



# Knowsley's Signs of Safety Practice Guidance





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**People are people, not cases or ICS numbers**

# Introduction

Knowsley has adopted Signs of Safety as its practice framework. The framework is being used across the whole of Children's Social Care and partner agencies. This document sets out the practice expectations across Children's Social Care so that everyone is clear about what good Signs of Safety practice looks like in Knowsley, and everyone knows what is expected of them.

This document has been produced following Signs of Safety training being undertaken by the majority of staff and has been produced in consultation with staff in different service areas to make sure it is relevant, clear and applicable to all staff.

It is important to remember that whilst Signs of Safety is the practice framework that Knowsley has adopted, this does not negate the statutory duties that we have. Signs of Safety is there to support practitioners to carry out their statutory duties in a way that brings to life the principles of the Children Act 1989, specifically that those involved in providing services should work "in partnership" with families and children who may be in need.

To this end it should be noted that Knowsley no longer refer to families and children as "cases". The terms family, parents, carers and children should be used. People are people, not cases or ICS numbers.





# Words from Colette Dutton

## Knowsley Council's Executive Director of Children's Services

In Knowsley we want to ensure that all children have the best start in life and achieve their full potential. To that end, we have four priorities linked to improving outcomes in Children's Social Care and Targeted Services which Signs of Safety will support us to achieve and embed:

1. We always put children and young person first and listen to them.
2. We understand what impact a situation is having on the child or young person.
3. We take action to make positive change a reality.
4. We work with families to achieve long lasting change, ensuring that children and young people get the right service for them at the right time.

This practice guidance is one of the many tools available through the Knowsley Social Work Academy to support you to achieve these priorities and enable good social work practice to continue to flourish. Further information about the Knowsley Social Work Academy is available at [www.knowsleysocialworkacademy.co.uk](http://www.knowsleysocialworkacademy.co.uk)



I would like to take this opportunity to thank you all for your continued hard work and particularly many thanks to those of you that have been engaged in the development of this new guidance. I hope you all look forward to embracing this new and exciting way of working with the children and families of Knowsley.



*Colette Dutton*

**Colette Dutton**  
Executive Director of Children's Services



One of the issues with Social Work practice is the amount of “jargon” that we use. One of the Signs of Safety values is that we use understandable language with families as this helps them to fully engage with the support offered. Inevitably Signs of Safety has its own terms that you may not be familiar with so we have included a glossary of terms to make sure that practitioners are using a common language.

# Glossary

## **Appreciative Inquiry:**

A way of using questions to support families to look at what has gone well in the past, understand why it went well in the past, and help them reflect on this to come up with good plans for the future.

## **Bottom Line:**

A set of minimum conditions set by the practitioner about what must or must not happen to make sure the safety goal can be achieved.

## **Complicating Factors:**

These are issues that a family are facing that may make it harder for them to address the issues that are causing the child harm.

## **Genograms:**

A picture of the family relationships; including separations. A more thorough one can include issues people face such as health issues, substance misuse issues etc.

## **Danger Statement:**

This is used where there are worries about a child's safety. It is a clear, jargon-free statement setting out who is worried, what they are worried about and what the likely impact will be on the child if nothing changes.

## **Direct Work:**

Specific pieces of work that are done with a child or family to identify wishes and feelings, gather information or support them to achieve safety goals.

## **Direct Work Plan:**

A plan detailing the direct work sessions that will be completed with the child and family in order to support them to achieve the safety goals.

## **Family Finding:**

A set of strategies and tools, values and beliefs developed by Kevin A Campbell. The approach has been recognised as best practice when using the Signs of Safety approach.

## **Family Support Meeting:**

A meeting in the Early Help Service that brings together the family, their support network and professionals in order to agree and review the impact of the plan in achieving the safety goals.

## **Group Supervision:**

A facilitator, supported by an advisor, leads a case holder and a number of observers / participants through the process of developing a genogram, sharing information about the family and developing danger statements, safety goals and the best questions to be used in appreciative inquiry. The purpose of this is to reflect, practice skills and develop next steps.



**Harm Statement:**

A clear, jargon-free statement of specific incidents of past or current harm to a child.

**Mapping:**

This is when the practitioner takes all the information they have gathered and analyses it across the seven Signs of Safety analysis domains (harm, danger, complicating factors, existing strengths, existing safety, safety goals and next steps).

**Picture Exchange Communication System (PECS):**

A tool that helps people with little or no verbal communication to communicate using pictures.

**Rapid Support Network Meeting:**

An urgent meeting with the family and their support network that is facilitated by a practitioner. This is usually held on the day of an emergency. The purpose of the meeting is for the family and their support network to develop an immediate safety plan to keep a child safe for a set number of days.

**Safety Goal:**

A clear, jargon-free description of what practitioners need to see happen to close the family to services. The safety goal will tell everyone what the family need to be doing that will show / tell us that the child is safe.

**Safety People:**

These are the people that the family choose to help them come up with, and stick to a safety plan. Each safety person will have a job to do in the safety plan.

**Safety Planning:**

This is the process in which the practitioner uses a series of questions (Appreciative Inquiry) to help the family and their safety people to come up with a safety plan that addresses each danger statement.

**Safety Plan:**

This is the plan that the family and their safety people develop with support from the practitioner. The plan sets out what everyone will do to keep the child safe.

**Scaling Question:**

This is a question that asks someone to rate something, often a family situation, on a scale of 0 to 10, where 0 and 10 are clearly defined.

**Solution Focused Questions:**

These are a style / type of question that a practitioner can use to support families to talk about problems and difficulties in a way that opens up more positive conversations that can help them identify different ways of dealing with things in the future. They focus on things that are already working well.

**Support Network:**

This is a group of safety people that the family have identified themselves that are willing and able to help the family keep the child safe.

**Support Network Meeting:**

A meeting with the family and their support network that is facilitated by a practitioner. The purpose of the meeting is for the family and their support network to develop a safety plan.

**Three Houses Work:**

A direct work tool to use with children to help them identify their worries, good things and things they would like to change / be different.

**Trajectory:**

A clear and agreed timeline of what will happen between 'now' and the family being closed to a service.

**Words and Pictures Work:**

A storyboard of a family's situation that helps children understand what adults are worried about and what everyone is doing to sort out the worries. The storyboard is written by the practitioner, shared with parents, amended / approved and then parents read it to the children.

**Worry Statement:**

This is used where there are worries about a child's wellbeing. It is a clear, jargon-free statement setting out who is worried, what they are worried about and what the likely impact will be on the child if nothing changes.

**Wellbeing Goal:**

A clear, jargon-free description of what practitioners need to see happen to close the family to services. The wellbeing goal will tell everyone what the family need to be doing that will show / tell us that the child's needs are being met.





# Signs of...?

Munro,Turnell and Murphy (2006) note that one of the most important developments in the Signs of Safety innovations project has been to expand the approach to fit across the whole service. In Knowsley we have talked about how some of the terminology e.g. Danger Statements aren't always appropriate, e.g. for a looked-after child or a child with a disability. The following tables show which phrases can be used instead.

Table 1

| Status   | Signs of...  |
|--|--|
| Early Help   | Wellbeing  |
| Child in Need  | Safety   |
| Child Protection   | Safety   |
| Looked After Children / Adoption   | Success<br>When there are safeguarding concerns about a looked after children, there will need to be some Signs of Safety within the overall Signs of Success care plan. |
| Leaving Care   | Successful Independence  |
| Fostering  | Success<br>Things can look stable but not actually be successful so this is the preferred term.  |
| Children with Disabilities<br>- respite only<br>- child in need<br>- child protection<br>- looked after children | Wellbeing or success<br>Safety<br>Safety<br>Success  |

Table 2

| Assessment Type    | What are we worried about? |                  |                      | What’s Working Well? |                    | What Needs to Happen? |            |
|--------------------|----------------------------|------------------|----------------------|----------------------|--------------------|-----------------------|------------|
|                    | Past                       | Future           | Complicating Factors | Existing Strengths   | Existing Solutions | Goals                 | Next Steps |
| Signs of Safety    | Harm                       | Danger           | Complicating Factors | Existing Strengths   | Existing Safety    | Safety Goals          | Next Steps |
| Signs of Wellbeing | Wellbeing Concerns         | Critical Worries | Complicating Factors | Existing Strengths   | Existing Wellbeing | Wellbeing Goals       | Next Steps |
| Signs of Success   | Worrying Behaviour         | Critical Worries | Complicating Factors | Existing Strengths   | Existing Success   | Success Goals         | Next Steps |





**Families should always be informed that meetings are taking place**

## Types of meetings

We all know that as soon as a family is referred to Children's Social Care there are many meetings that take place and this can be overwhelming for families. The Signs of Safety approach emphasises the importance of open and honest relationships with families; we need to have difficult conversations with families in a respectful way. It is important that whenever we have a meeting about a child, the family are involved as much as possible.

Family members (including their safety people) will always be invited to meetings about their child; with the only exceptions being strategy meetings and legal planning meetings. The only other time a family should not be invited to a meeting is when professionals have disagreements that are impacting on working relationships and the meeting can be used, almost as a group supervision, to support all professionals to work better together to improve the outcomes for the child.

Families should always be informed that meetings are taking place (unless it would place the child at risk) and should always be informed of the outcome of the meeting as soon as possible after it has taken place; with at least a phone call on the same day or a face to face meeting within one working day.

The timing of meetings is also important:

- If it is a meeting that families are not invited to try to avoid meeting on a Friday if you are not able to feedback before the weekend; it is not fair to leave families worrying about what was discussed.
- Try and put some meetings back to back to minimise the number of meetings family's need to attend, for example, a support network meeting could take place at the beginning of a CIN review or a core group, with professionals joining at a later time. Keep the meetings short and succinct to make sure people stay engaged and are not overwhelmed.





# Practice expectations and bottom lines

## Early help practice expectations and bottom lines

| Signs of Safety principles                         | Knowsley values  | Early help practice expectations  |
|--|--|---|
| Working relationships are at the heart of practice | <ul style="list-style-type: none"><li>- Child centred</li><li>- Family led</li></ul> | <p><b>General</b></p> <ul style="list-style-type: none"><li>• We will always be respectful to children and their families.</li><li>• On our first visit to a family, we will give the family our Early Help leaflet so they understand more about the service and what we do to help and support them.</li><li>• We will ask questions (appreciative inquiry) to clarify what we are worried about, what is working well and what needs to happen next.</li><li>• On our first visit with the child, we will use a direct work tool (e.g. three houses) to talk to the child about what they are worried about, what they think is going well and what they would like to be different.</li><li>• On our first visit with the family, we will complete a genogram with them and talk to them about friends and family members that are supportive and could be part of their support network, as well as any difficult relationships.</li><li>• We will support the family to identify safety people who will be part of their support network.</li><li>• We will help the family and their support network to come up with a plan that shows everyone that the child is safe and their needs are being met.</li><li>• We will review this plan on a regular basis.</li></ul> |



| Signs of Safety principles         | Knowsley values  | Early help practice expectations  |
|------------------------------------|--|---|
|                                    |  | <ul style="list-style-type: none"><li>• We won't continually repeat the three houses work with children. We will use different tools to support the children and their families to share their views and develop support plans that move them closer to their wellbeing goals.</li><li>• We will support parents to create a words and pictures explanation for their children to help them understand what the adults are worried about and what everyone is doing to help sort out the worries.</li></ul> <p><b>Support network meetings</b></p> <ul style="list-style-type: none"><li>• We will support the family to identify their safety people, using tools to help if necessary.</li><li>• We will support the family to arrange a support network meeting as early as possible.</li><li>• At the support network meeting, we will share our draft worry statements and wellbeing goals and give the family and their network time to refine them and all agree them.</li><li>• At the support network meeting, we will all scale the situation from 0-10 for each worry statement / wellbeing goal.</li><li>• We will make sure that we have as few bottom lines as possible and will share them with the family.</li><li>• We will help the family and their support network to come up with a wellbeing plan that addresses each worry statement and will show everyone that the child's needs are being met.</li><li>• We will ask questions (appreciative inquiry) to help the family and the support network test out their wellbeing plan.</li><li>• Everyone in the family and support network will get a clear and understandable copy of the plan that they have developed; including the children.</li></ul> |
| Adopt a stance of critical inquiry | <ul style="list-style-type: none"><li>- Evidence based</li><li>- Risk sensible</li></ul> | <ul style="list-style-type: none"><li>• We will triangulate all the information that people are telling us; children, family and support networks and professionals, in addition to what we are observing in the family life.</li><li>• In meetings we will scale on a scale of 0-10 the family's situation to enable us to measure progress and look at the impact of the plan on the children's wellbeing.</li></ul>  |

| Signs of Safety principles  | Knowsley values  | Early help practice expectations   |
|---|--|--|
| Land grand aspirations in everyday practice   | <ul style="list-style-type: none"><li>- Solution focused</li><li>- Intentional</li></ul> | <ul style="list-style-type: none"><li>• We will prepare for each session with the child or family member; being clear in our own mind the purpose of the session.</li><li>• We will prepare for meetings to make sure they are clear, concise and intentional; with an aim in mind.</li><li>• We will provide the family with a trajectory of when we would aim to end the work with them; giving them hope for sustainable change in a realistic time.</li><li>• We won't move the goal posts if things go wrong but we will support the family to change their wellbeing plan to help them reach their wellbeing goal.</li></ul> |
| <p><b>Early help bottom lines</b></p> <ul style="list-style-type: none"><li>• All assessments will include the seven stages of analysis (past harm, future danger, complicating factors, existing strengths, existing safety, safety goals and next steps). These will be clear, solution focused and realistic.</li><li>• Words and picture explanations will be created with every family to help the children understand the worries and what the adults are doing to sort the worries out.</li><li>• Support Network Meetings will be held with every family and we will use scaling questions to measure progress.</li><li>• Family Support Meetings will be held at regular intervals with each family and the appropriate professionals; brief case mapping will be done and scaling questions will be used to measure progress.</li><li>• A case mapping will take place for all families that are being considered for transfer to Children's Social Care.</li></ul> |  |  |



MASH practice expectations and bottom lines

| Signs of Safety principles                         | Knowsley values  | MASH practice expectations  |
|--|--|---|
| Working relationships are at the heart of practice | <ul style="list-style-type: none"><li>- Child centred</li><li>- Family led</li></ul>     | <ul style="list-style-type: none"><li>• When we receive a referral, we will look at the information received and the history to help us see what life is like for the child.</li><li>• We understand that the family may be shocked or upset when we phone them. We are respectful to them and check they are able to talk freely when we call.</li><li>• We won't leave voicemails on a Friday which parents will be left to worry about over the weekend.</li><li>• We will discuss the referral concerns with the family, try to understand their views on the concerns (acknowledging we may not be getting the "best version" of the parent / carer on this phone call) and record their response accurately and fairly.</li><li>• Unless it would place the child at risk of harm, we will always seek consent before speaking to other professionals.</li><li>• If we override consent, we will consider the impact of this on the child and family and record why we have chosen to override consent.</li><li>• When a decision is made regarding the referral, we will always explain this decision to the family. If the decision is to progress to an assessment in Early Help or Children's Social Care, we will explain to families how we work with them and their support network to resolve the issues. We will encourage the family to start thinking about who their safety people are.</li></ul> |
| Adopt a stance of critical inquiry                 | <ul style="list-style-type: none"><li>- Evidence based</li><li>- Risk sensible</li></ul> | <ul style="list-style-type: none"><li>• We will also check the basic family details (name, dob, address) to make sure they are correct and ask for previous addresses if we don't already have them.</li><li>• We will map the referral information into what's working well and what we are worried about.</li><li>• When we talk to other professionals, we will ask questions (appreciative inquiry) that will help us clarify the specific concerns or behaviours that we are worried about. We will endeavour to speak to the professionals that know the child and family the best.</li><li>• We will make sure we know what information is fact and what is opinion and we will record these accurately.</li></ul>   |

| Signs of Safety principles  | Knowsley values  | MASH practice expectations   |
|---|--|--|
|   |  | <ul style="list-style-type: none"><li>• We will ask questions to find out what existing strengths and safety are already in place in the family.</li><li>• When a decision is made regarding the referral, we will always explain this decision to the referrer (if a professional).</li></ul> |
| Land grand aspirations in everyday practice   | <ul style="list-style-type: none"><li>- Solution focused</li><li>- Intentional</li></ul> | <ul style="list-style-type: none"><li>• Before making contact with a parent / carer or a professional, we prepare for the phone call by thinking through what information we need to get.</li></ul>  |
| <div>MASH bottom lines<ul style="list-style-type: none"><li>• We will use the harm matrix and appreciative inquiry (questions) when talking to the referrer to help us understand past and current harm.</li><li>• We will intentionally ask questions of referrer and family to help us understand existing strengths and safety in the family.</li><li>• All referral outcomes will consider the seven stages of analysis (past harm, future danger, complicating factors, existing strengths, existing safety, safety goals and next steps). These will be clear, solution focused and realistic.</li><li>• We will always feedback the outcome of the referral to the family and the referrer (if a professional).</li><li>• If the outcome is to progress to assessment (Early Help or Children's Social Care), we will always explain to families how we work with them and their support network to resolve the issues. We will also encourage the family to start thinking about who their safety people are in preparation for the practitioner's first visit.</li></ul></div> |  |  |



CIN / CP practice expectations and bottom lines

| Signs of Safety principles                         | Knowsley values  | CIN / CP practice expectations  |
|--|--|---|
| Working relationships are at the heart of practice | <ul style="list-style-type: none"><li>- Child centred</li><li>- Family led</li></ul> | <p><b>General</b></p> <ul style="list-style-type: none"><li>• We will always be respectful to children and their families.</li><li>• On our first visit to a family, we will give the family our assessment leaflet so they understand more about the service and what we do to help and support them.</li><li>• We will ask questions (appreciative inquiry) to clarify what we are worried about, what is working well and what needs to happen next.</li><li>• On our first visit with the child, we will use a direct work tool (eg, the three houses) to talk to the child about what they are worried about, what they think is going well and what they would like to be different. We will use this work to understand the child's lived experience and communicate this to the parents.</li><li>• When children are too young to complete direct work, we will observe them; how they look, behave and interact with others to help us understand their lived experience.</li><li>• On our first visit with the family, we will complete a genogram with them and talk to them about friends and family members that are supportive and could be part of their support network, as well as any difficult relationships.</li><li>• We will support the family to identify safety people who will be part of their support network. We will persist with this in a sensitive manner, using various tools if the family are reluctant, or struggle to identify a support network.</li><li>• We will help the family and their support network to come up with a plan that shows everyone that the child is safe and their needs are being met.</li><li>• We will review this plan on a regular basis.</li><li>• We won't continually repeat the three houses work with children. We will use different tools to support the children and their families to share their views and develop support plans that move them closer to their safety goals.</li></ul> |

| Signs of Safety principles | Knowsley values | CIN / CP practice expectations  |
|----------------------------|-----------------|---|
|                            |                 | <ul style="list-style-type: none"><li>• We will support parents to create a words and pictures explanation for their children to help them understand what the adults are worried about and what everyone is doing to help sort out the worries.</li></ul> <p><b>Support network meetings</b></p> <ul style="list-style-type: none"><li>• At the support network meeting, we will share our draft danger statements and safety goals and give the family and their network time to refine them and all agree them.</li><li>• At the support network meeting, we will all scale the situation from 0-10 for each danger statement / safety goal.</li><li>• We will make sure that we have as few bottom lines as possible and will share them with the family.</li><li>• We will help the family and their support network to come up with a safety plan that addresses each danger statement and will show everyone that the child is safe.</li><li>• We will ask questions (appreciative inquiry) to help the family and the support network test out their safety plan.</li><li>• Everyone in the family and support network will get a clear and understandable copy of the plan that they have developed; including the children.</li></ul> <p><b>Rapid support network meetings</b></p> <ul style="list-style-type: none"><li>• If there is an immediate concern for a child's safety, a strategy meeting will be held. Following the strategy meeting, the social worker and their manager will do their very best to convene a rapid support network meeting that day. The purpose of this meeting will be to devise a safety plan with the family and support network that will keep the child safe for a set number of days.</li><li>• Another team member will support the social worker by identifying a foster placement. This will only be used as a last resort, should the safety network be unable to come up with a realistic safety plan.</li></ul> |



| Signs of Safety principles                  | Knowsley values  | CIN / CP practice expectations   |
|---|--|--|
| Adopt a stance of critical inquiry          | <ul style="list-style-type: none"><li>- Evidence based</li><li>- Risk sensible</li></ul> | <ul style="list-style-type: none"><li>• In order to understand the child's lived experience and the impact of circumstances on the child, we will read the file and create / update a chronology before we meet with the family.</li><li>• We will triangulate all the information that people are telling us; children, family and support networks and professionals, in addition to what we are observing in the family life.</li><li>• We will support other professionals to articulate and clarify any worries they have. We will ask them questions to establish what they are worried about, how long they have been worried, what they have observed to cause them to worry etc.</li><li>• We will not only ask about worries, we will ask children, families and professionals questions to establish what is going well, what the family are doing to keep the child safe, even when things are difficult.</li><li>• We will always map the information we have gathered into the seven analysis domains. As well as in assessments, these domains will also be used in strategy meetings and legal planning meetings.</li><li>• We will use research to inform our analysis and provide evidence for how worried we should be.</li><li>• We will create a danger statement for each concern we have. The danger statement will be clear and concise; making it really obvious to the family what we are worried about and why we are involved.</li><li>• Every danger statement will have a linked safety goal. These will also be clear and concise. They will show the family what practitioners need to see to return the children home / end the work with them. Families will be clear about what they need to do to reach this goal.</li><li>• In meetings, we will scale on a scale of 0-10 the family's situation to enable us to measure progress and look at the impact of the plan on the children's safety.</li><li>• Danger statements will be reviewed as the case progresses.</li></ul> |
| Land grand aspirations in everyday practice | <ul style="list-style-type: none"><li>- Solution focused</li><li>- Intentional</li></ul> | <ul style="list-style-type: none"><li>• We will prepare for each session with the child or family member; being clear in our own mind of the purpose of the session.</li><li>• We will prepare for meetings to make sure they are clear, concise and intentional; with an aim in mind.</li><li>• We will provide the family with a trajectory of when we aim to end the work with them; giving them hope for sustainable change in a realistic time.</li></ul>   |

| Signs of Safety principles  | Knowsley values | CIN / CP practice expectations   |
|---|-----------------|--|
|   |                 | <ul style="list-style-type: none"><li>• We won't move the goal posts if things go wrong but we will support the family to change their safety plan to help them reach their safety goal.</li></ul> |
| <div>CIN / CP bottom lines</div> <ul style="list-style-type: none"><li>• All assessments will include the seven stages of analysis (past harm, future danger, complicating factors, existing strengths, existing safety, safety goals and next steps). These will be clear, solution focused and realistic.</li><li>• Direct work will be done with every child and recorded clearly as part of the assessment.</li><li>• Words and picture explanations will be created with every family to help the children understand the worries and what the adults are doing to sort the worries out.</li><li>• Support network meetings will be held with every family and we will use scaling questions to measure progress.</li><li>• A case mapping will take place for all families that are being considered for step-down to Early Help.</li></ul> |                 |  |



# Preparing for a child protection conference practice expectations and bottom lines

| Signs of Safety principles                         | Knowsley values  | Preparing for a child protection conference practice expectations  |
|--|--|--|
| Working relationships are at the heart of practice | <ul style="list-style-type: none"><li>- Child centred</li><li>- Family led</li></ul>     | <ul style="list-style-type: none"><li>• The following will be completed prior to, and brought to the conference:<ul style="list-style-type: none"><li>• Genogram</li><li>• Mapping of the seven analysis domains</li><li>• Direct work with children</li><li>• Safety Plan - developed at a support network meeting</li></ul></li><li>• The social worker will explain to the child and family what a Child Protection Conference is, why one is happening and what will happen in the meeting.</li><li>• The Child Protection (CP) Chair will meet with the family prior to the conference to check their understanding and also gain their views.</li><li>• If the child attends the conference, the CP chair will meet with them before the conference to gain an understanding of their life experience and their wishes and feelings.</li><li>• Reports for conference will always be shared with the family on time; giving them time to read and understand the information that will be discussed.</li></ul> |
| Adopt a stance of critical inquiry                 | <ul style="list-style-type: none"><li>- Evidence based</li><li>- Risk sensible</li></ul> | <ul style="list-style-type: none"><li>• Before a conference takes place, the CP chair will have a consultation with the social worker to ensure danger statements, mapping and the safety plan have been completed and developed with the family.</li><li>• During this consultation, the CP chair discusses with the social worker the information that has been gathered and how it has been analysed (in the seven domains) to arrive at the judgement that a conference is needed.</li></ul>   |

| Signs of Safety principles  | Knowsley values  | Preparing for a child protection conference practice expectations   |
|---|--|---|
| Land and grand aspirations in everyday practice   | <ul style="list-style-type: none"><li>- Solution focused</li><li>- Intentional</li></ul> | <ul style="list-style-type: none"><li>• The CP chair will develop intentional questions for conference based on the information they have read and received through the social worker consultation.</li></ul> |
| <div>Preparing for a child protection conference bottom lines<ul style="list-style-type: none"><li>• A genogram will always have been completed with the family before conference.</li><li>• A support network meeting will always have taken place before a child protection conference and a safety plan will have been developed with the family and their safety people.</li><li>• Direct work will have always been completed with the child before conference. Their worries, wishes and feelings will have been analysed and shared with parents.</li><li>• Conference reports will be completed, authorised and shared with families on time.</li></ul></div> |  |   |





# Child protection conferences

## practice expectations and bottom lines

| Signs of Safety principles                         | Knowsley values  | Child protection conferences practice expectations  |
|--|--|---|
| Working relationships are at the heart of practice | <ul style="list-style-type: none"><li>- Child centred</li><li>- Family led</li></ul>     | <ul style="list-style-type: none"><li>• Families will be supported to attend conferences.</li><li>• Families will always be spoken to respectfully.</li><li>• CP chairs will ensure that the child's voice and lived experience is shared during conference; either through the child attending, a NYAS advocate or via their direct work being shared by the social worker.</li><li>• CP chairs will ask questions of the family that encourage them to show what they are already doing to keep their child safe.</li><li>• Parents will be invited to show their understanding of the worries that professionals have.</li><li>• The next steps will always include (if not already completed) a words and pictures version of the safety plan being developed for the children by the social worker and parents.</li></ul>  |
| Adopt a stance of critical inquiry                 | <ul style="list-style-type: none"><li>- Evidence based</li><li>- Risk sensible</li></ul> | <ul style="list-style-type: none"><li>• During the conference the case will be mapped; using the existing mapping that the social worker has completed.</li><li>• The social worker will always share the information in the seven analysis domains.</li><li>• The CP chair will always check the facts with the family and will support the family to provide evidence if they do not agree there is a problem.They will do this using a 'same but different' approach e.g. would you be worried if you were me? What can you do to show other people they don't need to be worried?</li><li>• The CP chair will use a questioning approach to gain concrete evidence of the impact on the child of certain events.This will test that the assessment and judgement is fair; proportionate and risk-sensible.</li><li>• The CP chair will use questions to explore the current safety plan for the child and to gauge people's confidence in how well the plan will keep the child safe from the dangers people are worried about.</li><li>• The CP chair will used scaling questions to understand the views of family and professionals.</li></ul> |

| Signs of Safety principles   | Knowsley values  | Child protection conferences practice expectations   |
|--|--|--|
| Land grand aspirations in everyday practice  | <ul style="list-style-type: none"><li>- Solution focused</li><li>- Intentional</li></ul> | <ul style="list-style-type: none"><li>• The conference will remain focussed throughout; using the danger statements and safety goals to inform the process.</li><li>• The time in the conference will be used to test out the safety plan.Are people confident it will work, especially at trigger times / stress points?</li><li>• The conference will focus on the safety goals and supporting the family to reach them.</li></ul> |
| Child protection conferences bottom lines <ul style="list-style-type: none"><li>• CP chairs will use scaling questions to understand everybody's views.</li><li>• The CP chair's summary report will use the seven domains to demonstrate what was agreed at the conference.</li><li>• A clear safety plan will be agreed and reviewed at every conference to help us understand how children are being kept safe.</li></ul> |  |  |



# Children with disabilities

## practice expectations and bottom lines

| Signs of Safety principles                         | Knowsley values  | Children with disabilities practice expectations   |
|--|--|--|
| Working relationships are at the heart of practice | <ul style="list-style-type: none"><li>- Child centred</li><li>- Family led</li></ul>     | <ul style="list-style-type: none"><li>• We will always be respectful to the family.</li><li>• When we first visit the family, we will always explain what our role is and what the family can expect from us.</li><li>• When possible, we will always complete direct work with the child.This may be the three houses, Picture Exchange Communication System (PECS), Makaton or something else.What we do will depend upon the age and ability of the child.</li><li>• When it is not possible to complete direct work with a child due to their age or disability, we will observe them in different settings (for example, at home and school) to gain an understanding of their lived experiences and their wishes and feelings.</li><li>• We will hold support network meetings to establish what support is available to the family; either to keep a child safe, enable them to stay at home or enable the family to have some respite from their high level caring responsibilities.</li><li>• If there are concerns about a child's safety, we will refer to and adhere to the CIN / CP practice guidelines and bottom lines.</li></ul> |
| Adopt a stance of critical inquiry                 | <ul style="list-style-type: none"><li>- Evidence based</li><li>- Risk sensible</li></ul> | <ul style="list-style-type: none"><li>• In order to understand the child's lived experience and the impact of circumstances on the child, we will read the file and create / update a chronology before we meet with the family.</li><li>• We will triangulate all the information that people are telling us; children, family, support networks and professionals, in addition to what we are observing in the family life.</li><li>• We will support other professionals to articulate and clarify any worries they have.We will ask them questions to establish what they are worried about, how long they have been worried, what they have observed to cause them to worry etc.</li></ul>  |

| Signs of Safety principles   | Knowsley values  | Children with disabilities practice expectations  |
|--|--|---|
|  |  | <ul style="list-style-type: none"><li>• We will not only ask about worries, we will ask children, families and professionals questions to establish what is going well, what the family are doing to continually meet the child's needs, even when things are difficult.</li><li>• We will always map the information we have gathered into the seven analysis domains.</li><li>• We will create a worry statement for each concern we have.The worry statement will be clear and concise so the family understand why we are involved (this may be as simple as “we are worried that without some respite the family will be exhausted” - this does not have to be a worry about the parent's behaviour).</li><li>• Every worry statement will have a linked wellbeing goal.These will also be clear and concise.They will show the family what the practitioners hope to achieve with a care package.</li><li>• In meetings we will scale on a scale of 0-10 the family's situation to enable us to measure progress / confidence in the care package and the impact of the care package on the children's wellbeing.</li><li>• Worry statements will be reviewed as the case progresses.</li></ul> |
| Land grand aspirations in everyday practice  | <ul style="list-style-type: none"><li>- Solution focused</li><li>- Intentional</li></ul> | <ul style="list-style-type: none"><li>• We prepare for each session with the child or family member; being clear in our own mind the purpose of the session.</li><li>• We prepare for meetings to make sure they are clear, concise and intentional; with an aim in mind.</li></ul>   |
| <div>Children with disabilities bottom lines</div> <ul style="list-style-type: none"><li>• All assessments will include the seven stages of analysis.</li><li>• Direct work will be done with every child and recorded clearly as part of the assessment. If this is not possible due to age or the child's disability, observations will be made, analysed and recorded.</li><li>• Support network meetings will be held with every family and we will use scaling questions to measure the impact of the care package.</li><li>• Every family will have danger / worry statements with linked safety / wellbeing goals and a plan as to how these goals will be reached.</li></ul> |  |   |



Edge of care practice expectations and bottom lines

| Signs of Safety principles                         | Knowsley values  | Edge of care practice expectations  |
|--|--|---|
| Working relationships are at the heart of practice | <div><div>- Child centred</div><div>- Family led</div></div>     | <div><div><div>• We will always be respectful to children and their families.</div><div>• On our first visit to a family, we will introduce ourselves and our service so they understand what we do and how we can help and support them.</div><div>• We will remember that the social worker will continue working with the family so won't overload the family with additional questions. However we will ask questions (appreciative inquiry) to clarify what we are worried about, what is working well and what needs to happen next.</div><div>• We will complete age-appropriate direct work with the children to establish what they think is working well, what they are worried about and what they would like to see happen next.</div><div>• When children are too young to complete direct work, we will observe them; how they look, behave and interact with others to help us understand their lived experience.</div><div>• We will support the social worker in adding to the genogram by having relevant conversations with the family about their wider family and support network.</div><div>• We will support the family to continue to identify safety people who will be part of their support network.</div><div>• We will help the social worker to support the family and their support network to come up with a plan that shows everyone that the child is safe and their needs are being met.</div></div></div> |
| Adopt a stance of critical inquiry                 | <div><div>- Evidence based</div><div>- Risk sensible</div></div> | <div><div><div>• In order to understand the child's lived experience and the impact of circumstances on the child, we will read the file and create / update a chronology before we meet with the family.</div><div>• We will support the social worker to triangulate all the information that people are telling them; children, family and support networks and professionals, in addition to what we are observing in the family life.</div><div>• We will not only ask about worries, we will ask children, families and professionals questions to establish what is going well, what the family are doing to keep the child safe, even when things are difficult.</div></div></div>  |

| Signs of Safety principles  | Knowsley values  | Edge of care practice expectations  |
|---|--|---|
|   |  | <div><div>• When asked in meetings, we will scale on a scale of 0-10 the family's situation to enable us to measure progress and look at the impact of the plan on the children's safety.</div></div>   |
| Land grand aspirations in everyday practice   | <div><div>- Solution focused</div><div>- Intentional</div></div> | <div><div><div>• We will prepare for each session with the child or family member; being clear in our own mind of the purpose of the session.</div><div>• We will prepare for meetings to make sure they are clear, concise and intentional; with an aim in mind.</div><div>• In conjunction with the social worker, we will provide the family with a trajectory of when we aim to end the work with them; giving them hope for sustainable change in a realistic time.</div><div>• We won't move the goal posts if things go wrong but we will support the family to change their safety plan to help them reach their safety goal.</div></div></div> |
| <div><div>Edge of care bottom lines</div><div><div>• We will never give up on anyone; parent or child.</div><div>• We will work hard to support families to stay together.</div><div>• We will be honest with families about what we need to see change to confirm positive progress to social workers.</div></div></div> |  |   |



# Pre-proceedings practice expectations and bottom lines

| Signs of Safety principles   | Knowsley values  | Pre-proceedings practice expectations   |
|--|--|---|
| Working relationships are at the heart of practice   | <ul style="list-style-type: none"><li>- Child centred</li><li>- Family led</li></ul>     | <ul style="list-style-type: none"><li>• We will always be respectful to children and their families.</li><li>• We will ensure families know about pre-proceedings and why they are used before we use them.</li><li>• We will use clear, jargon-free language with families so they know why we are going into pre-proceedings.</li><li>• Danger statements, safety goals, safety plans and scaling questions will be used with families to help them understand the worries and what needs to change to prevent the matter going to court.</li><li>• Families will be given a clear trajectory of what they are expected to do, and when they are expected to do it by, to prevent the matter going to court.</li><li>• We will ensure families have enough time to find a solicitor before a pre-proceedings meeting.</li></ul> |
| Adopt a stance of critical inquiry   | <ul style="list-style-type: none"><li>- Evidence based</li><li>- Risk sensible</li></ul> | <ul style="list-style-type: none"><li>• Pre-proceedings letters will be clear and concise, making the worries obvious to families and their solicitor so they are able to get the best legal advice.</li><li>• Pre-proceedings meetings and plans will be timely and realistic; giving families as much opportunity to make the changes necessary to keep their children safe and at home.</li></ul>  |
| Land grand aspirations in everyday practice  | <ul style="list-style-type: none"><li>- Solution focused</li><li>- Intentional</li></ul> | <ul style="list-style-type: none"><li>• We will prepare for pre-proceedings meetings to make sure they are clear, concise and intentional; with an aim in mind.</li><li>• We won't move the goal posts if things go wrong but we will support the family to change their safety plan to help them reach their safety goal.</li></ul>  |
| <div>Pre-proceedings bottom lines</div> <ul style="list-style-type: none"><li>• We will give families time to find a solicitor and seek legal advice.</li><li>• We will use clear, jargon-free language.</li><li>• We will be honest with families about what we need to see change to end the pre-proceedings work.</li></ul> |  |   |





Children looked after practice expectations and bottom lines

| Signs of Safety principles                         | Knowsley values  | Children looked after practice expectations  |
|--|--|--|
| Working relationships are at the heart of practice | <ul style="list-style-type: none"><li>- Child centred</li><li>- Family led</li></ul> | <ul style="list-style-type: none"><li>• We will always be respectful to the family.</li><li>• We will work on the basis that children are best living with their families (if safe) and will therefore complete family finding work to ensure this happens if at all possible.</li><li>• We will spend time getting to know the children, gaining an understanding of what is going well for them, what they are worried about and their wishes and feelings.</li><li>• We won't repeatedly ask the children to complete the same pieces of direct work.We will be creative and complete things that each individual child will enjoy doing.</li><li>• We will read a family's history; taking care to understand the child's beliefs, values, religion, culture etc and how this impacts them on a day to day basis.</li><li>• When we tell a child we will do something; we will do it - when we say we will.</li><li>• We will always ask questions (appreciative inquiry) to help us understand what is going and what is not going well.</li><li>• We will be proactive in contacting the Home Office in matters of immigration status.</li><li>• Every child will have an up-to-date assessment (every 12 months minimum) which will include the seven analysis domains, danger / worry statements, safety / success goals and scaling questions.</li><li>• We will ensure that each child has a copy of their care plan in a way they can understand it.</li><li>• When the care plan is updated, the child will receive an updated copy.</li><li>• If there are worries about contact arrangements, we will have a support network meeting to enable the family to resolve the worries themselves.</li><li>• If there are worries about connected person's placements or placements with parents, a support network meeting will be held to enable to family to resolve the worries themselves.</li><li>• If the plan is for a child to return home, a support network meeting will be held to enable the safety people to develop a safety plan that will enable the child to return home.</li><li>• If there are worries about a child going missing from placement, a support network meeting will be held to enable the safety people to develop a safety plan to keep the child safe.</li></ul> |

| Signs of Safety principles         | Knowsley values  | Children looked after practice expectations   |
|------------------------------------|--|---|
|                                    |  | <ul style="list-style-type: none"><li>• Support network meetings will then be held regularly to review the safety people's plan.</li></ul> <p><b>Support network meetings</b></p> <ul style="list-style-type: none"><li>• At the support network meeting, we will share our draft danger / worry statements and safety / success goals and give the family and their network time to refine them and all agree them.</li><li>• At the support network meeting, we will all scale the situation from 0-10 for each danger / worry statement and safety / success goal.</li><li>• We will make sure that we have as few bottom lines as possible and will share them with the family.</li><li>• We will help the family and their support network to come up with a safety or success plan that addresses each danger / worry statement and will show everyone that the child is safe or the placement is successful.</li><li>• We will ask questions (appreciative inquiry) to help the family and the support network test out their safety / success plan.</li><li>• Everyone in the family and support network will get a clear and understandable copy of the plan that they have developed; including the children.</li></ul> |
| Adopt a stance of critical inquiry | <ul style="list-style-type: none"><li>- Evidence based</li><li>- Risk sensible</li></ul> | <ul style="list-style-type: none"><li>• When decisions are being made about a change in a child's placement or care plan, the social worker will map and analyse the information across the seven domains.</li><li>• We will triangulate all the information that people are telling us; children, family, support networks and professionals, in addition to what we are observing in the child's life.</li><li>• When writing court statements we will use the seven analysis domains.</li><li>• We will support other professionals to articulate and clarify any worries they have.We will ask them questions to establish what they are worried about, how long they have been worried, what they have observed to cause them to worry etc.</li></ul>  |



| Signs of Safety principles  | Knowsley values  | Children looked after practice expectations  |
|---|--|--|
| Land grand aspirations in everyday practice   | <ul style="list-style-type: none"><li>- Solution focused</li><li>- Intentional</li></ul> | <ul style="list-style-type: none"><li>• We will prepare for each session with the child or family member; being clear in our own mind of the purpose of the session.</li><li>• We will prepare for meetings to make sure they are clear, concise and intentional; with an aim in mind.</li><li>• We will have a clear trajectory of the direct work we will complete with the child and understand why we are doing it; linked to their care plan.</li><li>• We will use scaling questions with children to measure how they feel about their placement / care plan.</li><li>• When the care plan is for a child to return home, there will be a clear trajectory outlining what will happen, up until the point of the case closing.</li><li>• When the care plan is for a child to be looked after long-term, there will be a clear trajectory of support to take them into adulthood.</li></ul> |
| <div>Children looked after bottom lines</div> <ul style="list-style-type: none"><li>• We will always work on the basis that (as long as it is safe to do so) children are best living with their families.</li><li>• When children are subject to care proceedings, we will work with the family to create a words and picture explanation for the children.This will be filed with the social worker’s statement to court.</li><li>• A permanence plan will be agreed by the second looked after review.The child will understand the plan and it will be formally reviewed in the looked after reviews.</li><li>• If the plan is for the child to return home, the social worker will support the family and their safety people to develop a safety plan that will show how they will keep the child safe once they return home.</li><li>• If the plan is for the child to return home, there will always be a clear trajectory so everyone knows what will happen and when, until the point the case closes.</li><li>• All children will have a copy of their care plan in a way they can understand.</li><li>• IROs will check that family finding work is being undertaken to ensure that children can live with their family if at all possible.</li></ul> |  |  |

## Children looked after reviews practice expectations and bottom lines

| Signs of Safety principles  | Knowsley values  | Children looked after reviews practice expectations   |
|---|--|---|
| Working relationships are at the heart of   | <ul style="list-style-type: none"><li>- Child centred</li><li>- Family led</li></ul>     | <ul style="list-style-type: none"><li>• Social workers will always talk to the child about their review and go through their care plan with them.</li><li>• Social workers will always ask the child who they would like to attend their review, and encourage them to chair their own review.</li><li>• The IRO will always meet the child ahead of the review.</li><li>• Any family member that the child has contact with will be invited to have input into the review; either by attending the review or sharing their views with the social worker prior to the review.</li></ul> |
| Adopt a stance of critical inquiry  | <ul style="list-style-type: none"><li>- Evidence based</li><li>- Risk sensible</li></ul> | <ul style="list-style-type: none"><li>• The looked after review will consider how well everyone is working towards the safety / success goals.</li><li>• Scaling questions will be used in the review to measure progress and gain views.</li><li>• Changes to the care plan will be made based on information / observations by the carer, family, safety people, child and professionals. Changes will be carefully considered in line with the success goals.</li></ul>  |
| Land grand aspirations in everyday practice   | <ul style="list-style-type: none"><li>- Solution focused</li><li>- Intentional</li></ul> | <ul style="list-style-type: none"><li>• The IRO will plan the review carefully and use carefully thought out questions to explore the impact that the care plan is having on the child and if the plan is working to reach the safety / success goals.</li></ul>  |
| <div>Children looked after reviews bottom lines</div> <ul style="list-style-type: none"><li>• The looked after review is the child’s meeting.The child is the most important person at the meeting and hearing them is very important.</li><li>• The pre-meeting report for the review is written for the child and in a way they can understand.</li></ul> |  |   |



# Residential services practice expectations and bottom lines

| Signs of Safety principles                         | Knowsley values  | Residential services practice expectations  |
|--|--|---|
| Working relationships are at the heart of practice | <ul style="list-style-type: none"><li>- Child centred</li><li>- Family led</li></ul>     | <ul style="list-style-type: none"><li>• We will always be respectful to the children and their family.</li><li>• We will work on the basis that children are best living with their families (if safe) and will therefore work with the family and professionals to support the child to return home.</li><li>• We will spend time getting to know the children, gaining an understanding of what is going well for them, what they are worried about and their wishes and feelings.</li><li>• We won't repeatedly ask the children to complete the same pieces of direct work.We will be creative and complete things that each individual child will enjoy doing.</li><li>• We will read a family's history; taking care to understand the child's beliefs, values, religion, culture etc and how this impacts them on a day to day basis.</li><li>• When we tell a child we will do something; we will do it - when we say we will.</li><li>• We will always ask questions (appreciative inquiry) to help us understand what is going well and what is not going well.</li><li>• We will ensure that each child has a copy of their care plan in a way they can understand it.When the care plan is update, this will also be updated.</li><li>• If there are worries about contact arrangements, we will support the social worker to have a support network meeting to enable the family to resolve the worries themselves.</li><li>• If there are worries about a child going missing from placement, we will support the social worker to hold a support network meeting will be held to enable the safety people to develop a safety plan to keep the child safe.</li></ul> |
| Adopt a stance of critical inquiry                 | <ul style="list-style-type: none"><li>- Evidence based</li><li>- Risk sensible</li></ul> | <ul style="list-style-type: none"><li>• We will triangulate all the information that people are telling us; children, family, support networks and professionals.We will use this information to support the child to be settled and safe in placement.</li></ul>   |

| Signs of Safety principles  | Knowsley values  | Residential services practice expectations  |
|---|--|---|
| Land grand aspirations in everyday practice   | <ul style="list-style-type: none"><li>- Solution focused</li><li>- Intentional</li></ul> | <ul style="list-style-type: none"><li>• We will prepare for each session with the child or family member; being clear in our own mind the purpose of the session.</li><li>• We will have a clear trajectory of the direct work we will complete with the child and understand why we are doing it.This will be linked to their care plan.</li><li>• We will use scaling questions with children to measure how they feel about their placement / care plan.</li></ul> |
| <div>Residential services bottom lines</div> <ul style="list-style-type: none"><li>• We always work on the basis that (as long as it is safe to do so) children are best living with their families.</li><li>• If the plan is for the child to return home, we will support the social worker to support the family and their safety people to develop a safety plan that will show how they will keep the child safe once they return home.</li><li>• All children will have a copy of their care plan in a way they can understand.</li></ul> |  |   |



# Young person’s team practice expectations and bottom lines

| Signs of Safety principles                         | Knowsley values  | Young Person’s team practice expectations  |
|--|--|--|
| Working relationships are at the heart of practice | <ul style="list-style-type: none"><li>- Child centred</li><li>- Family led</li></ul>     | <ul style="list-style-type: none"><li>• From the age of 14 years old young people will be transferred to the Young Person’s team (see case transfer expectations and bottom lines for more about this).</li><li>• Social workers will also read the CLA practice expectations and bottom lines guidance.</li><li>• Social workers will talk to young people and their carers about developing independence skills. They will be encouraged to start helping with shopping, cooking, managing money, using the washing machine, cleaning their bedroom, etc.</li><li>• Between the ages of 14 and 16, social workers will talk to young people about their aspirations for the future in terms of education, employment and housing. Social workers will then talk to teenagers about what needs to happen to enable them to achieve these goals.This is then incorporated into their care plan and pathway plan.</li><li>• Social workers will help young people identify their safety people and their own support network.</li><li>• When the pathway plan is completed, it will be written in the young person’s own words.</li></ul> |
| Adopt a stance of critical inquiry                 | <ul style="list-style-type: none"><li>- Evidence based</li><li>- Risk sensible</li></ul> | <ul style="list-style-type: none"><li>• Pathway plans will be individualised and specific to each young person.They will be based on their individual needs, strengths, areas for development and aspirations.</li><li>• Social workers will have high aspirations for their young people and will do everything possible to support them during this transition time.</li><li>• Social workers will talk to young people about other ideas they have (contingency plans) in case they don’t quite manage to achieve all of their plans.</li></ul>   |
| Land grand aspirations in everyday practice        | <ul style="list-style-type: none"><li>- Solution focused</li><li>- Intentional</li></ul> | <ul style="list-style-type: none"><li>• Social workers will plan every session with the young people.They will have a purpose to meeting with them and an aim in mind as to what they want to achieve. Social worker’s won’t waste young people’s time.</li><li>• Social workers will use scaling questions to help the young person identify areas of independence that they feel confident in and areas they will need help in.</li></ul>  |

| Signs of Safety principles   | Knowsley values | Young Person’s team practice expectations  |
|--|-----------------|--|
|  |                 | <ul style="list-style-type: none"><li>• Social workers will ask questions (appreciative inquiry) to support the young person to develop their own pathway plan.</li><li>• Social workers will develop a trajectory of what will happen during this transition period so young people feel confident and supported and are able to develop into independent young adults.</li></ul> |
| <div>Young Person’s team bottom lines</div> <ul style="list-style-type: none"><li>• Young people will take the lead in developing their Pathway Plan and it is written in their own words.</li><li>• We will never give up on a young person.</li><li>• We will always make sure that young people are safe and will use safeguarding procedures to keep them safe when necessary.</li></ul> |                 |  |



Leaving care practice expectations and bottom lines

| Signs of Safety principles                         | Knowsley values  | Leaving care practice expectations  |
|--|--|---|
| Working relationships are at the heart of practice | <div><div>- Child centred</div><div>- Family led</div></div> | <div><div><div><div><div><div></div><div>Personal Advisors (PAs) will read the young person's history so they have a good understanding of their life experience before they meet them (see case transfer expectations and bottom lines for more about this).</div></div></div><div><div><div></div><div>When PAs read a family's history they will take care to understand the child's beliefs, values, religion, culture etc and how this impacts them on a day to day basis.</div></div></div><div><div><div></div><div>PAs will respect every young person and their family.</div></div></div><div><div><div></div><div>PAs will see the young person on a regular basis and keep in touch regularly in between visits.</div></div></div><div><div><div></div><div>PAs will be pro-active in contacting the Home Office in matters of immigration status.</div></div></div><div><div><div></div><div>PAs will support the young person to link into community groups which will build their support networks.This will include linking young people up with other care leavers who have had good experiences and positive journeys.</div></div></div><div><div><div></div><div>If young people are reluctant to accept support, PAs will continue to offer support and will be creative in how they offer support and build up relationships.</div></div></div><div><div><div></div><div>If there are worries about a young person, with the young person's consent, PAs will work hard to engage the young person's safety people in a support network meeting.</div></div></div><div><div><div></div><div>PAs will create danger / worry statements and linked safety / success goals with scaling questions to support the young person in reaching their goals.These will be clear and simple so that the young person can understand them.</div></div></div></div></div><div><div><div><div><div></div><div>Support Network Meetings</div></div></div><div><div><div></div><div>At the support network meeting, PAs will share draft danger / worry statements and safety / success goals and ask members of the support network to scale the situation.</div></div></div><div><div><div></div><div>The support network will be supported to develop a plan to address each of the danger / worry statements.</div></div></div><div><div><div></div><div>The PA will ask questions (appreciative inquiry) to help test out the safety / success plan.</div></div></div><div><div><div></div><div>Each member of the support network will have a copy of the safety / success plan.</div></div></div></div></div></div> |

| Signs of Safety principles  | Knowsley values  | Leaving care practice expectations  |
|---|--|---|
|   |  | <div><div><div></div><div>The safety / success plan will be incorporated into the overall plan for the young person.</div></div></div>  |
| Adopt a stance of critical inquiry  | <div><div>- Evidence based</div><div>- Risk sensible</div></div> | <div><div><div><div><div></div><div>PAs will always ask questions that will help them understand what is going well for a young person.</div></div></div><div><div><div></div><div>If there are worries about a young person, PAs will map the information into the seven analysis domains.They will talk this through with the young person.</div></div></div><div><div><div></div><div>PAs will create danger / worry statements and linked safety / success goals with scaling questions to support the young person in reaching their goals.These will be clear and simple so that the young person can understand them.</div></div></div><div><div><div></div><div>If there are worries about a young person, PAs will consider making a referral to adult safeguarding teams; the danger / worry statements would be used to support the PA to explain the reasons why to the young person.</div></div></div></div></div> |
| Land grand aspirations in everyday practice   | <div><div>- Solution focused</div><div>- Intentional</div></div> | <div><div><div><div><div></div><div>PAs will help young people to identify their own plans, goals, and aspirations as they complete their pathway plan with them.</div></div></div><div><div><div></div><div>PAs will help young people to create a clear trajectory for achieving their goals.</div></div></div><div><div><div></div><div>PAs will use scaling questions to support young people to measure their progress towards their goals.</div></div></div><div><div><div></div><div>PAs will ensure that pathway plans are written in the young person's own words and make sense to the young person.</div></div></div><div><div><div></div><div>Before each session with a young person the PA will plan and prepare the purpose of the meeting that the time is useful and not a waste of time for the young person.</div></div></div></div></div>   |
| <div><div><div><div><div></div><div>Leaving care bottom lines</div></div></div><div><div><div></div><div>We will never give up on a young person.</div></div></div><div><div><div></div><div>If a young person loses their accommodation, we will work with them, housing and the young person's support network to come up with a solution.</div></div></div><div><div><div></div><div>If there are worries about a young person we will always support the young person to attend a support network meeting with their safety people to develop a safety / success plan together.</div></div></div></div></div> |  |   |



# Transfer of cases practice expectations and bottom lines

| Signs of Safety principles  | Knowsley values   | Transfer of cases practice expectations  |
|---|---|--|
| Working relationships are at the heart of practice  | <ul style="list-style-type: none"> <li>- Child centred</li> <li>- Family led</li> </ul>     | <ul style="list-style-type: none"> <li>• When we are transferring a family over to another worker or team, we will always explain to the child and family why this is happening.</li> <li>• We will always introduce the new worker to the child and family.</li> <li>• We will talk through the danger statements, safety goals and safety plan with the new worker and the family present so that everyone has a shared understanding of what has been achieved and what is still to be achieved.</li> </ul> |
| Adopt a stance of critical inquiry  | <ul style="list-style-type: none"> <li>- Evidence based</li> <li>- Risk sensible</li> </ul> | <ul style="list-style-type: none"> <li>• The danger statements, safety goals, safety plan and trajectory will be shared at the transfer meeting.</li> <li>• Prior to meeting the family, the new worker will read through the file and clarify any uncertainty with the current worker.</li> </ul>   |
| Land grand aspirations in everyday practice   | <ul style="list-style-type: none"> <li>- Solution focused</li> <li>- Intentional</li> </ul> | <ul style="list-style-type: none"> <li>• Prior to meeting the family, the current and the new worker will meet to plan the introductory visit.</li> <li>• The new worker will ensure that they are clear about the safety goal, the trajectory and the how the safety plan aims to achieve the goal in the agreed timeframe.</li> </ul>  |
| <div> <div>Transfer of cases bottom lines</div> <ul style="list-style-type: none"> <li>• When families transfer between workers, teams or services there will always be a safety plan that has been developed with the family and their safety people.</li> <li>• When families transfer between workers, teams or services there will always be a clear record of the seven analysis domains, a record of what has been achieved, a record of what is still to be achieved and a trajectory of when it is hoped this will happen by.</li> </ul> </div> |   |  |





# Fostering / SGO, Connected Persons and Family and Friends team practice expectations and bottom lines

| Signs of Safety principles                         | Knowsley values  | Fostering / SGO, Connected Persons and Family and Friends team practice expectations   |
|--|--|--|
| Working relationships are at the heart of practice | <ul style="list-style-type: none"><li>- Child centred</li><li>- Family led</li></ul> | <p><b>Assessments</b></p> <ul style="list-style-type: none"><li>• Our fostering assessments will be clear, jargon-free and honest.</li><li>• When we have worries about a prospective foster carer / special guardian, we will be honest about this and be clear about what needs to change to enable people to be approved as carers.This will give people as much time and opportunity as possible to make the necessary changes.</li><li>• When worries (or vulnerabilities) arise about a potential special guardian during an assessment, we will arrange a support network meeting to support the network to develop a plan to address the worries and enable the assessment to continue.</li><li>• When we have worries about a potential special guardian we will create danger statements, safety goals and scaling questions.These will be shared with the potential special guardians and their network in the support network meeting.We will invite the network to scale and this will support them to develop a plan.</li></ul> <p><b>Support and supervision</b></p> <ul style="list-style-type: none"><li>• We will provide a welcome book to the child's social worker to give to the child.This will provide information, mainly in picture form about the carers and their home.</li><li>• In all planned moves, we will support the social worker and foster carer to arrange an introductory visit for the child before they move.</li><li>• We will visit carers on a monthly basis.</li><li>• If there are difficulties that may impact on a placement's stability, a placement stability meeting will be arranged as soon as possible to prevent the difficulties from escalating.</li><li>• Placement stability meetings will always involve the child and wider birth family, where possible.</li><li>• Foster carer's birth children are appreciated through an annual event and have regular group activities to talk about fostering and how it affects them.</li></ul> |

| Signs of Safety principles                  | Knowsley values  | Fostering / SGO, Connected Persons and Family and Friends team practice expectations  |
|---|--|---|
|   |  | <ul style="list-style-type: none"><li>• Birth children will have the opportunity to participate in the development of forms such as the annual review feedback form.</li><li>• The team will hold an annual appreciation event for foster carers and will provide regular coffee mornings.</li><li>• Foster carers will be spoken to as part of collaborative audits.</li></ul>   |
| Adopt a stance of critical inquiry          | <ul style="list-style-type: none"><li>- Evidence based</li><li>- Risk sensible</li></ul> | <p><b>Assessments</b></p> <ul style="list-style-type: none"><li>• During every assessment, we will explore how applicants have parented their own children.</li><li>• We will always observe potential special guardians with the children when completing SGO assessments.</li><li>• We will always observe potential foster carers with each other and other applicants in the training sessions to inform their assessment.</li><li>• We will always obtain references for potential foster cares and special guardians.</li></ul> <p><b>Support and supervision</b></p> <ul style="list-style-type: none"><li>• All foster carers will have a chronology on their file.This will include allegations, placement breakdowns, significant events and changes of approval.The chronology will help practitioners notice any patterns.</li><li>• During placement stability meetings, information will be mapped and analysed using the seven domains.</li><li>• When a child is placed in a new placement, we will develop a 'safe care' plan with the child's social worker, foster carer and the child.This will ensure any potential safety concerns are addressed and managed on day to day basis.</li><li>• The 'safe care' plan will be updated at any placement stability meetings.</li></ul> |
| Land grand aspirations in everyday practice | <ul style="list-style-type: none"><li>- Solution focused</li><li>- Intentional</li></ul> | <p><b>Assessment</b></p> <ul style="list-style-type: none"><li>• Before we meet with a potential foster carer / special guardian we will prepare the session, thinking carefully about the questions we will ask as part of the assessment.</li></ul>   |



| Signs of Safety principles   | Knowsley values | Fostering / SGO, Connected Persons and Family and Friends team practice expectations   |
|--|-----------------|--|
|  |                 | <ul style="list-style-type: none"><li>• As part of the assessment we will explore and draw out strengths of the applicants and these will be included in the assessment.</li><li>• We will always explore how potential carers have used strengths and resources to manage difficult situations in the past.</li><li>• We will provide all applicants with a clear trajectory from first visit to panel so applicants are clear about the process and the timeline.</li><li>• During foster carer training, we will check in with group regularly; give applicants opportunities to ask questions and we will seek meaningful feedback at the end of the course.</li><li>• We will reflect on the feedback given and make amendments to training as appropriate.</li></ul> <p><b>Support and supervision</b><br/>Before any visit is completed, we will prepare and ensure we are clear of the purpose of the visit; is it for support, supervision, to discuss a specific issue, to run through the safe care plan?</p> <p>We will use scaling questions with foster carers to scale stability / specific issues. We will ask questions (appreciative inquiry) to establish what is working well and what we are worried about.</p> |
| <p>Fostering / SGO team bottom lines</p> <ul style="list-style-type: none"><li>• We will always use the seven analysis domains in the assessments with potential foster carers and special guardians.</li><li>• Special guardian support plans will be developed using the principles of safety planning.</li><li>• We will hold support network meetings when foster carers / special guardians are struggling and need additional support.</li></ul> |                 |  |





