved in the following ways:

- Staying with or returning to birth parent(s)
- Placements with Relatives, Friends or other Connected Persons via Private Fostering or a Child Arrangement Order or a Special Guardianship Order
- Adoption
- Permanent Fostering
- Long Term Residential Care

5.2. **Staying with Birth Parent(s)**

5.1.1. The first stage within permanence planning is work with children and young people in need and their families to support them staying together. Staying with birth parents offers the best chance of stability and meeting outcomes. Research shows that family preservation has a higher success rate than reunification. This of course has to be balanced against the risk of harm to the child.

5.1.2. Permanence planning is based on sound assessments of the child’s needs that are focused on our strategic aims and outcomes. The assessment and subsequent Permanence Plan will include consideration of stability issues:

- The child’s current and future needs;
- Implications of permanence for the child, their birth family and siblings, particularly with regard to contact and identity;
- Current and likely support needs for the child and the placement.

5.1.3. In all cases, full consultation with all family and community support networks must be considered as a possible method of engaging those who know the child best, or who the child is most attached to, in considering the child’s long term needs.

5.1.4. Family Group Conference should be used as early as possible, so that the child (if appropriate), and family members can be involved in the decision-making process and identify potential carers for children within the family.

5.1.5. In all cases, the child’s own wishes and feelings must be ascertained where possible and taken into account. Warrington has a relational framework of intervention, systemic practice. Workers should ensure that the support provided by Adult, Child & Family Services is joined up and takes account of the whole family system. The child’s voice is central to any work undertaken with the family.
5.2. **Placement with Relatives, Friends or other Connected Persons**

5.2.1. As part of contingency planning every effort must be made to identify potential placements with relatives, friends or Connected Persons. This will be either as part of the plan working towards a return home or - if a return home is clearly not in the child’s best interests - as the preferred permanence option. Where relatives and friends are being considered as a possible permanence placement it is important that they have an understanding of the tasks involved in meeting the current and likely long term needs of the child. This includes exercising Parental Responsibility. This can be acquired by relatives and friends/carers through either a Child Arrangement Order or Special Guardianship Order. Any plans for realistic contact will need to support the stability of such placements.

5.2.2. Child Arrangement Order Allowances may be payable if the child was ‘Looked After’ immediately before the Order was made.

5.2.3. Special Guardians of children and young people who were previously looked after may be supported (including financially) by the Local Authority if the child is eligible. They will have the right to request an assessment for support services at any time during the application process or after the Order is made. (See *Special Guardianship Order guidance – Appendix 10*). In Warrington, a Special Guardian

5.2.4. A number of children and young people who are Looked After by the Local Authority have been placed with relatives and friends/carers on the inception of a child entering care. This may not be the most appropriate permanence placement. Consideration must be given as to whether the permanence needs of children and young people in such placements can be effectively met with the Local Authority holding Parental Responsibility through a Care Order. There is an expectation that where a child is placed with family and friends carers permanently, the outcome of any legal process will be that the carer acquires Parental Responsibility. Practice in this area must be in line with Guidance on Section 20 arrangements.

5.3. **Adoption**

5.3.1. An Adoption Order transfers Parental Responsibility for the child from the birth parents and others who had Parental Responsibility, including the Local Authority, permanently and solely to the adopter(s).

5.3.2. The child is deemed to be the child of the adopter(s) as if he or she had been born to them. The child’s birth certificate is changed to an adoption certificate showing the adopter(s) to be the child’s parent(s). A child who is not already a citizen of the UK acquires British citizenship if adopted in the UK by a citizen of the UK.

5.3.3. Adopters may be supported (including financially) by the Local Authority if the child is eligible. They will have the right to request an assessment for support services at any time after the Order is made. See Adoption Support Procedures.
5.3.4. If an existing foster carer makes a request to adopt the child living with them, the Adoption Service should be contacted immediately to discuss the request in line with our Practice Standards.

5.4 **Early Permanence planning (including Fostering for Adoption).**

5.4.1. In cases where a child for whom Adoption is thought to be a likely outcome, consideration must be given to making an early permanence placement either with foster to adopt or concurrent carers. Potential adopters will be given temporary approval as foster carers when they are linked to a specific child. The approval is based on that child only. This can be where the child’s plan is likely to become adoption, but other options have not yet been ruled out for that child. This decision (is it a proposed decision) must be agreed in Legal Planning meeting and endorsed by the Agency Decision Maker.

5.4.2 Concurrent placements will be with a contracted commissioned agency (Caritas Care). The duty worker from Together for Adoption will support with the initial contact with Caritas Care in respect of available placements, and the Social Worker who knows the child will complete the referral. Progression will depend on availability of suitable approved carers within that service. Initially Fostering to Adoption placements will be considered with ‘in house’ approved Together for Adoption adopters. We will only consider an external placement if there is no availability ‘in house’. A referral for a fostering for adoption placement will be completed by the child’s social worker. Decisions as to whether particular cases are suitable for Fostering for Adoption placements or Concurrency placements will be made with consideration to the particular factors within the case and following discussion with Warrington legal and managers in both services.

5.4.3. Approved prospective adopters may be given temporary approval as foster carers under 25A of the Care Planning, Placement and Case Review (England) Regulations 2010. This temporary foster carer approval process can be carried out at the same time as the adopter approval process. The temporary approval would be only in relation to a specific child it’s not a ‘general’ temporary approval. It’s totally different to adopters being dual approved as carers and adopters and would be in relation to a specific child.

5.5 **Permanent Fostering**

5.5.1. This permanence option allows a child to live within a family setting until they have reached adulthood and is ready to assume independence. Permanent Fostering can meet the needs for psychological and environmental permanence. It has proved to be particularly useful for older children and young people who retain strong links to their birth families.

5.5.2. A permanent fostering placement match must be formally presented to the Fostering Panel.
5.4.3. It is expected that consideration will be given at each statutory Child in Care Review to Permanence being secured legally via either a Child Arrangement Order, a Special Guardianship Order. This should be formally reviewed at least annually in line with the Care Planning Regulations.

5.6. Permanence in Long Term Residential Care

5.6.1. Long Term residential care, of over 12 months or more, may provide the best permanence option for some older children and young people who either have a preference not to live in a family setting or who have been assessed as having needs best provided in a residential or team parenting setting.

5.6.2. The financial arrangements must be formally approved by the Agency Placement Panel for proposed long term placements with external parties. Any tri partite funding from Children’s Social Care, Health and Education, must also be agreed before the plan is ratified.

5.6.3 Long term matches in internal residential provision will be via the normal care planning processes.

5.6.4 Long term residential care for all children and young people should be considered when all other options have been fully explored and exhausted. Care planning will need to be robust to monitor and track progress, to ensure the placement is meeting needs and to plan for when the child or young person could return to a family environment. All children placed in external residential care will be monitored strategically through the Agency Placement Panel.

5.7 Private Fostering Arrangements

Private Fostering is defined by The Children (Private Arrangements for Fostering) Regulations 2005 as an arrangement made for the care of a child or young person under the age of 16 (under 18 if disabled) for 28 days or more in their home by someone other than a parent or close relative (close relatives are parents, step-parents, siblings, siblings of a parent and grandparents). This could be an arrangement by mutual agreement between parents and the carers or a situation where a child or young person has left home against their parent’s wishes and is living with a friend and the friend’s family. In a private fostering arrangement, the parent retains parental responsibility for the child or young person.

Examples of Private Fostering arrangements are:

- Children sent from abroad to stay with another family, usually to improve their English or for other educational purposes.
- Asylum seeking and refugee children placed with an adult known to them, their family or their community;
- Teenagers who, having problematic relationships with their parents, are staying in short term arrangements with friends or other none relatives;
- Children living with host families arranged by language schools or other organisations;
• Local children living apart from their families;
• Young people who have wanted to remain in this country to continue their education but whose parents have returned to their country of origin;
• Young children whose birth families are struggling to cope and turn to a friend or distant relative to care for the child.

6. Assessment and Planning - Permanence in Practice

This Permanence Policy seeks to provide a set of common processes when planning permanence for children and young people who have differing needs, and for whom a range of different placement and legal outcomes are required. All Permanence Planning informs the Care Plan, which should be the overarching plan for the child. The key points in the child’s journey are below and will apply until a final placement and legal permanence is achieved for a child; they could also be used at other key points in a child’s life.

- Presentation to Legal Gateway
- Permanence Planning Meetings
- 2nd Statutory Case review
- Monthly Permanence Tracker Meeting
- Final Care Planning Meeting

It is the duty of Warrington Children’s Social Care to reunify children within the family wherever possible. All Edge of Care resources should be exhausted prior to considering permanence out of the family home. These should take place even if the child has been subjected to urgent care arrangements. These include: Ross Close, Families First, Family Group Conferences & Therapeutic interventions. Where this is not possible, we must ensure that permanence is achieved in the child’s best interests and in the child’s timescales. We recognise that any drift and delay will have a negative impact on the child’s outcomes.

Robust multi tracking planning requires that assessments are completed at the earliest opportunity and in the majority of cases that will be during the Pre Proceedings/Proceedings stages. There will be occasions where children are Looked After under S20.

6.1 Presentation to Legal Gateway (See Appendix 1 – Pre-Proceedings Protocol.)

The first test that the child or young person may not be able to remain with their current carers is held at the Legal Gateway Panel. Social Workers should present case to Legal Gateway if they wish to enter pre-proceedings or are wishing to initiate care proceedings.
with immediate effect. In the majority of cases children will only enter care after a case has been heard at Legal Gateway Panel and the Care Plan has been agreed. However, we recognise that a minority of children will enter care in an unplanned way, where there is immediate concerns with regard to their safety. These cases should be presented to the first available Legal Gateway Panel following a child coming into our care. A Primary Permanence Plan should be presented to Gateway Panel when referring the case. This can be done within the current referral form. The preparation for Gateway is key. Social Workers attending the Legal Gateway Panel should ensure that the following documentation has been completed:

- Genogram
- Chronology
- Referral Form (to include initial Permanence Plan)
- Most recent Child & Family Assessment

(Please refer to Legal Gateway Policy / Guidance for more information)

The Gateway Panel will ratify the initial permanence plan and the actions will form the basis of the first Permanence Planning Meeting.

In addition to the documentation required for the Legal Gateway Panel, the action set and process in both scenarios will include the following:

- Family Group Conference and/or Family Network Meeting;
- A comprehensive Parenting Assessment (including a PAMS assessment if required);
- Sibling assessments (Together or Apart) if required;
- Identification of alternative family/connected carers and to undertake viability assessments;
- Psychological Assessments where appropriate;
- Drug / Alcohol testing; where required;
- Any other assessments

### 6.2 Permanence Planning Meeting (See Appendix 3 – Permanence Planning Template)

The Initial Permanence Planning Meeting will take place within 10 working days of the Gateway Panel decision that the threshold for a child entering Pre-Proceedings or Proceedings has been met.

In a minority of cases the Social Worker in consultation with their Manager may decide that the case should not be presented at Legal Gateway. For example; a 16/17 year old where there has been a breakdown in family relations and there is a clear plan of reunification. In these circumstances the decision not to proceed to Legal Gateway must be ratified by a Service Manager however the Permanency Planning process should still be initiated.
Subsequent Permanence Planning Meetings will take place at least every 6 weeks (these replace Care Planning Meetings), but should take place monthly if there is a multi-track planning process in place. They should consider the following:

- The assessment of the child’s current and future needs;
- Whether such needs can be meet on a permanent basis by a return home or through an alternative substitute;
- Where an alternative to a return home is considered;
- The viability of any possible connected carer placements;
- The most appropriate placement type that will meet the child’s permanence needs;
- The most appropriate legal outcome to ensure permanence in the proposed placement type;
- Whether an appropriate range of contingency plans are in place;
- Who will do what and when to achieve the plan without delay;
- How parents will be kept informed.

6.2.1. A permanence planning meeting is a professionals meeting to ensure:

- Timely planning takes place avoiding drift and delay;
- Contingency options are actively being pursued;
- Previous actions have been carried out;
- Placement planning is realistic;
- Likely placement needs are identified early on so that placement commissioning/finding activity is informed;
- Placement support needs are identified;
- Decision to make an application to apply for early family finding court permission must be considered both for adoption and permanent fostering

6.2.2. The meeting should be chaired by the social worker’s team manager, include the social worker and the most appropriate representative from Fostering and Adoption given the known needs. Other services with significant input such as the Virtual School should be invited as required. Consideration should be given to the child’s emotional needs and whether a representative from CAMHS or our Therapeutic Social Worker should attend. A representative from the council’s legal team can be invited for the first Permanence Planning meeting after the initial court hearing. This may help in identifying any barriers to securing timely permanence and also help with making sure the planning is on track to meet Court deadlines as directed in the Court Order. Advocates meetings and further Court Hearings must feed into subsequent Permanence Planning meetings. The child’s Guardian should also be invited to better understand the planning for the child and should be informed as frequently as possible to ensure the process of identifying permanence for the child is transparent. The foster carer should also be invited, if permanent foster care is the primary permanence plan.
6.2.3. Where children are accommodated under Section 20 of the Children Act 1989, consideration will need to be given to how Permanence will be achieved within the existing partnership arrangements and with the current holders of Parental Responsibility, in line with Section 20 guidance. Cases involving children who have been accommodated in line with Section 20 guidance should be presented at Legal Gateway Panel. Permanence planning meetings should take place where necessary to ensure there is no delay in finding homes for such children out of their family.

6.2.4. The Permanence Planning Meeting will produce a Permanence Plan (incorporated into the Care Plan) that is presented to the child’s first, or at the latest the second, Children in Care Review. It is an expectation that the Permanence Plan includes one or more /parallel contingency plans. The social worker must ensure that the parents are informed of the reasons why more than one plan is being made to meet the child’s needs and prevent unnecessary delay.

6.2.5. The Permanence Plan must be updated, following a Permanence Planning Meeting, where clarity is reached around which option is most likely for a child. This needs to be reflected in the Care Plan. The Permanence Plan template must be uploaded onto Civica at the earliest opportunity. If there is a significant change in the overall Care Plan, this must be communicated with the IRO and may trigger a Case Review.

6.3. 2nd Statutory Case Review

6.3.1. By the time of the 2nd Case Review at the latest, a child must have a Permanence Plan (incorporated into the Care Plan), which must be presented for consideration at the review. The review will consider the Permanence Plan as part of the Care Plan and ensure that this can meet the child’s needs for permanence within realistic timescales. It is good practice for a primary permanence plan to be presented at the child’s first Statutory Case Review and we should aim for this to take place as often as possible.

6.3.2. If assessments have not been completed in time for the second Review, or another option for the care of the child emerges at a later stage of the planning process, a further Review should be convened by the child’s Independent Reviewing Officer (IRO) once the outcome is known, in order that the plan may be ratified as appropriate.

6.4 Final Care Planning Meeting

6.4.1. A Final care planning meeting should take place in all cases, where the Service Manager ratifies the plan for the child, before the Final Evidence is filed. Legal advice should be available. The IRO view must be given due consideration during the decision making process. If the primary permanence plan is Adoption, this meeting must take place before SHOBPA and inform the Agency Decision Maker’s decision to place for Adoption. A Final Care Planning meeting must set clear timescales to review the planning. For example, if Adoption has been identified as the best option for the child, but this cannot be realised, timescales must be set to review and robustly pursue secondary planning in the best interests.
7. **Identifying the Best Option (See also Appendix 4 – Further Guidance for Identifying the Best Option)**

7.1. Clearly communicating the Permanence Plan

- It is important that a Permanence Plan is communicated clearly and effectively. It informs the care planning process. Any changes or additions to the Permanence Plan should be agreed by the Permanence Planning meeting and ratified at a Case review.
- Communicating a Permanence Plan effectively involves setting it out clearly and concisely as part of the Care Plan, in a way that acts as a useful reference to all involved during the Review process.
- Good quality Care Plans set out clear, concise statements about intended outcomes. Although ‘a sense of permanence’ can in itself be stated as an outcome, it can also be presented as a means to achieving particular developmental outcomes.
- Make timescales clear. These are about having regard to the child’s age and circumstances, achieving a balance between a framework for an action plan to provide a sense of stability for the child, and flexibility to allow for adequate changes in the parents or birth families circumstances.
- Robust contingency planning. The planning template offers the social work team options for planning and these should be used to full effect, noting a primary permanence plan and options for contingency if this is not realised.

7.2. Consultation

Consultation of all relevant parties, including relevant professionals, carers, parents and the child is an integral part of the permanence planning process and should be clearly evidenced throughout the process.

7.3. Hearing the child

The importance of carefully listening to what children and young people want from the placement, helping the relationship between carer and child to develop, making thorough plans around contact with family and providing vigorous support during crisis times is all part of good permanence planning. The ‘voice of the child’ should be aimed to be captured in a variety of ways, including direct work, advocacy, professionals and carers views and observations.

7.4. Family Finding (See Appendix 8 for Family Finding Role and Function)

- Children with harder to place characteristics are likely to wait longer for an adoptive placement. These are typically children age 5 and over, minority ethnic groups, sibling groups and children with complex / additional needs.
• All children in sibling groups will have a sibling assessment completed by the point of SHOBPA. This will set out the planned configuration for their placement, i.e. together or apart. The Final Care Plan will determine how long family finding should continue for the preferred configuration and what the contingency plan is should a family not be identified in the stated timescale.

• Family finding for all children will commence (where required) from the point where Together for Adoption are notified. This will be at Legal Gateway. An allocated family finder social worker (in the Children in Care & Care Leavers Service) will track early progress of assessments working alongside the allocated social worker.

Once a case is in Proceedings the tasks for twin track planning will be undertaken. At the point of the Placement Order is made the family finding social worker will take over full case responsibility. All children will be profiled prior to SHOBPA and anonymised information will be used with the aim of identifying provisional adoptive placements prior to a placement order being granted.

• Family Finding for Permanent Fostering also plays a critical part in securing permanence and the Fostering Family Finder should attend all permanent planning meetings where Permanent Fostering is the primary plan.

7.5 Contact (See Appendix 4 – Further Guidance for Identifying the Best Option)

Promoting stability of the placement is the prime aim of permanence planning; Contact can play an important part in promoting a child’s sense of identity and may in some circumstances promote placement stability;

Planning for Contact should consider:

• Impact of contact arrangements on the stability of a placement - this is of particular importance in family placements when the carer holds Parental Responsibility;
• Sustainability of contact;
• Provision to support parties in contact;
• Direct contact may be indicated when the child has a positive and ongoing attachment to a parent or significant other;
• Direct contact is more likely to be meaningful and sustained when the child’s parent supports the permanence plan and there is an existing relationship between parents and carer;
• There may be a need for ongoing agency involvement through a Care Order where contact issues remain challenging or contentious; impact of direct contact should be reviewed regularly at the Child in Care review;
• Indirect contact can provide a means for an exchange of information when the parent does not support the Permanence Plan or where the placement is with a “stranger”. Such contact needs to be carefully planned for and may need to be supported through an intermediary.
7.6 Placement/Contact with Siblings

- It is important to assess the extent and quality of relationships in a sibling group and for this work to be undertaken early in order to inform the Permanence plan for the children. Usually, and especially where there is a pre-existing and meaningful relationship, it will be important to seek to maintain sibling relationships within any Permanence Plan, including those where an alternative family placement is sought;

- The impact on separated siblings of losing vital support, a shared history and continuity may affect stability in the placement;

- The importance of identifying strengths and difficulties in sibling relationships in order to make appropriate permanent placement decisions. It is important to ascertain the perceptions and wishes of the child and their family, to assess the shared experience of siblings and the children’s individual permanence needs. This involves thorough consideration of issues of gender, race, disability and identity;

- It is usually the case that more successful outcomes occur for children and young people placed together with their siblings. Children and young people should therefore be placed with their siblings unless there are exceptional circumstances, such as dynamics that are likely to significantly undermine either stability of the placement or its ability to meet the needs of one or more child.

In some cases following assessments of sibling relationships decisions are made for children not be placed together but this is only where there is clear evidence that the needs of the children will be better met in separate placements. Where this is the case every effort will be made to achieve direct contact between children in different placements (including adoptive) as they grow up.

- It is important to recognise that children who have suffered severe abuse and neglect may have bonds based on a shared trauma rather than a mutually supportive sibling relationship, and that in the longer term, their individual needs may mean separation allows for emotional recovery.

- Difficulties in finding a suitable placement for a sibling group may lead to drift. The immediate non-availability of a suitable placement should not prevent rigorous home-finding efforts, within an agreed time frame, based on balancing the potential for success against the risk of undue delay;

- At the point of a Final Care Planning meeting sibling assessments should inform decisions about the preferred configuration of placements as well as a contingency plan in the event of family finding for the preferred option not being successful. This will minimise delay later.
Placement Planning should include arrangements for contact when siblings cannot be placed together. Planning should consider the child’s need for contact, the ability of the placement to support contact and the impact of contact on the stability of the placement.

7.7 Geographical considerations in terms of placement stability/risk

This is important when considering whether current carers can become the child’s permanent carer. Robust consideration to the proximity of birth family members and the likelihood of destabilisation and/or support should always take place. Equally risk assessment regarding identifying a placement at a distance must also be undertaken. Where children are being placed for Adoption, every effort will be made to enable the child to remain within the region unless there is clear evidence associated with risk to a placement that placing out of area is required.

7.8 Disruption to Placement and/or Placement at Risk

Where permanent placements are at risk a Placement Stability Meeting must be held to avoid break down, chaired by a Team Manager.

A Disruption Meeting must be held after a placement has broken down irreparably. For Adoptive placements a disruption meeting involving all key professionals and the adoptive parent(s) will be convened to identify the factors that led to this and identify learning from the case. The meeting will be independently chaired in line with a regional protocol. If the disruption of a placement leads to the child being placed at home with their parents, whether this be on a short or long term basis the ‘Placement with Parents’ Procedures should be followed. Approval for placing a child at home with their parents must be sought from the Deputy Director. This change in care plan must be discussed with the IRO before the child is placed.

8. Tracking Permanence Outcomes

8.1 Tracking arrangements are in place for children on the journey to permanence and these are coordinated through the Permanence Tracker Meetings. These meetings are chaired by a Service Manager from the Child in Need and Permanence Service. (See Appendix 2 for Permanence Tracker Template).

8.2 Together 4 Adoption will continue to operate a separate tracker which monitors planning for children, where adoption is or may be the final Care Plan. From the point of Legal Gateway / Pre-Proceedings /Proceedings, Tracking meetings take place monthly and are chaired by the Together 4 Adoption Practice Manager. They are attended by the family finder’s manager and the tracker is updated with progress for every child. There is a particular focus on children from the point of SHOBPA onwards with a view to avoiding delay. Practice issues or
any service led delay is escalated from these meetings to Head of Service for Children in Care & Care Leavers.

8.3 The purpose of these monthly meetings is to track every child in Pre-Proceedings, in Proceedings and those that are Looked After in their journey, to identify drift or delay, or barriers to meeting our Permanence objectives for every child.

The core members of the Tracking meeting will include:

- Service Manager – Chair
- Representative from Together 4 Adoption
- Representative from Fostering – Family Finder
- Representative from Fostering – Connected Persons
- Practice Co-ordinator

8.4 Each team will be allotted time for all their cases to discuss at the tracking meeting. The template will be pre-populated by lead social workers and team managers in preparation for the panel. Every child in care will also have a view inputted by the IRO to determine the independent oversight of planning. Each case will be RAG rated indicating progress and where attention is more pressing. Actions from the meeting will be inputted into Mosaic as Senior Manager oversight by the Practice Co-ordinators servicing the meeting.

8.5 Children in Need and Children in Care & Care Leavers Service Managers and Heads of Service will meet on a monthly basis to provide scrutiny and quality assurance. This will enable cases where there is identified drift / delay to be discussed, as well as key themes, progression, review and development of tracking procedures of children’s journey to permanence.

8.6 Arrangements for moving children from the Child in Need onto Permanence Service Tracker

8.6.1 The Permanence Tracker will be serviced by the nominated business support. When a decision is first made for a child to be made subject to Pre Proceedings or Proceedings at Gateway, the child will be added to the Tracker in preparation for it to be reviewed at the next tracker meeting. If a child is made subject to immediate care arrangements outside of the family home under Sec 20 or via another process outside of Gateway, the case must be heard at the next available Gateway Panel to ratify this decision and to begin tracking permanence planning. Every case heard at Gateway Panel will have a primary permanence plan cited and entered into the tracker with key dates for initial planning. Key milestones for the child will be added to the tracker by the team Manager/social worker as the child’s journey progresses.

8.6.2 At the point of transfer to the Permanence Service, the child will be transferred to the Permanence Tracker in the Permanence Service where monitoring and scrutiny will continue.
Appendices 1 – 9

Appendix 1-
Pre-Proceedings Protocol

Appendix 2
Monthly Permanence Tracking Meeting Template

Appendix 3
Permanence Planning Meeting Template

Appendix 4
Further guidance for identifying the Best Option

Appendix 5
Good Practice Permanence

Appendix 6
Adoption Plan Task List

Appendix 7
Child Permanence Report (CPR) information sheet and Checklist

Appendix 8
Family Finding Role and Function – Adoption

Appendix 9
Supervision Order guidance

Appendix 10
Special Guardianship Order guidance document
Appendix 1 – pre-proceedings Protocol

WARRINGTON CHILDREN SERVICES –GUIDANCE FOR WORKING WITHIN THE PRE-PROCEEDINGS PROTOCOL

This document outlines the framework for working with families with the pre-proceedings framework in Warrington.

Agreement for using the pre-proceedings protocol

Wherever possible, and when considered safe and appropriate to do so, the local authority will use the pre-proceedings protocol to work with families before consideration is given to issuing care proceedings.

All decisions about using the pre-proceedings process are agreed in legal gateway. If a social worker and their manager feel a case should be considered for the pre-proceedings process, they should arrange a case discussion with the Service Manager, who will then make final decision if referral to legal gateway is appropriate.

Initial Legal Gateway

The purpose of the initial gateway will be to consider if the threshold for proceedings is met in the case. The following are required for the legal gateway meeting:

1. Referral Form with initial analysis completed and initial permanence plan.
2. Chronology
3. Genogram of Family
4. Draft Pre-Proceedings Plan

All paperwork for legal gateway must be submitted to the Practice Co-ordinator by 5pm on Wednesday. Papers are then circulated to panel members on Thursday morning. Please note new referrals to legal gateway will not be able to be considered unless paper work is submitted on time.

When legal gateway decides the pre-proceeding protocol should be followed the following then needs to happen:

- The pre-proceedings letter to parents must be drafted within 3 working days and sent to parents within 5 working days.
- A Legal Planning Meeting must have taken place within 5 working days.
- The initial pre-proceedings meeting will be convened within 10 working days.
- A Permanency Planning meeting will be convened within 10 working days.

Timescale for Pre-proceedings

We aim to complete the pre-proceedings process within 16 weeks of the initial pre-proceedings meeting with the family, however it is recognised in some cases this process may take longer. The maximum period given for the pre-proceedings process is 26 weeks.
The timetable for each case and target date for completion of the pre-proceedings process will be agreed at the legal gateway. Cases predicted to take longer than 16 weeks will have a clear rationale recorded on the Pre-Proceedings Plan.

An exception report will be required for any case predicted to go over the 26 weeks. This report will need to include the reasons for delay and the steps being taken to resolve these. These will be scrutinised by the Operational Director.

**Second period of pre-proceedings**

There will be occasion where legal gateway decide to work with a family within pre-proceedings for a second time. Any cases where there is a second period of pre-proceedings there will be an expectation that all assessments are completed within 12 weeks.

An exception report will be required for any case predicted to go over the 12 weeks. This report will need to include the reasons for delay and the steps being taken to resolve these. These will be scrutinised by the Operational Director.

**The initial pre-proceedings meeting with parents**

Once legal gateway have agreed the pre-proceedings framework, the initial pre-proceedings meeting with the family should take place within 10 working days. The initial meeting is an opportunity to discuss the presenting issues with parents and agree the pre-proceedings plan of work.

**Legal Gateway oversight and review of the pre-proceedings cases.**

Legal Gateway will have oversight and monitor the progress of all pre-proceedings cases, using the following review process.

**Legal Gateway - First Review**

This review will take place four weeks after the initial legal gateway. The initial pre-proceedings meeting with parents should have happened within two weeks of the initial legal gateway decision – so at this initial review point the case should be two weeks into the pre-proceedings process.

The primary purpose of this initial meeting will be to ratify the pre-proceedings plan and timetable for completing this work. It will also provide an opportunity for legal gateway to get feedback from the social worker and manager on the parents’ perspectives and their willingness to engage in the process.

**Legal Gateway – Second Review**

At this point cases should be at week eight of the pre-proceedings process - the midway point of the process. Prior to this legal gateway review the first pre-proceedings review meeting should have taken place with the parents.

In this meeting there will be a review of the pre-proceedings plan, progress made in assessments, and scrutiny and review of the original timescale.

**Legal Gateway – Third Review**

At this point cases should be around 14 week into the PLO process, in most cases the pre-proceedings process should be near conclusion with assessments being finalised.
There will be a review of the progress made in progressing assessments, parents’ engagement, and a discussion of potential delays in the original timescale.

A date should be set for a final legal gateway review to confirm the recommendations from the social work assessment. If the case has been timetabled to run for up to 26 weeks legal gateway will decide the date of the next review meeting based on the current progress of the case.

**Legal Gateway - Fourth and subsequent reviews**

There will be need for a fourth and subsequent legal gateway reviews in case that take between 16 – 26 weeks. Cases will be reviewed every four weeks after the third review to ensure the pre-proceedings plan is being progressed.

**Issues arising between legal gateway review meetings**

If there are concerns about the progress of a case, parents’ engagement or increasing concerns about any children, the social worker and team manager should consider bringing the matter back to gateway before the next review meeting. A request can be made to bring the matter back to legal gateway if urgent decisions need to be made based on the current assessment and plan.

**Concluding the process**

Once all assessments are completed the final legal gateway review will consider the recommendation of the social worker and manager. This may be to conclude the process and to continue working with the family on a child protection or child in need basis. Exceptionally, it may be considered there is no longer justification for local authority involvement with the family. In these cases a final pre-proceedings meeting should be held to advise the parents and relevant family members of the outcome of the process and future plans. This should be followed up by a final letter confirming the outcome.

Alternatively, the recommendation may be to issue proceedings in which case a date will be given for draft evidence to be provided to the legal department and for proceedings to be issued. The immediate issue letter will be delivered to the parents within 2 days unless legal gateway agrees otherwise.
**OVERVIEW OF PRE – PROCEEDINGS PROCESS IN LEGAL GATEWAY**

<table>
<thead>
<tr>
<th>TIMELINE</th>
<th>INITIAL LEGAL GATEWAY</th>
<th>LEGAL GATEWAY - FIRST REVIEW (Week 2 of pre-proceedings)</th>
<th>LEGAL GATEWAY – SECOND REVIEW (Week 8 of pre-proceedings)</th>
<th>LEGAL GATEWAY - THIRD REVIEW (Week 14 of pre-proceedings)</th>
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<tbody>
<tr>
<td>PURPOSE</td>
<td>THRESHOLD DISCUSSION</td>
<td>RATIFICATION OF PRE-PROCEEDING PLAN &amp; TIMETABLE</td>
<td>CURRENT ASSESSMENT &amp; REVIEW OF PRE-PROCEEDINGS PLAN</td>
<td>CURRENT ASSESSMENT &amp; REVIEW OF PRE-PROCEEDINGS PLAN</td>
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</table>
| REQUIREMENTS FOR LEGAL GATEWAY | 1. Referral Form with initial analysis completed and initial permanence plan.  
2. Chronology  
3. Genogram of Family  
4. View of conference chairs obtained.  
5. Draft Pre-Proceedings Plan. | 1. Update from initial pre-proceedings meeting with parents.  
2. Identification and timescales for any viability assessments.  
3. Date for Family Group Conference agreed.  
4. Timetabling of Permanency Planning Meetings agreed  
5. Any experts required will be identified with timescales for reports. | 1. Social work summary on progress of pre-proceedings plan.  
2. Pre-proceedings review meeting will have taken place with parents.  
3. Update from Permanency Planning Meetings. | 1. Social work summary on progress of pre-proceedings plan.  
2. Update from Permanency Planning Meetings. |
| ANTICIPATED OUTCOME FROM LEGAL GATEWAY | Decision on threshold and legal framework agreed | Pre-proceedings plan of work and timetable finalised | Review of pre-proceedings plan. | Review of pre-proceedings plan. |
| - If pre-proceedings agreed:  
- Pre-proceedings letter to be drafted within 3 days  
- Legal Planning Meeting to happen within 5 days.  
- Initial pre-proceedings meeting to happen within 10 days. | - Pre-proceedings plan of work and timetable ratified by legal gateway.  
- Estimate length of pre-proceedings agreed based on complexity and any assessments required. | - Update on assessments and overall effectiveness of pre-proceedings process and plan.  
- Any delays addressed and resolved  
- Timetable for conclusion of pre-proceedings agreed. | - Confirming if we are on track with assessments. If we are ready to conclude pre-proceedings and agree timescale for stepping down or issue care proceedings.  
- If we are not ready to conclude agreeing what needs to happen to progressing the case.  
- Plan for next pre-proceedings meeting with family agreed. |
### Appendix 2 - Template for Monthly Permanence Tracking Meetings

<table>
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<tr>
<th>Mosaic ID</th>
<th>Name</th>
<th>Age</th>
<th>Social Worker/PA</th>
<th>Team</th>
<th>Legal Status</th>
<th>Permanency Plan Options <em>(Primary plan in bold)</em></th>
<th>Next Key Date / Milestone</th>
<th>Date of PPM Meetings</th>
<th>Update / Comments from Team</th>
<th>Update / Comment from IRO</th>
<th>Current Actions <em>(including timescale)</em></th>
<th>Completed Actions</th>
<th>RAG</th>
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## PERMANENCE PLANNING MEETING

**Warrington**

### Child Details

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<th>Name of Child</th>
<th>Mosaic Number</th>
<th>Initial or Review PPM</th>
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### Present (and apologies)

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### Update

#### Update on Child

#### Barriers to achieving Permanence

#### Complicating Factors

<p>| Any extended family/friends, connected carers that have or that require assessment |
|----------------------------------|------------------|-----------------|-----------------|----------------------|
| Name of Carer                    | Date Assessment Complete | Outcome | View of Assessed Person | Comments |
|                                  |                               |         |                             |          |
|                                  |                               |         |                             |          |
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**Permanence Planning Options**

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Appendix 4 - Further guidance for identifying the Best Option

- Advantages and disadvantages of different legal outcomes
- Factors associated with beneficial contact in permanent placements
- Factors associated with detrimental contact in permanent placements
- Comparison of legal outcomes and family placement type
- Scenarios to consider when securing Permanence

Advantages and Disadvantages of Different Legal Outcomes

ADOPTION

Advantages
- Adoptive parents gain PR and the child has legal rights equal to that of a birth child
- Child has permanence within a new adoptive home, hopefully for life.
- Child has security, emotional stability in their ‘forever family’
- Child is protected from damaging influences from birth parents/family.
- Child becomes a child of the adoptive family and is treated as such for inheritance purposes.
- Finality and certainty after potentially periods of disruption and disarray within the birth family.
- The outcomes for children in adoption are consistently better across a range of measures including lower rates of disruption than long term fostering.
- CSC involvement ceases (no statutory ongoing responsibility) on the making of an adoption order, family may wish to request adoption support involvement.

Disadvantages
- Possibility of breakdown with consequential emotional harm/loss.
- The basis of adoption under constant challenge on human rights grounds.
- Parental responsibility is extinguished permanently for birth parents.
- The child is denied the advantage of growing up within their birth family, family ties being severed permanently.
- The parents are likely to have restricted contact, often letter box on very few occasions per year. Contact is usually limited to indirect exchange of information or direct with siblings adopted elsewhere

SPECIAL GUARDIANSHIP ORDER

Advantages
- Special Guardians have enhanced parental responsibility (PR) to enable them to safeguard the child against potentially damaging parental influences.
- The child has permanence within the new family.
- The child may retain contact with the birth parents/family; it may be possible to have direct contact.
• Damaging contact can be limited, assessment of risks of contact can be made and a judgement made to restrict contact with which the parents cannot interfere.
• If the placement breaks down, it may be possible for reunification to the birth family if the parents’ circumstances have changed.
• Child may be able to retain, maintain and develop cultural identity.
• Parents retain parental responsibility for the child, albeit that it is superseded by the special guardians who have enhanced PR.
• The order is a lesser order in nature than a care or placement order.
• Child is not classed as a Child Looked After.

Disadvantages
• Parents have reduced PR and contact may not be promoted as they would wish.
• SGO holders may abuse their position, and deny contact/act unfairly towards parents.
• The child is denied the opportunity to grow up with their parents.
• The parents are denied the opportunity to bring up their own children.
• The parents can seek leave to revoke the order.

CHILD ARRANGEMENT ORDER

Advantages
• Parents retain parental responsibility.
• Less interventionist than the above orders.
• Allows the child to retain contact with the parents/birth family.
• Child may be able to live with both parents, ‘shared care arrangement’.
• Contact can be defined within the Order, which may prevent disputes and allow certainty to child and all parties.

Disadvantages
• One or both parents may not be able to obtain legal aid; this could lead to an unfair advantage by the wealthier parent who can fund the court process.
• A relative, such as a grandparent, may be able to fund the court process, leaving the parent or parents unrepresented and therefore at a disadvantage.
• Child may ‘slip through the net’ and the Local Authority may be denied the opportunity to intervene in the child’s life.

SUPERVISION ORDER

Advantages
• The Local Authority remains involved for the duration of the Order, in a supervisory and monitoring capacity.
• The child maintains a link with a social worker and the protection this affords them.
• The child and family will receive support and services.
• The Order is a lesser order than the above orders.
The Order is time limited, (usually 12 months but can be extended up to three years in total), so they can see the possibility of the Local Authority releasing control and returning to having a normal life without Local Authority intervention.

Disadvantages
- The Local Authority cannot enforce the order.
- The child is not protected with legal status.

PERMANENT FOSTERING

Advantages
- The Local Authority retains a role in negotiating between the foster carers and the birth family over issues, such as continuing direct contact.
- There is continuing social worker support to the child and foster family in a placement which is regularly reviewed to ensure that the child’s needs are met. If the child is in a permanent placement this can be reduced, to prevent on-going professional involvement being invasive, and to help the child lead a ‘normal’ family life.
- It maintains legal links to the birth family who can still play a part in the decision making for the child.

Disadvantages
- Lack of Parental Responsibility for the carers.
- Continuing social work involvement.
- Regular reviews, which are statutorily required, to ask if rehabilitation to the parent is to be considered. This may be regarded as destabilising to the placement.
- Stigma attached to the child through being Looked After.
- The child is not a legal member of the family. If difficulties arise there may be less willingness to persevere and seek resolution.
- Higher disruption rates compared to SGO and Adoption.

Factors Associated With Beneficial Contact in Permanent Placements

<table>
<thead>
<tr>
<th>Factors for Children</th>
<th>Factors for Adult Birth Relative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Placed in infancy</td>
<td>Never been the child’s permanent carer</td>
</tr>
<tr>
<td>No pre-placement relationship, or positive or neutral</td>
<td>Accepts and supports the placement, affirms new carers</td>
</tr>
<tr>
<td>relationship with relative</td>
<td>Relinquishes parenting role, where they have been the child’s permanent</td>
</tr>
<tr>
<td>Absence of major behavioural or mental health problems</td>
<td>carer</td>
</tr>
<tr>
<td>Secure attachment to current carers, placement provides a</td>
<td>Relates to the child in a positive, non-abusive way</td>
</tr>
<tr>
<td>secure base</td>
<td></td>
</tr>
<tr>
<td>Healthy psycho-social development</td>
<td>Relatively free of significant personal difficulties</td>
</tr>
<tr>
<td>--------------------------------------------------</td>
<td>---------------------------------------------------------------</td>
</tr>
<tr>
<td>Child freely wants contact, is not afraid</td>
<td>Reliable, punctual</td>
</tr>
<tr>
<td>Child has positive memories</td>
<td>Accepts harm caused to child, expresses regret and remorse</td>
</tr>
<tr>
<td>Child has not witnessed violence, does not</td>
<td>Does not use contact to undermine, threaten or cause conflict</td>
</tr>
<tr>
<td>imitate violence</td>
<td>with carers</td>
</tr>
</tbody>
</table>

Factors Associated With *Detrimental* Contact in Permanent Placements

<table>
<thead>
<tr>
<th>Factors for Children</th>
<th>Factors for Adult Birth Relative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Insecure attachment and/or unstable placement</td>
<td>Does not accept or undermines placement</td>
</tr>
<tr>
<td>Major behavioural or mental health problems</td>
<td>Insists on maintaining role as main carer</td>
</tr>
<tr>
<td>Rejected, has lived with several birth relatives</td>
<td>Seriously maltreated child in the past (including through domestic violence towards other parent)</td>
</tr>
<tr>
<td>Older child with troubled relationship with birth parents</td>
<td>Neglectful, abusive or rejecting during visits</td>
</tr>
<tr>
<td>Re-traumatised/overwhelmed by contact</td>
<td>Unreliable, repeatedly late</td>
</tr>
<tr>
<td>Child is afraid, feels fearful on return to placement, trust in carers is undermined</td>
<td>Denies causing harm, shows no regret or remorse</td>
</tr>
<tr>
<td>Child does not want contact</td>
<td>Exposes child to behaviours that are at odds with the placement (e.g. drug misuse, criminality)</td>
</tr>
<tr>
<td>Child has negative memories of birth family</td>
<td>Significant personal difficulties (e.g. substance misuse, serious mental health issues)</td>
</tr>
<tr>
<td>Child has witnessed violence, imitates violence</td>
<td></td>
</tr>
</tbody>
</table>
**Comparison of Legal Outcomes and Family Placement Type**

The table outlined below compares key needs associated with permanence and benefits differing legal orders bring.

<table>
<thead>
<tr>
<th>Permanence Need</th>
<th>Child Arrangement Order / Special Guardianship Order</th>
<th>Adoption</th>
<th>Permanent Fostering</th>
<th>Residential</th>
</tr>
</thead>
<tbody>
<tr>
<td>Security &amp; Identity</td>
<td>Child needs the security of a legally defined placement with alternative carers, but does not require a lifelong commitment involving a change of identity</td>
<td>Child’s primary need is to belong to a family who will make a lifelong commitment. Have good outcomes in terms of stability</td>
<td>Primary need is for a stable, loving family environment whilst there is still a significant level of continued involvement with the birth family</td>
<td>Children who find it difficult to reside in a ‘family’ placement have a stable home, and build positive relationship with Adults who co-parent</td>
</tr>
<tr>
<td>Exercise of Parental Responsibility</td>
<td>Child’s relation, foster or other carer needs to exercise day to day parental responsibility and is prepared to do so as a lifelong commitment</td>
<td>Child’s birth parents are not able or not willing to share parental responsibility in order to meet their child’s needs</td>
<td>Child has a clear sense of identity and involvement with the birth family, whilst needing to be cared for away from home</td>
<td>Child has a clear sense of identity and involvement with the birth family, whilst needing to be cared for away from home</td>
</tr>
<tr>
<td>Contact</td>
<td>There is no need for continuing monitoring and review by the Local Authority, although support services may still need to be arranged</td>
<td>Child needs an opportunity to develop a new sense of identity whilst being supported to maintain or develop a healthy understanding of their past</td>
<td>Ongoing need for continued monitoring and support by Local Authority</td>
<td>Ongoing need for continued monitoring and support by Local Authority</td>
</tr>
<tr>
<td>Support</td>
<td>Special Guardianship Support Services, or Child Arrangement Order Allowance</td>
<td>Adoption Support Services</td>
<td>There is need for continuing oversight and monitoring of the child’s developmental progress</td>
<td>There is need for continuing oversight and monitoring of the child’s developmental progress</td>
</tr>
<tr>
<td>Attachment</td>
<td>Child may have a strong attachment to the alternative carers and legally defined permanence is assessed as a positive contribution to their sense of belonging and security. Could support the maintenance of links to the child’s birth family.</td>
<td>Child expresses a wish to be adopted if old enough. Enables a child to have legal and emotional permanence through childhood and beyond.</td>
<td>Birth parents may be able and willing to exercise a degree of parental responsibility</td>
<td>Birth parents may be able and willing to exercise a degree of parental responsibility</td>
</tr>
</tbody>
</table>

**Scenarios to Consider When Securing Permanence**

1. **Children under 10 - no connected persons identified, no return home possible**

<table>
<thead>
<tr>
<th>Permanence Meetings</th>
<th>Permanence Planning in Panels</th>
<th>Permanence Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permanence Planning meeting considers multi track including Foster to Adopt Contingency of Permanent Fostering</td>
<td>Agency Decision Maker considers “should be placed for adoption” (SHOBPA) and match/adoption support Fostering Panel</td>
<td>1. Adoption 2. SGO with current short term carers 3. Contingency Permanent Fostering</td>
</tr>
</tbody>
</table>

   Attended by: Team Manager, Social Worker, A&F Family Finder

2. **Children under 10 - connected people available, no return home possible**

<table>
<thead>
<tr>
<th>Permanence Meetings</th>
<th>Permanence Planning in Panels</th>
<th>Permanence Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permanence Planning meeting considers multi track planning;</td>
<td>Fostering panel considers</td>
<td>Priority order of outcomes 1. Child Arrangement Order</td>
</tr>
</tbody>
</table>
This meeting should be informed by feedback from a Family Group Conference to consider Connected carers options;

Attended by: Team Manager, Social Worker, Connected Carers Fostering Team, FF Fostering

- Need for permanence;
- Approval of Connected carers
- Match & support.

2. Special Guardianship;
3. Care Order

Active consideration of / possibility of move to SGO / CAO.

3. Children and young people 11 to 16 - no connected persons identified, no possible return home

<table>
<thead>
<tr>
<th>Permanence Meetings</th>
<th>Permanence Planning in Panels</th>
<th>Permanence Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permanence Planning meeting. To include:</td>
<td>Panel consideration of:</td>
<td>Hierarchy of desired outcomes:</td>
</tr>
<tr>
<td>• Team Manager</td>
<td>• Need for Permanence;</td>
<td>1. SGO</td>
</tr>
<tr>
<td>• Social worker;</td>
<td>• Best placement type;</td>
<td>2. CAO</td>
</tr>
<tr>
<td>• Fostering Team;</td>
<td>• Approval of carers;</td>
<td>3. Permanent Fostering with Care Order (possible resumption of PR by carers through SGO/CAO);</td>
</tr>
<tr>
<td>• Residential Service;</td>
<td>• Evaluation of support issues &amp; plan;</td>
<td>4. Residential with Care Order</td>
</tr>
<tr>
<td></td>
<td>• Match placement to child.</td>
<td>Assumes that assessment indicates that child’s needs can be best met in family setting</td>
</tr>
</tbody>
</table>

4. Children and young people 11 - 16 – connected people available

<table>
<thead>
<tr>
<th>Permanence Meetings</th>
<th>Permanence Planning in Panels</th>
<th>Permanence Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>This meeting possibly informed by feedback from a Family Group Conference to consider Connected carers options.</td>
<td>A panel considers</td>
<td>Priority order of outcomes</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1. SGO</td>
</tr>
<tr>
<td>Attended by:</td>
<td>Need for permanence;</td>
<td>2. CAO;</td>
</tr>
<tr>
<td>------------------------------------------------</td>
<td>-------------------------------------------</td>
<td>--------------------------------------------</td>
</tr>
<tr>
<td>• Team Manager;</td>
<td>• Approval of Connected carers;</td>
<td>3. Care Order – possibility of move to SGO/CAO.</td>
</tr>
<tr>
<td>• Social Worker;</td>
<td>• Match &amp; support.</td>
<td></td>
</tr>
<tr>
<td>• Connected Carers/SGO Team.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix 5 - Permanence Planning Process

- Good Practice Permanence (Adoption)
- Good Practice Permanence (Children Who Are Placed in Permanent Foster Care)
- Good Practice Reunification (Children Returned to Parents Following Period of Separation)
- Good Practice Permanence (SGO)

Good Practice Permanence

(Adoption)

<table>
<thead>
<tr>
<th>WEEK</th>
<th>TASKS</th>
</tr>
</thead>
</table>
| 1    | • Assessment by SW Team including Family Group Conference.  
      • Assessment by Social Work Team indicates threshold has been reached.  
      • Complete Gateway Application with agreed documentation & recommendation for action.  
      • Legal Planning Meeting (Team Manager or Senior Practitioner)  
      • Decision made that threshold has been reached.  
      • Decision made to multi track plan with Adoption as a possible outcome (early permanence placements identified; i.e. foster to adopt or concurrency).  
      • Enter case onto Together 4 Adoption Tracker.  
      • Family Finder allocated. |
| 2 / 3 | • First Permanency Planning Meeting.  
       • SMART Permanence Plan to be completed and entered on Civica.  
       • Adoption as Permanence Plan with contingencies.  
         (Contingencies: Connected people/SGO, Permanent Fostering) |
<p>| 3    | • 1st Case review held (within 20 working days of child becoming looked after) to review. |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
</table>
| **4** | If in Care Proceedings (or child unborn with clear plan of Adoption)  
- Allocated Family Finder (CIC SW) to have oversight.  
- CPR started by SW (with input guidance from Family Finder). |
| **8** |  
- Second PPM  
- Subsequent PPMs to be held at six weekly intervals unless the case warrants increased frequency due to complexity. AC Family Finder to attend. |
| **15** |  
- Final Care Planning Meeting.  
- 2nd Case Review (held within 12 weeks of 1st review) to endorse Final Care Plan. |
| **16** | If in Care Proceedings:  
- Papers ready for ADM (SHOBPA)/CPR/assessments/export reports/medical/form Family finding report (information about potential adopters available/whether in-house or interagency). All sibling groups to be subject to sibling assessment prior to ADM (SHOBPA). |
| **17** | If in Care Proceedings:  
- Agency Advisor (TFA) QA/Audit of CPR shared with ADM, SW & TM.  
- ADM (SHOBPA) |
| **18** | If in Care Proceedings:  
- Final Care Plan submitted. |
| **19** |  
- All children to be profiled for family finding by Together 4 Adoption two weeks after ADM (SHOBPA). Initial decision re strategy in-house/interagency. Anonymised information shared with potential adopters. |
| **22** |  
- Draft adoption support plan. Draft APR in reaction to the child. |
| **26** | If in Care Proceedings:  
- Final Hearing PO Granted |
| **27** | **Adopter Identified:** |
- Before or after PO Granted, hold selection meeting to determine chosen adopter.
- Information shared in full with potential adopters (“bump into” meeting).
- Matching panel booked for within 6 weeks of shortlisting.
- Plan introductions.
- Agency Advisor/AC Team Manager
- QA/Audit of CPR shared with SW & TM

**Adopter not Identified:**
- Family Finding Continues - Strategic decisions in TFA re inter agency / in house FF – Monthly TFA tracking meetings review FF progress.
- If inter-agency continued FF activity – Exchange Events, Activity Days, Link-maker. When placement identified process as per week 27 to week 34.
- Communication / Escalation to Warrington Head of Service re delay / sibling assessments / changes of plan.

31
- Matching meeting to ensure that the matching process has been carried out appropriately.
- Paperwork submitted two weeks before matching panel.

33
- Matching Panel

34
- Introductions
- Placement

**Good Practice Permanence**

*(Children who are placed in Permanent Foster Care)*

<table>
<thead>
<tr>
<th>WEEK</th>
<th>TASKS</th>
</tr>
</thead>
</table>
| 1    | • Assessment by SW Team including Family Group Conference.  
      • Assessment by Social Work Team indicates threshold has been reached. |
<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
</table>
|   | • Complete Gateway Application with agreed documentation & recommendation for action.  
• Legal Planning Meeting  
• (Team Manager or Senior Practitioner)  
• Decision made that threshold has been reached.  
• Decision made to multi track plan with Permanent Fostering as a possible outcome.  

2/3 | • First Permanency Planning Meeting.  
• SMART Permanence Plan to be completed and entered on Civica.  
• Permanent Fostering as Permanence Plan with contingencies.  
• (Contingencies: Connected people/SGO)  

3 | • 1st Case review held (within 20 working days of child becoming looked after) to review.  

4 | If in Care Proceedings:  
• Fostering TM/DTM Fostering & SW to have oversight.  
• CPR started by SW.  

8 | • Second PPM  
• Subsequent PPMs to be held at six weekly intervals unless the case warrants increased frequency due to complexity. Fostering DTM/TM to attend.  

15 | If in Care Proceedings:  
• Final Care Planning Meeting.  
• For all cases:  
• 2nd Case Review (held within 12 weeks of 1st review) to endorse Final Care Plan (if in Care Proceedings).  

16 | If in Care Proceedings:  
• CPR for Permanent Fostering to be completed.  
• All sibling groups to be subject to sibling assessment.  

17 | If in Care Proceedings: |
<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>21</strong></td>
<td></td>
<td>- Fostering Manager QA/Audit of CPR shared with SW &amp; TM.</td>
</tr>
<tr>
<td><strong>18</strong></td>
<td>If in Care Proceedings:</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Final Care Plan submitted.</td>
</tr>
<tr>
<td><strong>19</strong></td>
<td></td>
<td>- Identified children to be profiled for family finding by Fostering Service. Initial decision re strategy in-house/external. Anonymised information shared with potential foster carers.</td>
</tr>
<tr>
<td><strong>26</strong></td>
<td>If in Care Proceedings:</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Final Hearing PO Granted</td>
</tr>
<tr>
<td><strong>27</strong></td>
<td></td>
<td><strong>Permanent FC Identified:</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Before or after PO Granted, hold selection meeting to determine chosen Foster Carer.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Information shared in full with potential Permanent Foster Carer.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Matching meeting is undertaken to consider support to permanence DTM fostering to chair –SW &amp; SSW to attend</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Fostering panel booked, when all documents received.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Fostering Panel Advisor to QA/Audit of CPR shared with SW &amp; TM.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Plan introductions.</td>
</tr>
<tr>
<td></td>
<td><strong>Permanent FC not Identified:</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Identification of Permanent FC continues - Strategic decisions re external / in house FC.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- FF activity may include Exchange Events &amp; Activity Days. When placement identified process as per week 27 to week 34.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Communication / Escalation to Warrington Head of Service re delay / sibling assessments / changes of plan.</td>
</tr>
<tr>
<td><strong>31</strong></td>
<td></td>
<td>- Matching meeting to ensure that the matching process has been carried out appropriately.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Paperwork submitted four weeks before Fostering panel.</td>
</tr>
<tr>
<td><strong>33</strong></td>
<td></td>
<td>- Fostering Panel - Foster Panel approves long-term match</td>
</tr>
</tbody>
</table>
- ADM makes decision within 10 days

| 34 | Permissions Planning Meeting: Discuss options for SGO  
Dish with child, carers, and parents  
Include outcome of Permanence Planning Meeting in single Assessment  
If agreed - create new Care Plan |

| Within 12 months/ when Assessment due | Introductions  
Placement |

| Repeat 12 monthly | Permanence Planning Meeting: Discuss options for SGO  
Dish with child, carers, and parents  
Include outcome of Permanence Planning Meeting in single Assessment  
If agreed - create new Care Plan |

| Good Practice Permanence |

**Children Returned to Parents Following Period of Separation**

<table>
<thead>
<tr>
<th>WEEK</th>
<th>TASKS</th>
</tr>
</thead>
</table>
| 1    | Assessment by SW Team including Family Group Conference.  
Assessment by Social Work Team indicates threshold has been reached.  
Complete Gateway Application with agreed documentation & recommendation for action.  
Legal Planning Meeting (Team Manager or Senior Practitioner)  
Decision made that threshold has been reached.  
Decision made to enter Pre-Proceedings or Care Proceedings.  
Decision made to multi track plan with re-unification as primary plan but SGO/ Permanent Fostering with possible connected carers as a possible outcome. |
<p>| 2    | From this point onwards ongoing Parenting assessment of positive indicators that: Key problems acknowledged by parents. Parent’s capacity to change and timeliness of |</p>
<table>
<thead>
<tr>
<th>3</th>
<th>1st Permanency Planning Meeting</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>SMART Permanence Plan to be completed and entered on Civica</td>
</tr>
<tr>
<td>14</td>
<td>Child returning home as Permanence Plan</td>
</tr>
<tr>
<td>15</td>
<td>Contingencies: Connected people/ SGO, PWP, Permanent Fostering.</td>
</tr>
<tr>
<td>16</td>
<td>Additional Family Group Conference?</td>
</tr>
<tr>
<td></td>
<td>2nd Permanency Planning Meeting due</td>
</tr>
<tr>
<td></td>
<td>Subsequent PPMs to be held at six weekly intervals unless the case warrants increase frequency</td>
</tr>
<tr>
<td></td>
<td>Parenting assessment completed</td>
</tr>
<tr>
<td></td>
<td>Draft PWP agreement Plan drawn up including local authority support plan for PWP – if child subject to ICO. Note: We would not be expecting Care Order if child is being reunited with Parents.</td>
</tr>
<tr>
<td></td>
<td>PWP approval by Service Manager / HOS &amp; Operational Director if reunification agreed at point of ICO.</td>
</tr>
<tr>
<td></td>
<td>Final Care Planning Meeting</td>
</tr>
<tr>
<td></td>
<td>Options considered: No Order SO CO PWP (Exceptional)</td>
</tr>
<tr>
<td></td>
<td>If Care Order being considered by the Court PWP checks and assessments commence. Consultations with child, family members and agencies Review required with Head of Service Utilise Supervision Order Guidance</td>
</tr>
<tr>
<td></td>
<td>Case Review agrees plan</td>
</tr>
<tr>
<td></td>
<td>Signed approval of Care Plan by Head of Service. PWP must be</td>
</tr>
<tr>
<td>WEEK</td>
<td>TASKS</td>
</tr>
<tr>
<td>------</td>
<td>-------</td>
</tr>
<tr>
<td>18</td>
<td>Final care plan submitted</td>
</tr>
<tr>
<td>26</td>
<td>SO made, ongoing reviews support plan if PWP made</td>
</tr>
</tbody>
</table>

**Good Practice Permanence**  
*(Special Guardianship)*

<table>
<thead>
<tr>
<th>WEEK</th>
<th>TASKS</th>
</tr>
</thead>
</table>
| 1    | • Assessment by SW Team including Family Group Conference.  
• Assessment by Social Work Team indicates threshold has been reached.  
• Complete Gateway Application with agreed documentation & recommendation for action.  
• Legal Planning Meeting (Team Manager or Senior Practitioner)  
• Decision made that threshold has been reached.  
• Decision made to enter Pre-Proceedings or Care Proceedings.  
• Decision made to multi track plan with SGO/ Permanent Fostering with possible connected person outcome  
• Fostering Team allocate case  
• Viabilities undertaken Reg 24 immediate placement |
| 2    | • 1st Permanency Planning Meeting  
• SMART Permanence Plan to be completed and entered on Civica  
• SGO as Permanence Plan with contingencies  
• Contingencies: Connected people/, Permanent Fostering |
| 3    | • 1st Case review held (within 20 working days of child becoming looked after) to review initial care plan |
| 8  | • Second Permanency Planning Meeting due  
     • Subsequent PPMs to be held at six weekly intervals unless the case warrants increased frequency |
|----|-------------------------------------------------------------------------------------------------|
| 13 | • Draft SGO support plan drawn up – sent to SGO worker in CIC & Care Leavers Service.  
     • This includes; Financial assessment. If previously FC – the payments will remain the same (minus benefits)  
     • Referrals for Permanent Fostering if assessment is negative |
<p>| 14 | • Final Care Planning Meeting |
| 15 | • 2nd Case Review (held within 12 weeks of 1st review) to endorse Final Care Plan |
| 17 | • Consultation with child’s IRO for final contribution to Care Plan |
| 18 | • SGO made, ongoing reviews support plan, including contact |
| 26 | • Final care plan submitted with SGO application |</p>
<table>
<thead>
<tr>
<th>TASK</th>
<th>CHILD’S SOCIAL WORKER</th>
<th>FOSTERING SOCIAL WORKER</th>
<th>Together for Adoption (TFA) FAMILY FINDER (FF)</th>
<th>ADOPTER’S SOCIAL WORKER</th>
<th>TIMESCALE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Single Assessment including sibling assessment</strong></td>
<td>To be undertaken at the latest during Pre-proceedings</td>
<td></td>
<td></td>
<td></td>
<td>Prior to issue</td>
</tr>
<tr>
<td><strong>Viabilities</strong></td>
<td>To be undertaken jointly with Fostering Team and to write up viability</td>
<td>Fostering Team</td>
<td></td>
<td></td>
<td>Prior to issue / pre-birth assessment</td>
</tr>
<tr>
<td><strong>Consideration of early permanence placement (concurrency or foster for adopt)</strong></td>
<td>Consideration of early permanence placement (concurrency or foster for adopt) to be raised at Gateway</td>
<td>Together 4 Adoption to identify Fostering for Adopt placement or refer to for Concurrency and ensure procedures are followed. (Social Worker to consider previous sibling’s adoptive placement and notify family).</td>
<td></td>
<td></td>
<td>Prior to issue</td>
</tr>
<tr>
<td><strong>Negative pre-birth assessment</strong></td>
<td>Alert Together 4 Adoption for need for early permanence placement and make decision needed as to whether FFA or Concurrency</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------------------------------</td>
<td>-------------------------------------------------------------------------------------------------</td>
<td></td>
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<tr>
<td></td>
<td>Adoption social worker to complete a sibling referral form to indicate that they wish Together for adoption to alert previous adopter’s and ascertain if interested in adopting this child. If that is the case a viability visit will be undertaken jointly by social worker and TFA. If proceeding they will be invited to register their interest</td>
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<td></td>
<td>Expression of Interest and TFA will allocate to a recruitment social worker to undertake a fast track second time adopter assessment</td>
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<tr>
<td></td>
<td>16 weeks to ADM decision</td>
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<tr>
<td><strong>Allocate family finder</strong></td>
<td>Consideration of Regulation 24/Regulation 25.</td>
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<td></td>
<td>Allocated at Legal Gateway to Family Finder in ‘Children in Care &amp; Care Leavers’ Service.</td>
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<td></td>
<td>Allocation of FF before first PPM within one week of Gateway where adoption is part of a multi-track plan</td>
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<tr>
<td><strong>First PPM</strong></td>
<td>In week one invite family finder / fostering / Legal / virtual school - as necessary.</td>
<td>Fostering to attend</td>
<td>First PPM for aged 10 years and under. Together 4 Adoption to attend. Chaired by TM early planning in particular for sibling groups spanning large age range where sibling assessment is required. Sibling assessment to be completed before SHOBPA. BOOK SHOBPA with Panel Administrator.</td>
<td>Week 2</td>
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<tr>
<td><strong>Ascertain foster carers position</strong></td>
<td>Discuss with Foster Carer.</td>
<td>To undertake adoption information and counselling where child’s foster carer is indicating they would like child to remain on permanent basis. If appropriate do so with child’s social worker/supervising social worker. The response from carer needs to be in writing and put on file. Foster carer to express their interest with TFA. A joint visit with child’s social worker and TFA worker to be arranged.</td>
<td></td>
<td>Week 4</td>
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<tr>
<td>Adoption medical booking</td>
<td>Child’s Social worker to book medical. Ask foster carer and birth parent to attend with them.</td>
<td>SW to support in preparing.</td>
<td>To be also raised by FF at PPM</td>
<td>To be booked by Week 4 and completed by week 16.</td>
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<tr>
<td>Direct work and preparation for outcome of court proceedings</td>
<td>Child’s social worker and foster carer plan work to be undertaken in preparing the child</td>
<td>Support to foster carer to contribute.</td>
<td>FF to offer support and advice including Life Story work.</td>
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<tr>
<td>Second PPM</td>
<td>Update assessment of needs and sibling assessment, if required. SDQ to be completed if age appropriate; Contact FF to request assistance in completing CPR’s as necessary.</td>
<td>SSW to support carer to contribute.</td>
<td>Adoption Social Worker to prepare the profile and share with Together for Adoption managers for them to circulate to their social workers who may be able to identify any suitable prospective adopters. Adoption Social Worker to arrange profiling meeting to collate information and develop family finding strategy. Book SHOBPA. Child’s SW to ensure that the pre-adoption medical is completed in good time for ADM.</td>
<td>Week 8</td>
<td></td>
</tr>
<tr>
<td>Family finding strategy</td>
<td>Together 4 Adoption will profile all children 2 weeks post SHOBPA decision and early decisions will be made about family finding strategy i.e. in house or inter agency based on characteristics of child and whether likely to be “hard to place”.</td>
<td>Ongoing consideration of child for in house matches</td>
<td>By week 14</td>
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<tr>
<td>Third PPM</td>
<td>Decision made as most likely plan, CPR (with oversight and guidance from adoption family finder) if adoption a likely outcome, ADM / SHOBPA booked</td>
<td>If an adoptive placement has already been identified provisionally ensure matching target date provisionally booked in at Panel with dates for short-listing to work within. Family Finding statement – clarify with PPM / Legal if required.</td>
<td>Send CPR, as appropriate, to social workers for families if identified at this stage.</td>
<td>Week 14</td>
<td></td>
</tr>
<tr>
<td>Life story work</td>
<td>Child’s social worker and foster carer</td>
<td>Support from Warrington’s Family Finder, CIC CAMHS if required</td>
<td>Week 14 onwards</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Final care planning meeting</td>
<td>Child’s social worker attends</td>
<td>Attend ADM.</td>
<td>Week 14</td>
<td></td>
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<tr>
<td>ADM SHOBPA</td>
<td>Child’s social worker attends with TM</td>
<td>Together 4 Adoption Panel Advisor will provide agency advice and QA of CPR using Audit Tool.</td>
<td>Week 17</td>
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<tr>
<td><strong>Family finding tasks</strong></td>
<td></td>
<td>Continue to prepare for potential Adoption Placement Order</td>
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<tr>
<td><strong>Evidence filed</strong></td>
<td></td>
<td>Child’s social worker completes.</td>
<td>Week 18</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Identifying and exploring links</strong></td>
<td>Family finding to be undertaken by Warrington SW with strategic decisions reviewed at monthly tracking meetings regarding whether inter-agency or in house</td>
<td>Exchange of PARS and CPRS – CPR may need to remain anonymous until the P.O. is issued. Visit potential families.</td>
<td>Exchange of Pars and CPRS</td>
<td>Ongoing from week 18</td>
<td></td>
</tr>
<tr>
<td>Placement order</td>
<td>Transfer to Permanence Service - Continue with regular PPMs. Child’s social worker and FF to liaise with CTS and Virtual School as necessary for age and needs of child – invite to PPMs.</td>
<td>Live on consortium. Adoption activity and exchange days Full profiles circulated Link maker If meets criteria, DVD and professional photos commissioned.</td>
<td>Week 26</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Life Story Work</td>
<td>Plan of work with foster carer – undertake age appropriate direct work with the child to ensure that they understand why they cannot return home and plan for them. Prepare for adoption. Child’s SW and FF to liaise with CIC CAMHS, Virtual School as Support foster carer with plan of work.</td>
<td>Use Parallel story completed by Family Finder in support of Child’s SW. Ensure foster carers are assisting in the preparation of child if to be placed elsewhere. If meets criteria DVD and professional photos commissioned.</td>
<td>Ongoing from week 26 Life Story work completed in time for match.</td>
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</tbody>
</table>
necessary for age and needs of child invite to PPMs.
<p>| Matching panel date reviewed | Continue with regular PPMs to monitor permanence plans effectively. Child’s SW and FF to liaise with Virtual School as necessary for age and needs of child – invite PPMs. | FF to ensure that the APR/Support plan completed and QA’d. Ensure the child is prepared for adoption pathway. Ensure deadlines for paperwork met. Ensure preparation for Annex A for EPP placements is ready for Match. Transition stage – FF to plan transition: confirm move with IRO, book any accommodation, organise a planning meeting, organise interagency meeting and review minutes, attend 1st CLA review after placement. Consider ‘bumping-into’ meeting for child/adopter. | Week 26 |
| Monitoring the adoption plan | Ensure plan being kept in timescales | Ensure plan being kept in timescales |  |</p>
<table>
<thead>
<tr>
<th><strong>Ongoing visits arranged to families</strong></th>
<th>Information sharing and assessments. Ensure all appropriate services, such as GP, dentist, schools are in place within 1st 27 days of placement. Ensure any support plan needs are in place.</th>
<th>Identify appropriate support. Social worker to submit referral to the TFA support team for Adoption Support Fund (ASF) applications as necessary for support plan. Ensure adopter’s SW undertakes DBS check of support carers.</th>
<th>Ensuring all information is pertinent and translated for adopters. Ensure indirect contact arrangements are signed and arranged.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Arrangements with adopters and Virtual school reeducation</strong></td>
<td>Preparation of adoption placement report/post adoption support plan Proof read before submitting to adoption clerk CPR updated</td>
<td>Preparation of adoption placement report/post adoption support plan Financial arrangements Draft introductions plan</td>
<td>Preparation of adoption placement report/ adoption support plan including possibility of ASF application</td>
</tr>
<tr>
<td><strong>Matching panel</strong></td>
<td>Attends</td>
<td>Collates paperwork Attend panel</td>
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</table>
| Transitions planning | Notify birth family  
Notify IRO  
Arrangements to meet medical advisor Birth certificates/legal orders/ passport health information  
Finalises life story book  
Preparation of the child | Prepare draft plan with F/C & Adopters Family finder to meet with birth parents to set up letterbox.  
Family finder co-ordinate Life Appreciation Day before or after Panel Match, prior to transition. Books accommodation and other practical arrangements | Send minutes of approval to panel administrator  
Adopters worker Interagency minutes and medicals to be seen by TM before booking panel |
|---|---|---|---|
| Introductions | Monitors the Child’s responses and the foster carers | Monitor and support foster carers during the transition period.  
Liaises closely with SSW | Monitors adopters responses  
During transition introduction phase |
| Tasks | Child’s SW and FF to visit the identified family and explore any further tasks required.  
(Consortium / Adoption Link). | Close any open referrals to NAR  
Support to CSW | Support to identified family. |
<table>
<thead>
<tr>
<th><strong>Decision to proceed to placement</strong></th>
<th>Contributes to decision, managers oversight and agreement within 48 hours of visiting the family unless exceptional circumstances.</th>
<th>Strengths and vulnerabilities.</th>
<th>Contributes to the decision, manager’s oversight and agreement.</th>
<th>Contributes to the decision</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Placement</strong></td>
<td>Stat visits Annex A Later life letter Life Story book x 2 (simple and one complex). Ensure child’s belongings are transferred. APP letters to authority where the child is placed. PR – ensure confidentiality and adoptive address.</td>
<td>Post placement / adoption support plan</td>
<td>Stat visits Post placement post adoption support plan</td>
<td>Week 8 of child living with the adopters</td>
</tr>
<tr>
<td>Application lodged</td>
<td>Child’s SW to ensure the adopter’s views are fully considered. Timely lodging of application. Review support plan/single assessment if placement requires more support.</td>
<td>EPP placement application may be lodged when child has been in placement 10 and C/O acquired and all parties satisfied child’s needs is being met. Post adoption support for three years.</td>
<td>Post adoption support for one year</td>
<td>Week 10 of placement (unless foster to adopt or foster carer adopting as application can be lodged after ADM) For older and or more complex needs by second review</td>
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<tr>
<td>Review suitability of placement</td>
<td>Escalation Report if application is not lodged by week 40.</td>
<td>Available for advice and support if the placement requires additional support.</td>
<td>Available for advice and support and assessment if needed if placement requires further support.</td>
<td>Week 42 of placement of application not lodged.</td>
</tr>
</tbody>
</table>
Appendix 7 - Child Permanence Report (CPR) Information Sheet; Aiming for Excellence and Audit Checklist

Child Permanence Report Guidance

Introduction

The Child Permanence Report (CPR) is a significant document in the lives of adopted children and their adoptive family. It is critical to the formulation and effective management of the adoption plan. Child Permanence Reports are probably the most important report that a social worker will ever write.

Who can write a CPR?

The CPR should be compiled by the Social Worker who best knows the child, however, they must meet the statutory requirements of the Restrictions on the Preparation of Adoption reports Regulations 2005 (ARR).

The regulations state that the Social Worker completing the CPR must have at least three years’ post qualifying experience in child care social work, including direct experience of adoption work, or be supervised by a social worker who is employed by the local authority and has at least three years’ post qualifying experience in child care social work, including direct experience of adoption work.

What is the purpose of a CPR?

The CPR is a document with an evolving purpose and with different audiences at each stage. It is essential that the report provides an accurate, comprehensive, informative and up-to-date picture of the child and their circumstances as it moves through the process:

First purpose of the CPR is to confirm the life changing plan of adoption within the agency and the court arena. The readers at this stage are the Local Authority Agency Decision Maker, CAFCAAS Guardians and the judiciary as they decide that the child cannot be raised within their birth family and that adoption is the only acceptable permanence option.

Second purpose of the CPR is to inform the family finding and matching process, by providing detailed information to adopters, social workers and panel members during this crucial stage. The information within the report will greatly influence the decisions made, it
is therefore essential that the report is updated where there have been changes and that the detailed report ‘brings the child to life’ to ensure that a suitable and secure match is made.

Third and final purpose is to provide the adopted person with a record of their life. The CPR is their report and is usually the principal source of information that will help them to understand who they are and where they came from. The CPR provides the detail about their family history and the reasons they were adopted. The adopted person will usually return to the information within their CPR throughout their childhood and adult life. Reading this report will likely be a very emotional journey for the adopted person, the story they read will have a significant impact on them. It will have an influence on how they perceive themselves and how they view their past, their present and their future. At the age of 18, adopted adults have the right to request a copy of their CPR. The final version of the report will be placed on file when the child is placed – it will remain there for at least 100 years.

The adoptive parents will likely share sections of this report to the adopted child throughout their childhood. The adopted person may read this CPR for themselves at age 18 or they might not read it until their adoptive parents pass away by which time they will likely be in their 60’s or even 70’s. The information needs to be candid, sensitive, easily understandable and it needs to stand the test of time.

General guidance for writing a CPR:

- The BAAF CPR template should not be changed and no sections should be deleted. Complete the entire document, using the heading of each section as a guide. If a section is not relevant, state N/A, with reasons were relevant, this confirms that the section has not just been overlooked.
- Make sure that the report is grammatically correct and free from spelling mistakes. Check that dates are accurate and that names are spelt correctly. Adopted people need to know that the local authority cared about them and that they were worth spending time and care upon.
- Use the same format and font throughout the report. The report should be written on a blank template, never overwritten from another child’s report. Ideally do not copy/cut and paste. Don’t use capitals unnecessarily, but when they are used be consistent. For example, if you use capital for Mother you should use capitals on all relations e.g. Brother, Niece etc. throughout the report.
- Use plain English, avoid abbreviations and social work jargon. Provide explanations for services or terms that may not stand the test of time or that will not be easily understood, such as, medical terms and specialist services.
- Spell out acronyms the first time they are used as they will be meaningless to most readers e.g. Placement Order (PO), LAC, CAMHS, PAMS, IRO, PEP etc.
• When something is written down it can be perceived as factual. Ensure information is accurate and if relevant state where it has come from, including if it is self-reported. Avoid adding details of events or situations that are unconfirmed, hearsay or allegations, unless they are significant to the story. Where unverified information is used make sure that it is clearly stated as such.

• Don’t include identifying information or contact details of third parties, such as foster carers, adopters, new partners of birth parents and their children etc. Identifying information includes facts such as addresses, surnames and in some cases first names if they are unusual.

• Be mindful that the adopted person may have additional needs, so use language and explanations that are easily understood.

• Be open, honest and factual, include the difficult facts about the family history and the birth family. But this should be expressed using non-judgemental language. Aim to be objective and try to balance the report with positive information about the birth family.

• Avoid graphic details and very personal information. This is inevitably a balancing act and one of the more challenging aspects of writing a CPR. For example, it may be relevant to know that birth mum had multiple partners and therefore the identity of the birth father is unknown, however, the graphic detail of this is irrelevant and unnecessary.

• Make use of information from other sources, such as, professional reports, historical case files, foster carers, other professionals, extended family and birth parents.

• When updating the report, save the original version and update as a new document. It is quite usual that previous versions of the CPR were written by other social workers, so it is important to take ownership as the writer of the most recent report. Don’t just add updates at the end of sections, update the entire section and remove out of date information.

• Use good quality up to date photographs, which are dated and show just the person named, preferably face forward. Pictures of children should show them at their best, there should be no dummies or dirty faces and no surrounding clutter. Every effort should be made to obtain photographs of birth parents and siblings as they are a valuable keepsake for adopted people. If a picture isn’t available an explanation should be given about the reasons why and the efforts made.

• Chronologies are a crucial component of the CPR. For an adopted person, gaps in the report are gaps in their life and they may never have anyone who is able to fill the voids for them. The chronologies must relate to the heading and each one should be as complete as possible, with every entry being relevant and factual, but concise. Consideration should be given to why information is being recorded, but equally important, why information is being left out.
• When describing the child, portray them as they are, not how you want others to perceive them. To help them make an informed decision about whether to proceed with a match, adopters need to have a realistic, factual, up to date account of the child. Provide a factual, none judgemental, balanced view that brings the child to life, including details of any challenging behaviour, developmental concerns and health issues. Add who has offered the information and provide alternative views and opinions if relevant. For example, a foster carer might offer a different view to a class teacher or a birth parent.

• Provide as much information about birth parents as possible, including facts that will be both important and interesting to the child. For example, family traits, interests, skills, personality and appearance. If parents have disengaged or are unwilling to provide information, use historical case files if relevant, talk to family members or other people who know them.

• If a birth parent has any health issues or poor mental health, add the details, including any confirmed diagnosis or that issues are self-reported. Whilst facts are crucial, it isn’t appropriate to include the explicit details. For example, every episode of self-harm and suicide attempt or illustrative information about unusual behaviours, unless they directly contribute to the child’s experiences or the plan of adoption.

• Include up-to-date information about the child’s siblings, regardless of whether they are directly included in the permanence plan for the child. Siblings will be very important to the child/young person when trying to make sense of their history and identity regarding birth family. Include all siblings. When information is not available, provide details about what efforts have been made to try and get the information so that the adopted person knows that the local authority cared enough to try. Information about siblings that is not relevant to the subject of the report should not be included.

• Offer a clear explanation around important decisions, including contact arrangements, negative family member assessments and placing siblings apart. These decisions can be life changing and it is crucial that the adopted person is able to read about who and why these key decisions were made on their behalf.
CHILD PERMANENCE REPORTS
Aiming for Excellence

To promote excellent standards Together for Adoption offer a varied range of support, training and guidance to all relevant social workers, supervisors and managers.

TfA have produced some written training materials, these are accessible to all staff:

- Two anonymized examples of well written CPR’s.
- One blank CPR template with general advice, tips and easy to follow guidance.
- With the aim of creating an excellent CPR in readiness for family finding, there is an ongoing offer for SW’s to submit CPR’s to the adviser at an early stage of the adoption process. Support and detailed guidance is provided, usually within 5 working days of submission.
- The panel adviser, managers and/or duty officers are available daily from 9.00 am - 4.30 pm offering general telephone advice and guidance around all aspects of adoption, including family finding, matching, attending panel, contact plans, fostering for adoption, adoption support etc.
- All CPR’s are Quality Assured by the panel adviser when they are submitted for panel. Detailed written feedback is provided to the SW when improvement is needed. In addition, SW’s can contact the adviser directly if they need additional support.
- Panel member feedback regarding the quality of reports is regularly provided to the relevant line manager.
- TfA deliver a CPR writing workshop to all SW’s across the RAA, biannually.
- A CPR quality assurance workshop is delivered biannually, by TfA, to all managers and supervisors across the RAA. A QA checklist/template is available to support managers and supervisors completing the process.
- To help SW plan effectively for children there is an easy to read panel date planner. This is widely circulated and displays all relevant information about submissions, deadlines, panel meetings and ADM’s dates.
Child Permanence Report quality assurance audit form

<table>
<thead>
<tr>
<th>Name of Child</th>
<th>DOB</th>
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<tbody>
<tr>
<td>Social Worker</td>
<td>Manager/supervisor</td>
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<td>Local Authority</td>
<td>Date of SHOBPA</td>
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<td>Date of P.O.</td>
<td>Date of matching panel</td>
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<tr>
<td>Person completing the Audit</td>
<td>Title</td>
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<tr>
<td>Date of Audit</td>
<td>Outcome</td>
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</table>

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<thead>
<tr>
<th>Section/ Issue</th>
<th>Completed – Yes, No Partial</th>
<th>Comments/actions required</th>
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<tbody>
<tr>
<td>GENERAL</td>
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<tr>
<td>Question</td>
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<tr>
<td>Is the report up to date, with any previous amendments and improvements completed?</td>
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<tr>
<td>Has the social workers qualification to write the report been verified?</td>
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<td>If the requirement is not met, has appropriate supervision been provided?</td>
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<td>Has the report been signed by all relevant parties (the author, line manager and/or supervisor)?</td>
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<tr>
<td>Has the report been proof read and signed by worker and manager/supervisor?</td>
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<tr>
<td>Have good quality photos of the child, the parents and siblings been included and dated?</td>
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<td>If photos are missing have reasons been added?</td>
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<tr>
<td>Has a genogram including all full and half siblings been produced?</td>
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<tr>
<td>Has the child’s name and that of family members been spelled accurately and consistently through the report?</td>
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<tr>
<td>Are all dates correct and consistent throughout?</td>
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<tr>
<td>Have generalisations been avoided e.g. is it clear what is meant by ‘historical concerns’, poor mental health etc.?</td>
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<tr>
<td>Is the report non-judgemental and well balanced?</td>
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<tr>
<td>Has difficult information been clearly written and explained. And is it written sensitively with the adopted adult in mind?</td>
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<tr>
<td>Questions</td>
<td>Answer</td>
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<tr>
<td>Do resources named in the report have a description of what they do e.g. St John’s Care (Substance Misuse Service)</td>
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<tr>
<td>Have all questions in the CPR been answered, even if the answer is N/A.</td>
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<tr>
<td><strong>Chronologies</strong></td>
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<tr>
<td>Agency actions - is this brief and to the point containing only the key actions and decisions that map the agency’s planning for the child?</td>
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<tr>
<td>Parents - has a full chronology and social history of each birth parent been provided which includes details of parents’ childhood, being parented, school and work experiences and relationships?</td>
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<tr>
<td>Where parents have been in care have the files been obtained and the appropriate detail incorporated into the chronology?</td>
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<tr>
<td>Child - does the child’s chronology start with the child’s birth and move chronologically through their life covering early childhood, experience of being parented, risks/concerns, social work support to address this, entry into care and progress in placements, significant points in the court process and why adoption became the plan?</td>
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<tr>
<td>Where chronologies are asked for, do they relate specifically to what is asked for and avoid unnecessary detail?</td>
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<tr>
<td><strong>Child’s Health</strong></td>
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<tr>
<td>Do the details correspond with the last health assessment and Adoption Medical Advisors report?</td>
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<tr>
<td>WISHES AND FEELINGS</td>
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<tr>
<td>Child - Is there evidence in the main body of the report that the social worker has regularly worked with the child regarding the plan for adoption?</td>
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<tr>
<td>Has the social worker taken account of the child’s wishes &amp; feelings and included them within the report? Where the child is too young/non-verbal, has the social provided a view on behalf of the child?</td>
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<tr>
<td>Parents - Is there evidence in the main body of the report that the social worker has regularly worked with the parents regarding the plan for adoption? Where parents have disengaged is there evidence that efforts have been made to work with the parents?</td>
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<tr>
<td>Have the parents, with the social worker’s support, been able to provide their wishes &amp; feelings and are these incorporated in the report?</td>
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<tr>
<td>Have all or part of the CPR been shown to the parents and if not an explanation given?</td>
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<tr>
<td>Have the parents been advised of the support available and has a referral been made for independent birth parent support?</td>
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<table>
<thead>
<tr>
<th>SIBLINGS</th>
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<tbody>
<tr>
<td><strong>If siblings are to be placed together for adoption does the CPR evidence what assessment has been done of the sibling relationship and why this is the plan?</strong></td>
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<tr>
<td><strong>Singleton child to panel with siblings - have the carers of those half/full siblings been contacted and Section 24 of the CPR completed on each sibling?</strong></td>
</tr>
<tr>
<td><strong>CONTACT</strong></td>
</tr>
<tr>
<td>Are current contact arrangements (with parents and siblings) explicit in terms of frequency, where it is held and how the child’s needs are met?</td>
</tr>
<tr>
<td>Has the reduction in contact plan been clearly stated?</td>
</tr>
<tr>
<td>Proposed future contact (with parents and siblings). Are the details explicit e.g. one or two way, how often, with photos, how facilitated?</td>
</tr>
<tr>
<td>Is the post adoption contact plan realistic and achievable?</td>
</tr>
<tr>
<td><strong>OTHER RELATIVES</strong></td>
</tr>
<tr>
<td>If viability assessments were carried out on others is it clear in the CPR why they were deemed unsuitable carers?</td>
</tr>
<tr>
<td><strong>OTHER ASSESSMENTS/PLANS</strong></td>
</tr>
<tr>
<td>If expert assessments were commissioned in the care proceedings are the conclusions of these summarised in the main body of the CPR?</td>
</tr>
</tbody>
</table>
Based on the child’s previous experience and current functioning, does Section 33 provide an outline of any adoption support the child’s likely to need, both long and short term?

<table>
<thead>
<tr>
<th>GENERAL COMMENTS</th>
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<tbody>
<tr>
<td>Include whether the report is adequate for SHOBPA/Matching, requires significant improvement etc.</td>
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</table>
Appendix 8 - Family Finding Role and Function – Adoption

Tracking and Early Identification of Children

Notifications will be made to Together 4 Adoption following the local authority’s legal gateway meetings in order to ensure that it has awareness of all children who are subject to the pre proceedings stage of the PLO process and where the Care Plan is or could be Adoption. This will apply to children aged 8 or under as well as children of 10 or under in exceptional circumstances. At this very early stage these cases will be tracked with family finders communicating with case holding social workers to ensure information about progress of assessments and the likelihood of care proceedings being initiated is provided. Careful consideration will be given to ensuring that time and resources are not devoted to cases where adoption is unlikely to be the plan for the child.

During this early tracking stage family finder input will be escalated where indications are that parents and connected persons assessments are likely to be negative. Key triggers for further escalating family finder input will be the accommodation of the child or decision to initiate care proceedings.

Where this is the case Together 4 Adoption staff & Warrington’s Family Finders where necessary, will attend key meetings, in particular legal advice / legal planning meetings.

Notification from Legal Gateway meetings will also ensure that Together 4 Adoption is able to influence and assist with decision making and planning about early permanence / placement opportunities for children where Foster to Adopt or Concurrency may be appropriate.

In addition systems will be put in place with each local authority to ensure that information about children who are not discussed at legal gateway is not missed, for example children at home under Care Orders where the plan is changed and children accommodated in an emergency.

Monthly Together 4 Adoption tracking meetings will take place on an individual local authority basis. These meetings, chaired by Team Managers, will consider and update the plan for each child on the Together 4 Adoption Tracker. Family finders and their team manager will attend these meetings with updated information about each child and the family finding strategy will be agreed, reviewed and recorded on the Together 4 Adoption tracker. Team / Service Managers will highlight from the tracking process practice issues or delays in care planning with a view to escalating these with identified service leads in each local authority. Judgements will be made about which cases need to be escalated in this way along with those where service level discussions between family finder and / or their team managers are considered sufficient.

Family Finding Process Prior to Placement Order Being Granted

As outlined above Family finders will be allocated to all children from Legal Gateway (as per the criteria stated above) with a liaison brief at this early stage. They will attend tracking meetings with up to date information about the case and care planning. For many of the children at the early stage (PLO / Pre Proceedings) the information will be brief and further involvement unlikely but it is
important that these children remain on the tracker and are reviewed monthly in case there is an unexpected change in the plan for the child.

The family finder will liaise with the case holding social worker to ensure that preparatory work is being undertaken e.g. sibling assessments, needs assessments, and early identification of connected persons who may need assessing as suitable carers. This early monitoring will ensure that delays in progressing these assessments does not cause delay later in the process. Family finders will also keep up to date with care planning and likely permanence options for each child.

The family finder’s role will increase as the plan looks more likely to become one of adoption and once the child is accommodated or care proceedings have been initiated they will need to be present at key meetings within the local authority, including any care planning meetings where permanency decisions are being considered. They will not meet with birth parents or the child at this early stage, as this will remain the role of the case holding social worker.

Family Finders will discuss cases in supervision with their line manager and at monthly tracking meetings. Where concerns arise about lack of early or effective permanence planning for a child these will be escalated in a timely way to the Team / Service Manager who will raise with service lead in the local authority.

The Family Finder will convene a review meeting no later than three weeks prior to the ‘should be placed’ decision (SHOBPA). The purpose of this meeting will be to review and determine the family finding strategy for the child and this information will inform the profiling of the child, which will take place prior to SHOBPA. The meeting will draw together information for a full assessment of the child’s placement needs taking into account the views of key professionals involved, i.e. the case holding social worker, their manager and the family finder’s manager. It may be that in many cases the meeting and early profiling will take place much earlier than this. The family finder will also update the profile regularly to ensure it contains the latest and most accurate information about the child.

The aim will be to profile all children within a timescale of 2 weeks post SHOBPA but many children will be profiled earlier than this. Timescales will be individual to each child and will be agreed via supervision and tracking meetings.

Family Finders will also undertake the following functions;

- Oversee and promote good practice in working with birth parents and informing them about the need for twin track planning for the child during court proceedings and obtaining relevant information about their histories and health for the Child Permanence Report.

- Provide support and advice for case holding social workers in completing Child Permanence Reports, advise on Care Planning and provide Family Finding statements for the Court. This function will seek to ensure good practice and maintain consistency and high standards. The initial quality audit of the CPR will be undertaken by the child’s social worker’s manager before the case is referred for SHOBPA at which point the agency advisor will use the CPR audit /checklist to quality assure the document. Suggested changes will be recorded on the
audit / checklist and passed to the social worker, their manager and panel co-ordinators. Panel co-ordinators will make the audit tool available to the agency advisor for matching panel. The CPR will be audited again by the agency advisor prior to matching panel to ensure the changes were made. (Appendix 7: Audit Checklist)

- Drive timescales and processes in each local authority by work closely with the social worker.

- Oversee processes for undertaking adoption / permanence medicals with a view to avoiding delay.

- To oversee and consider the SHOBPA process, advising and supporting the preparation of the required documentation with a view to adhering to timescales and ensuring high standards of information to support the decision. To ensure, along with panel administration staff, that SHOBPA meetings are booked in advance.

- Facilitate, advise and promote the need for specialist assessments, e.g. sibling / attachment assessments. Input from this team will greatly assist with evidencing the children’s needs and in finding an adoptive placement.

- Produce anonymous profiles of children, using information from the CPR, the case file and verbal discussion with social workers, professionals and carers who know the child well. This will ensure that accurate and up to date information can be shared with prospective adopters prior to Placement Order being granted. The family finder will gather as much information as possible in preparing the child’s profile at this stage.

**Family Finding Process after Placement Order Granted**

The aim is for the majority of children to be provisionally matched prior to the Placement Order being granted. However, we recognise the challenge this may present.

Once the local authority has the legal authority to place the child for adoption the family finder will become more directly involved in working with the child. They will visit the child in placement and will ensure the profile is up to date. Where specific permission has been obtained from the court some profiles of children including photographs may be shared with prospective adopters prior to the Placement Order being granted.

Children will also be profiled on Link Maker with the strategic family finding plan for each child (agreed at tracking meetings and in supervision) determining the timescale for in house, regional and national family finding activity. The Link Maker site is designed to enable these timescales to be pre-determined at the point of setting up the child’s profile.

Adopters for Together 4 Adoption will be placed on Link Maker by their social workers at the start of stage 2 to enable early matching opportunities to be identified. Link Maker will also indicate which adopters are eligible for Foster for Adopt placements. TFA hold monthly available adopters meetings
as an opportunity to profile approved adopters and adopters within assessment. Family finders are expected to attend these meetings to promote early permanency.

For the majority of Together 4 Adoption children there will be a period of time where only in house adoptive parents are considered. This will be undertaken via strategic use of Link Maker as well as via regular whole service exchange meetings. Information about children and adopters within Together 4 Adoption will be shared opening across the whole agency and not within individual spokes whereby priority could be given to local matching.

For certain children, categorised as likely to wait longer, a decision will be made to undertake family finding activity within the wider region or nationally at a much earlier stage or immediately. Again decisions about this will be made as above.

For Foster to Adopt and Concurrency Placements specific decisions will have been made at Care Planning Meetings about sharing information with prospective carers at an earlier stage. This is authorised within regulatory guidelines

**Adoption / Family Finder Role – Progressing to Placement**

The range of actions and activities undertaken by family finders are outlined below:

- Advise on life story work, preparation of children for adoption and appropriate contact reduction plans. Adoption support colleagues may be involved at this stage.

- Refer children to Coram BAAF activity days (where agreed at tracking meetings). All children who may wait longer will be considered for activity days. Consideration will be given to this at tracking meetings while agreeing the individual placement strategy.

- Share Prospective Adopter Reports with case holding social workers.

- Arrange the selection meetings and, in conjunction with their manager, identify the short list of adoptive parents. A maximum of three adopters will be shortlisted and although the PAR’s for the adopters on the shortlist will be shared with the case holding social worker prior to the meeting the family finder and their manager will have the responsibility agreeing and finalising the shortlist. At that stage only will the case holding social worker need to be involved in the decision about the best match and this will minimise delay for the child. The meeting can be chaired by a manager, advanced practitioner or the family finder themselves but the team manager for the family finder must have oversight of the decision and record as a manager decision even if not chairing the meeting. Best practice will be for the adopter’s social worker to be present at the shortlisting meeting but if this is not possible or likely to cause delay the family finder will ascertain their views and feed these into the discussion. If the shortlisting recommendation is negative it is essential that discussion takes place with the adopter’s social worker in fully exploring that decision and incorporating their views along with those of their manager.
• Provide advice and information about the child to assist with the decision making process within the selection meeting and to produce minutes of the meeting to evidence the decision making process.

• Oversee and drive an agency timescale of 6 weeks (maximum) from the confirming the match is proceeding to date of matching panel.

• Liaise with Adoption Support colleagues who must be consulted and involved in planning the support needs of any child where there are likely to be specific support needs, e.g. a child with additional needs.

• Share anonymous information (unless we have Placement Order or agreement to disclose identifying information) with the identified first choice family.

• Undertake first visit with the social worker to prospective adopters to further inform matching process

• Plan foster carer visit to adopters with social worker to provide further information about the child

• Ensure that prospective adopters have the opportunity to meet all the people who know the child / children so that they have a full picture of the child’s needs and day to day life, for example medical advisor to panel, health visitor, family support workers, educational staff, foster carers, IRO’s, portage staff.

• Arrange a ‘bump into’ meeting prior to attending panel if it is deemed to be appropriate. This can be an opportunity to start to build the emotional attachment between the prospective adopter/s and the child/ren.

• Support and encourage the relationship between the foster carer and adoptive parents at the earliest opportunity to support the child’s transition and transfer of their emotional attachments. Encourage the exchange of information before, during and after introductions to build on the relationship and to support the adopters in the early days of placement.

• Assist with matching panel booking, advise social worker of panel deadlines in terms of gatekeeping to ensure that timescales stipulated in service standards are met.

• Oversee and provide advice on the preparation of life story work. Facilitate the completion of the ‘All About Me’ form that the adopters will keep. This outlines the specific needs of the child and how the adopters need to respond in their first steps as therapeutic parents, to build attachments. The Adoption Support Team can assist with this.
• Ensure all relevant information is shared with the adopters and their social worker. Ensure effective communication and liaison is maintained.

• Assist social worker in completing matching documentation and specifically Adoption Placement Report ensuring appropriate input from case holding social worker and adopters.

• Attend pre-panel meeting which must be chaired by a team manager with a view to ratifying the match prior to panel. The meeting should also be attended by the child’s social worker, the adopter’s social worker & potential adopters. If the latter is not able to attend or this will cause delay their views must be incorporated into the meeting via the Matching Meeting Report.

• Attend panel with case holding social worker and present evidence for the match.

• Arrange and facilitate a life appreciation day for the child/ren and prospective adoptive parents.

• Arrange a meeting between prospective adopters and relevant family members at an appropriate time. Recognise that this is a highly emotive time for all involved and ensure that all parties are prepared and supported with this.

• Liaise with adopters and their worker to provide welcome book / talking book appropriate to child’s age / development. Discuss with foster carer how to use welcome book with the child and prepare other information about the adopters for the child’s preparation (photographs etc.)

• Agree and plan draft programme of introductions with adopter, foster carer and professionals. For certain complex placements over significant geographical distance or siblings a specific meeting will be convened to plan the best approach to introductions.

• Attend placement planning meeting (chaired by team manager). Present plan of introductions for discussion and agreement.

• Continue regular liaison with all professionals throughout introductions to ensure any concerns are addressed and attend mid-way review. Chair mid-way review in absence of team manager

• Ensure that adopter, foster carer and social worker feedback about progress of introductions is obtained prior to mid-way review and placing the child to inform decision making about progressing to placement. Escalate concerns where necessary.

• To make a referral to the letter box coordinator and oversee the process and timescales for Life Story Book and Later Life Letter. Where these are delayed the family finder will escalate concern via their manager.
Appendix 9 - Supervision Order Guidance and Overview

1. Supervision Orders

Children’s Social Care policy is to utilise appropriate measures under the Children Act 1989 to protect children who are suffering, or likely to suffer from Significant Harm. Thus for a child to be the subject of a Supervision Order, the grounds for Care Proceedings must be met, and the child’s needs, together with the management of the Supervision Order, through Child In Need planning, is seen as of equal weighting to all children who have been the subject of proceedings. Supervision Orders are time limited, and may be extended where needed on application to the court, but at all times the care and safeguarding needs of the child should be primary considerations for all children’s services staff.

When considering applying for a statutory order it is important to be mindful of the overriding principle within the Children Act 1989 that the least intervention should always be considered as the primary option. The Local authority should within its assessment evidence analyse the issues of risk and how these will be mitigated. To assist the Children Act 1989 sets out the following conditions that need to be met before a supervision Order will be granted.

2. Key Points

A court may only make a Care Order or Supervision Order if it is satisfied:

That the child concerned is suffering, or is likely to suffer Significant Harm; and

That the harm, or likelihood of harm, is attributable to:

   A. The care given to the child, or likely to be given to him if the order were not made, not being what it would be reasonable to expect a parent to give to him; or

   B. The child being beyond parental control.

A Supervision Order does not confer parental responsibility upon the parent or guardian with care of the child. The Supervision Order will be in place for the period of time directed by the court.

No Supervision Order may be made with respect to a child who has reached the age of seventeen (or sixteen, in the case of a child who is married).

Supervision Orders can be made with respect to a child who is subject to a Residence Order/ Child Arrangements), Special Guardianship Order, or any Section 8 Order and will not end those orders, being expected instead to support the carers in the best possible care of the child.

3. Duration of Orders

Upon application the Local authority must be clear the purpose of the supervision Order, what will be achieved and the timescale required. The maximum length of time a Supervision Order can be
granted for is twelve months. However it is important that the practitioner is clear about the timescale that we would want the Supervision order to run for. An Application can be made to the court to extend or further extend a Supervision Order for such period as the court may specify, but cannot extend in total for a period beyond three years from the date on which the Supervision Order began. Whilst a Supervision Order is in force it shall be the duty of the supervisor, who will be a registered social worker to:

1. Advise assist and befriend the supervised child;
2. Take such steps as are reasonably necessary to give effect to the order; and

Where:

a. The order is not wholly complied with; or
b. The supervisor considers that the order may no longer be necessary;

To consider whether or not to apply to the court for its variation or discharge.

4. Directions available within Supervision Orders at the (at the direction of the Court)

Directions can be made, which are sometimes relevant for older children, e.g. requiring them to live in a specific place in the case of a child who persists in returning to the home of a person who is a risk), or requiring them to attend medical appointments (e.g. a child with anorexia or self-harming or other diagnosed mental health problems). There may be other circumstances in which directions are appropriate.

A Supervision Order may require the supervised child to comply with any directions given from time to time by the supervisor which require him to do all or any of the following things:

a) To live at a place or places specified in the directions for a period or periods so specified;

b) To present himself to a person or persons specified in the directions at a place or places and on a day or days so specified;

c) To participate in activities specified in the directions on a day or days so specified.

It shall be for the supervisor to decide whether, and to what extent, he exercises his power to give directions and to decide the form of any directions which he gives.

Within the Supervision Order there is the opportunity to impose obligations on a responsible person, (Schedule 3). This makes the requirements the responsibility of the parent/carer as well as the child, but it needs their consent at the final hearing to include it in the order.

(Paragraph 8) requires the responsible person to give details of the child’s address and allow the supervisor reasonable contact with the child.
The responsible person, in relation to a supervised child means:

a. Any person who has parental responsibility for the child; and

b. Any other person with whom the child is living.

A Supervision Order may require the supervised child to submit to a medical or psychiatric examination or to submit to any such examination from time to time as directed by the supervisor. See Schedule 3 for further details particularly in relation to medical.psychiatric examination and treatment.

5. Standards

- A Supervision Order should only be considered when no lesser option will meet the child’s needs;

- An in principle decision to recommend care proceedings, including to obtain a Supervision Order should be taken following presentation of the matter to the appropriate Gateway Panel

- Children’s wishes and feelings should be ascertained as soon as possible;

- The social worker applying for a Supervision Order must be clear about the plans and timetable for the child as informed by their assessment.

- The SWET should clearly set out that a supervision order is the only order that would safeguard the child within their individual circumstances as oppose to the alternatives.

- Any social worker, who has obtained an interim or final Supervision Order, shall immediately inform any person who is caring for the child, as well as their team manager and other significant professionals, and enter the details on the child’s electronic record.

6. Management of Supervision Orders

At the finalisation of the proceedings, a Care Plan will have been presented to the court detailing the aspects of the Supervision Order. A Care Plan for the Supervision Order must be immediately moved after the proceedings into the Child In Need Plan and should match the aspects of the Care Plan presented to the court.

The child’s situation should be managed through the Child and Family Progress Meetings where the Child and Family Progress Plan will be actively considered. The Child and Family Progress Plan should be reviewed in line with the Child in Needs Procedures. There will be a review of Supervision Order at the midway point, which will be no greater than six months; this review will be chaired by a Service Manager. The purpose of this will be to review progress against the support plan.

Child in Need visits to the child should take place at a minimum of every four weeks the child should be seen alone (dependent on age and understanding) and his or her wishes and feelings obtained,
and recorded. The child should be visited outside any Child In Need meetings held at the child’s home.

7. Extending Supervision Orders

During the Child In Need Meetings constant attention should be given to whether the Supervision Order will need to be extended.

No later than three months before the expiry of Supervision Order The matter will be placed before the Legal Gateway Panel alongside an update Child and Family Assessment, which clearly identifies progress made against the plan, clear analysis of the child’s needs and how they are likely to be met alongside the permanence plan. This discussion and the outcome should be fully recorded within the legal Gateway Minutes.

If at the Legal gateway Panel meeting it is recommended that the Supervision Order is not providing the level of safeguarding required for the child, it may be felt that it is necessary to return to court to seek a Care Order.

In an emergency a decision to place the matter before the court can be taken by a Service Manager.

NB an application for a Care Order whilst a Supervision Order is in force will be treated as a fresh Care Proceedings application and the threshold for making a S.31 order will have to be proved as at the date of Local Authority intervention (usually the date of the new application).
What is a Special Guardianship Order?

(Children Act 1989 Section 14)

Information for those considering Special Guardianship in Warrington

What is Special Guardianship?

Special guardianship is a legal option intended to provide permanence for children who are not being raised by a biological parent. Special Guardianship is an alternative legal status for a child that offers greater security than long-term fostering but without the absolute legal severance from their birth family which an adoption order would serve to do.

What does having Special Guardianship mean?

A Special Guardianship Order (SGO) gives the Special Guardian parental responsibility for the child. Unlike adoption, under a SGO the parents remain the child's parents and retain parental responsibility. However, Special Guardianship overrides the parental rights and responsibilities of the biological parent, whose ability to exercise their parental responsibility are extremely limited.

The intention is that the Special Guardian will have clear responsibility for all the day-to-day
decisions about caring for the child or young person and for taking any other decisions about their upbringing, for example their education.

**Are there other orders that can sit alongside an SGO that I need to be aware of?**

Additional orders may be made alongside the Special Guardianship Order such as a ‘Contact Order’ which sets out the level of direct or indirect contact that the child has with a biological parent or other person considered significant to the child such as a sibling.

**How do Warrington Borough Council support those with SGOs?**

Warrington currently have a support team called the Families First Team. The team offer interventions to families who require support in order to help prevent the breakdown of a child’s placement.

**How do the Families First Team support Special Guardians?**

1. **The Families First Team can be a listening ear.**

Warrington developed the Families First Team, as we are aware that being a Special Guardian can often be an isolating and very difficult role. Having a listening ear to advise and guide you can make a massive difference. The team are here to support you with this.

2. **The Families First Team can provide assistance with mediation and contact with birth parents.**

Often families need a little more assistance with mediation between Special Guardians and birth parents, particularly around contact in order for the child to maintain positive links with family. The team are here to support you with this.

3. **The Families First Team can provide you with additional training and services to help to meet your child’s needs.**

Our children often have additional educational, emotional or behavioural needs as a result of their earlier childhood experiences. Families often require help for the child to understand their background, or require assistance to access additional services such as therapeutic work, advice and information. Special Guardians may benefit from extra professional training to develop their skills and equip them to deal with the child’s needs. The team are here to support you with this.
Want to find out more?

If you would like more information about becoming a Special Guardian, the support we can provide, or have any other queries, please don’t hesitate to get in touch.

If you already have an SGO for a child you care for, we would love to hear your views on being a Special Guardian, what has helped you and your family and what support you would like to see in the future. This will help us develop the service and support you receive.

Please contact:

- Email: familiesfirstservice@warrington.gov.uk
- Tel: 01925 442725

We look forward to continuing to support you on your journey and providing support tailored to the needs of you and the child you are caring for.