



Case Management

Legislation

- **The Children’s Homes (England) Regulations 2015**
- **Health and Social Care Act 2008, section 20 Regulations**
- **The Civil Contingencies Act 2004**
- **Children’s Act 1989, 2004**
- **Data Protection Act 2018**
- **Leaving Care Act 2002, 2010**
- **The Care Leavers (England) Regulations 2010**
- **Care Planning Act 2010, 2013**

Practice Evidence

Inspection Body	Outcome/ Regulation	Evidence
Ofsted	14, 19, 20, 38, 39, 40, 43, schedule 3 and 4	Admissions and Discharge Record, Case Files, secure storage, Service Level Agreement, Host Authority Updates, Clearcare online recording system, Behavioral Management Plans
CQC	6, 21	Case Files, Lead Agency Forms, Organisation Risk Assessment, Clearcare online recording system, Behavioral Management Plans

Reference

2.1- Referrals and Placements

2.2- Arrival

2.3- Care and Placement Plan Guidance

2.4- Placement Planning Meetings

2.5- Looked After Reviews

2.6- Preparing for leaving

2.7- Advocacy and Independent Visitors

2.8- Case Recording Policy and Staff Guidance

2.1 Referrals and Placements

Admission's Criteria

The criteria for admission includes:

- The placement is offered on a voluntary basis
- That the young person agrees to participate in the life of the Community and undertake a therapeutic programme
- Any referral where there is a history or conviction for arson has to be agreed by both the board of trustees and our insurers
- Issues relating to the abduction of a child are viewed as very serious and may preclude a young person from joining the community
- Can they be contained in an open unit, and risks to self and other are of a manageable nature

The admission process, from initial enquiry to the young person becoming a member of the Community, follows a procedure which allows for:

- An initial referral including an application form and relevant assessments, reviews or reports
- The young person is visited by members of the Glebe House Intake and Assessment Team
- Following this visit a case discussion is held by the Intake and Assessment Team
- The preferred practice would include the young person visiting the Glebe House community over lunch. This would include a resident led tour and meeting community members informally.
- If the young person is considered to be both containable and treatable they are invited to join the community for an assessment at the end of which a statutory placement review is held
- If the assessment concludes that the young person would benefit from a therapeutic placement, a place is offered for a minimum of two years. Most placements are completed between two and three years.
- The young person, their professionals and Glebe House all have to be in agreement with the placement in order for admission and sign contracts at the End of Assessment Meeting.

Planned Placements

Definition of Planned Placement

A Planned Placement is the placement of a child with the agreement of the [Placing Authority](#) and [Designated Manager \(Admissions\)](#).

Referral Process and Placement Planning

The decision about suitability of placement will be made by the [Designated Manager \(Admissions\)](#) in consultation with the Placing Authority. Before making such a decision, a Referral Form must be completed and taken into consideration.

Though not essential, the following should be undertaken before a decision is reached:

- Arrangements should be made for the Home's Manager or delegate to meet the child, parent(s) or carers.

- An Information Pack and/or brochure about the home should be forwarded to the Placing Authority, parent(s) or carers.
- An Information/[Children's Guide](#) should be forwarded to the child
- Up to date Chronology where possible should be obtained
- A copy of the care plan should be obtained or forwarded to the home within 10 working days.
- Other relevant information about the child. For example, recent [Looked After Review](#) reports, [Pathway Plan](#), [Personal Education Plan](#), reports from specialists or therapists.
- The contact arrangements that may be permitted between the child and his parents, siblings, relatives and friends where appropriate.

If it is agreed that a placement is offered to the child, the [Designated Manager](#) should arrange for a Service Agreement/Contract to be drafted and forwarded to the Placing Authority for signing.

A copy of the completed/signed Service Agreement/Contract, Referral Form and other documents obtained must be given to the Home's Manager to be placed on file. The documents/information above should be taken into account when completing the child's Placement Plan.

It is for the Home's Manager/delegate and social worker to agree whether the Placement Plan has been completed sufficiently to sustain the child until the first Looked After Review. If there is no agreement, a Placement Plan Review must be convened within 7 days of the placement to enable the plan to be completed satisfactorily.

The detailed arrangements for admitting the child will depend on the circumstances of the case, these arrangements should be made by the Home's Manager in consultation with the child's social worker. A copy of the Children's Guide must be given to the child before or upon admission.

Part of the new Behavioural Management Plans include identifying impact risks for residents arriving new to the service and the management of these.

2.2 Arrival

On arrival new residents are given a link resident, who will be from the resident chairmen group, a link keyworker and link therapist.

They will also be given a link pack which the link resident will go through with them.

New residents then sign to say they know where the fire assembly point is; the fact there are boundaries in place to keep things safe; the idea of consequences to breaking such boundaries and the fact we in extreme circumstances may use physical intervention. There is also reference to the internal complaints procedure and our visiting advocate as well as information about daily routines and the on-site school, with a behaviour for Learning Agreement. Residents also sign a therapy contact and agreement, an assessment agreement and access to files form.

Notifications

When new residents arrive we inform the following services:
'Referralcentre.children@Cambridgeshire.gov.uk'
Mash.c&f@cambridgeshire.gov.uk

When residents become full residents at their end of assessment review they are then registered at the local medical centre, opticians and dentist.

2.3- Care and Placement Plans Guidance

Care Plans

Every Looked After Child must have a Care Plan completed and updated by the Placing Authority/Social Worker. The Care Plan must be prepared prior to a child's placement, or, if it is not practicable to do so, within 10 working days of the child being placed. The Care Plan must be regularly reviewed at [Looked After Reviews](#); it must then be redrafted/updated and circulated within 10 working days of the Review. The overall purpose of the plan is to safeguard and promote the interests of the child, prevent drift and focus work with the child and the family. The Care Plan sets out its overall objectives and timescales (including, by the time of the second Looked After Review, how permanence will be achieved for the child), it summarises the needs of the child, identifies the services required to meet those needs and describes the management and support of the plan by the local authority. Care Plans contain descriptions of children's needs and how these needs will be met while they are living away from home. Before a Court grants a [Care Order](#) it must be satisfied that a suitable Care Plan has been drawn up.

Placement Information Records

Placement Information Records must be completed by the child's social worker within 5 working days of the child being placed, with a copy being forwarded to the home. The Placement Information Record* is the responsibility of the Placing Authority/Social Worker. The purpose of the Placement Information Record is to set out the arrangements for the placement of the child in residential care or foster care.

Children placed in children's homes, will also have an internal [Placement Plan](#), as set out in the next section.

Placement Plans

Every child placed with us must have a Placement Plan drawn up and reviewed by the Home, which sets out the detail of the arrangements, for example, including a behaviour management plan, for the child. The Placement Plan may incorporate a detailed Behaviour Management Plan for some children. This Internal Placement Plan is called an Individual Treatment Plan (ITP)

The responsibility for completing and updating the ITP rests with the resident's therapist and keyworker. As residents reach the last 6 months of their placement they move to the transitions team and their transition ITPs are overseen by this team as part of their moving on process.

Other Key Plans/Records

Education

The school compiles an individual learner profile for each resident. This contains a record of prior learning, a summary of learning needs, a summary of findings from the educational psychologist, strategies to support the learner, record of achievement and aspirational targets. This document is reviewed and updated every half term by the Learning Development Lead teacher.

The school also keeps records of Personal Educational Plan meetings. These documents are produced during meetings involving the resident's social worker and their home county virtual school. These documents are in the format decided by the relevant local authority – some are kept on the online epep system and others are paper based.

The majority of learners at Glebe House have Education Health and Care Plans (EHCP). The school cooperates with the relevant individuals to ensure an annual review meeting takes place, including convening the meeting on behalf of the LA if requested. The learning Development lead provides the LA and parents with any evidence to support the proposed changes.

Members of the care and clinical team are invited to attend the PEP meetings and the EHCP review meetings.

Health Care

All children who are Looked After should have a Care Plan which incorporates a statement of the child's health care needs and how those needs will be addressed. For more information see [Health Care Assessments and Plans Procedure](#).

Leaving Care

All Children who are preparing to leave care should have a Pathway Plan setting out the route to the future for young people leaving the Looked After service and will state how their needs will be met in their path to independence. The plan will continue to be implemented and reviewed after they leave the looked after service at least until they are 21; and up to 24 if in education.

Some placing authorities incorporate Pathway Plans into Care Plans, some have separate Pathway Plans; authorities will also have their own policies for when Pathway Plans should be drawn up but most authorities start to draw them up after toward Children's 16th birthdays.

Other key records

This summarises the other key records that Children ought to have, it does not address specialist records or plans:

Core Assessment Record: A core assessment provides a structured, in-depth assessment of the child's needs where their circumstances are complex. The Core Assessment Record provides a structured framework for social workers to record information gathered from a variety of sources to provide evidence for their professional judgements, and facilitate analysis, decision making and planning. A core assessment should be completed within 35 working days of its commencement. A completed Core Assessment Record is then used to develop the Child's Plan.

Chronology (or Essential Information Record Part 2): The Chronology is started as part of the process of Core Assessment. It records all significant events and changes in the life of a child or young person. The Chronology is an analytical tool designed to help social workers understand the impact, both immediate and cumulative, of events and changes on the child or young person. The Chronology replaces Essential Information Record Part Two for Looked After Children.

Looked After Review Report: After each Looked After Review, the Chair (Independent Reviewing Officer) should produce and circulate a report within 20 working days of the Review.

2.4- Placement Planning Meetings

Purpose of Placement Planning Meetings

The purpose of Placement Planning Meetings is to ensure that children's placement plans are kept up to date and continue to meet the needs of the child. These are formalised through the end of assessment meeting, then at each statutory review- or review meeting for young people over 18.

Frequency of Placement Planning Meetings

For all children under 18 we require a Placement Plan Provided by the Local Authority. The internal case planning - Individual Treatment Plans (ITP) is an attachment to that placement plan.

This standard is met by the use of Individual Treatment Plans. These plans are reviewed and updated approximately every four months. Residents are involved in the process before the ITP meeting in a discussion with their clinical practitioner and their [keyworker](#) to consider any needs they have identified. The following areas are considered:

- Case Formulation
- Care
- Independence
- Family and Support Networks
- Therapy
- Risk Management
- Education
- Young person's views on Placement
- Transitions

The ITP process also involves a whole care team discussion, facilitated by AD Clinical, where the individual resident is thought about. The key members of staff including the clinical practitioner, keyworker, ITP chair and others such as independence coordinators when necessary, attend the ITP meeting with the resident that afternoon.

The ITPs are written up highlighting who is accountable for the various pieces of work. These are available for monitoring and guidance by Clinical Practitioners and keyworkers. Copies of ITPs are forwarded to the residents' referring agencies.

Thought is put in to the choice of a resident's keyworker depending the young person's needs.

There is a specialism of training within the staff team, around mental health and learning disability, to support children with communications difficulties. The Therapeutic Community approach of this agency means residents are continually encouraged and empowered in making decisions about their lives.

ITPs are reviewed, revised and updated every four months. For residents under 18 years of age who have statutory reviews under the Looking After Children (LAC) which happen six monthly the two ITPs which will have occurred during this time will compliment, inform and update preparation work for such reviews.

After serious incidents or in the light of significant changes in the child's circumstances an extra-ordinary professional meeting will be called to determine a way forwards which could include a change of placement.

Convening and Chairing Planning Meetings

Placement Planning Meetings must be convened and chaired by the Referring Authority.

Who Should Attend or Contribute to the Meeting

The following people should be invited to attend/have their views represented at the Placement Planning Meetings.

- The child's social worker
- The child's Independent Reviewing Officer (IRO)
- The Child
- The child's parents if appropriate
- The resident's keyworker and therapist.
- Other significant people/agencies

If any of these people cannot attend it does not preclude the meeting from occurring, if the manager/chair agree; in which case, the manager/chair obtain their views

Preparation and Conducting the Meeting

Before the meeting, the chairperson should obtain or be up dated on the following:

- The child's Placement Plan
- Any work which has been undertaken by key professionals involved in supporting the child's placement
- The child's ITP, [Personal Education Plan](#) and, if relevant, [Pathway Plan](#)
- Any Dates of Health appointments

The chairperson should also ensure that the child, parent(s) and others who have been asked to contribute understand the purpose of the meeting, how it will be conducted and are given the opportunity to put their views and suggestions.

During the meeting, the chairperson should ensure the following:

- That consideration is given to the continuing appropriateness of the placement within the context of the child's ITP or Pathway Plan and the need for the [Placement Plan](#) to be amended as appropriate.

- That the child's Placement Plan is updated if appropriate, and new or updated copies are circulated to those who were invited or contributed.

This does not mean that amendments to Placement Plans may only be made at Placement Planning Meetings. When Placement Plans are formulated and at each Placement Planning Meetings, the social worker and manager/chair should agree the extent to which they can be amended, between Placement Planning Meetings or without consultation.

If there are concerns about the suitability of the placement, consideration should be given to the following:

- Whether it is possible to sustain the placement until the next Looked After Review by, for example, providing additional support to the placement;
- Bringing forward the date of the next Looked After Review;
- Ending the placement.

Recording of Outcomes

The Chairperson must ensure the following is recorded at the end of the Placement Planning Meeting:

- The updating or amendment of the child's Placement Plan
- Additional minutes of any discussions and decisions made at the Placement Planning Meeting

Copies of these records should be circulated to those who attended or were invited to contribute

Progress Chasing Outcomes

Where the chairperson is concerned about delay in implementation of aspects of the Placement Plan, he or she should progress chase those responsible and, if necessary, take matters up with relevant managers.

Where the chairperson is concerned that recommendations or agreements have not been incorporated into the child's plan, he or she may take this up with the relevant person/manager and/or consider whether to reconvene the Placement Plan Meeting.

2.5- Looked after Reviews

Purpose of Looked After Reviews

The purpose of Looked After (Statutory) Reviews is to examine the work undertaken with the child, ensure that adequate plans are in place to safeguard and promote the child's welfare and make recommendations or representations on behalf of the child.

It is not the role of the Looked After Review to make decisions about children, that is the responsibility of the social worker.

However, where the [Independent Reviewing Officer \(IRO\)](#), or another person, including the child, is concerned about delay in implementation of the ITP or that recommendations have not been incorporated appropriately, he or she may take this up with the relevant manager or provider. To this end the child may require assistance from an Advocate or Independent Visitor (see [Advocacy and Independent Visitors Procedure](#)). In exceptional circumstances, a review date may be brought forward.

Frequency and Arranging Looked After Reviews

Looked After Reviews must take place:

- Before any significant change is made to the child's Placement Plan, unless that is not reasonably practicable;
- Before a decision is taken to cease looking after a child;
- For children who are looked after as a result of a secure remand;
- Before an Eligible Young Person moves into external semi-independent accommodation, a Looked After Review must be held and evaluate the quality of the assessment of the young person's readiness and preparation to move.

In the light of these requirements (above), Home's Managers should consider consulting the Independent reviewing Officer (IRO) for any child where the Placing Authority is considering changing a child's placement on an unplanned basis; or must ensure that the IRO is consulted where the Home's Manager is considering ceasing, ending or changing the placement.

Under normal circumstances, Looked After Reviews should be convened at the following intervals:

- an Initial Looked After Review should be conducted within 20 days of the child being Looked After;
- the 2nd Looked After Review should be conducted within three months of an Initial Looked After Review;
- subsequent Looked After Review should be conducted not more than six months after any previous review.
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These are maximum timescales; Looked After Reviews can be convened sooner if consideration is being given to ending or changing the child's placement or the urgency of the case determines they should be e.g. the child's social worker assesses that the child's welfare is not being adequately safeguarded and promoted.

Looked After Reviews are normally chaired by an Independent reviewing Officer (IRO). Arrangements, including the setting of dates and invitations, are normally made by the Reviewing Officer in consultation with the Social Worker. The Manager of the home should take all reasonable steps to be consulted too. Each authority will have its own procedures on who should be invited, but invitations must be sent out at least 10 days before the Review and the child, the child's parents and all key professionals involved in assisting the implementation of the Plan to be invited.

The social worker is normally responsible for informing, consulting and preparing the child at least 20 days before the review; but home's staff should assist as far as they can in this process and should ensure that children are properly informed and prepared. To this end, the child must be encouraged to contribute to any report prepared by the home. If the child wishes, he should be assisted in preparing his own contribution.

Staff should be mindful that the child may wish to or may benefit from being supported by an Advocate or, if appointed, an Independent Visitor (see Advocacy and Independent Visitors section).

In time for the review, or beforehand if required, the home should arrange for an up to date ITP to be available demonstrating what arrangements exist to meet the child's needs. If appropriate the home should also produce a report of the work undertaken since the child's last placement review or the last Looked After Child Review. Teaching staff should produce a report of the child's educational attainments and progress.

The Independent Reviewing Officer (IRO) must meet the child before his first Looked After Review.

The Review will consider the extent to which the aims and objectives of the Care Plan, ITP and associated Personal Education Plan and if relevant, pathway plan have been achieved. At the second and subsequent Reviews, the review must consider whether there is a suitable permanence place in place.

After the review the social worker is responsible for updating and circulating the Placement Plan, Personal Education plan (PEP) and, if appropriate, the Pathway Plan. The Manager of the home is responsible for updating and circulating the child's Placement Plan.(ITP) The independent Reviewing Officer (IRO) normally prepares and circulates a record of the decisions and recommendations within 5 working days, a full record within 15 working days and a full record including decisions within 20 working days of the review.

The Home's Arrangements for Looked After Reviews

Looked After Reviews are organised by the referring authorities. The relevant Glebe House staff will support the young person representing their views at such meetings and provide a detailed report about a resident's progress within the placement and their treatment.

2.6- Preparing for leaving Care

Qualifying Young People

They are over the age of 16 and under the age of 21, and have been Looked After or, if disabled, Privately Fostered after reaching 16, but do not qualify as eligible, relevant or former relevant. They may receive support, advice and assistance.

Personal Advisor

A Personal Adviser is the person appointed to work with every Looked After young person, usually at the first [Looked After Review](#) after the young person's 15th birthday, and will occupy a key role in preparing the young person for independence and providing support after they cease to be looked after. He or she will hold a pivotal role in the assessment, planning and review of services as set out in the [Pathway Plan](#).

Pathway Plan

The Pathway Plan sets out the route to the future for young people leaving the Looked After service and will state how their needs will be met in their path to independence. The plan will continue to be implemented and reviewed after they leave the looked after service at least until they are 21; and up to 24 if in education.

Key Responsibilities

Each local authority should have its own procedures for young people Leaving Care, which should be consulted in relation to relevant young person. In the absence of such procedures, the following may be applied.

A Personal Advisor should be appointed for every looked after young person before their 16th Birthday. The Personal Adviser's appointment will continue while the young person remains eligible, relevant or former relevant young person.

All eligible, relevant and former relevant young people must have received a multi-agency assessment of their needs and abilities to live independently. This will be informed by the ongoing assessment, planning and review which takes place throughout the period they are Looked After.

They must also have a Pathway Plan, which will be drawn up having regard to the above assessment. The Pathway Plan must be owned by the young person who must have a copy of the Plan for safekeeping.

The Pathway Plan should complement the ITP and be regularly reviewed.

Where the young person continues to be Looked After, there should additionally be a Placement Plan which should describe what arrangements have been made within the home to support the Pathway Plan. The Placement Plan will continue to be the responsibility of the home where the young person is placed, and must outline the arrangements in place for supporting the Pathway Plan.

The Pathway Plan will continue in place for eligible, relevant and former relevant young people.

Administration on Leaving Care

All move on Placements will be provided with appropriate leaving information to ensure successful handover of care, this is co-ordinated through our Head of Transition. Glebe House will also liaise with Risk Management procedures such as liaising with MAPPA and Police in respect of Young people leaving our service.

The Local Authority will be notified of all young people who leave our care, this will include information on the legal Care Status, referring authority, move on address and date of move.

Leaving Celebrations - Leaving ceremonies are very important at Glebe House. This rite passage for residents is a celebration of their time with us and a recognition of the progress they have made during the successful completion of their programme. It is important to mark these occasions for many reasons not least because ending may have been traumatic for the young people in previous settings.

The celebrations are usually around a meal with speeches, exchange of gifts and planting a tree.

Transition - Circles of Support and Accountability

All young people leaving Glebe House after successfully completing their placements are provided with 18 months of outreach support; this transition support is designed and managed by our Glebe House Transition Team, which includes a qualified social worker. In that majority of cases the transitional support is through a Circle of support and accountability. The Circles model uses trained volunteers within the young person's home area to provide the young person with assistance and support moving from a heavily supportive residential environment into the wider community. The circle's aim is to help with reintegration, provide a support network that understands the young person's particularly risks and needs and also provides a degree of monitoring.

2.7- Advocacy and Independent Visitors

Children's Rights Director and Advocates

Glebe House uses CORAM VOICE to provide independent advocacy.

All children have access to independent advice, from an independent advocate from Coram Voice and are provided with information about how to contact the Children's Rights Director. The advocate can represent or assist a child at a meeting (for example a Looked After Review), assist in making a complaint or bringing a matter to the attention of staff and managers or the Regulatory Authority.

Our advocate visits approximately every three weeks. The young people have access via phone to them if needed in the interim.

Independent Visitor

The Placing Authority must appoint an Independent Visitor where it appears to them that it would be in the child's best interest to do so.

Where an appointment is considered necessary, the child's social worker will identify whether there is a person already known to the child and independent of the local authority who may be suitable. If there is not, each authority will have its own procedures for appointment.

Independent Visitors must be suitably qualified and have undergone necessary checks with the Disclosure and Barring Service, Children's Services records.

The child must be consulted about the appointment and if he or she objects, the appointment should not be made.

Duties of Independent Visitor

The independent visitor should undertake regular visits to the child and maintain other contact, by telephone and letter as appropriate.

The main purpose of the visits and contacts will be to befriend the child and give advice and assistance as appropriate.

- The IRO should be notified and consulted if a child persistently absents him/herself or has been missing from the home;
- Children have a right to contact their IRO if they are concerned about their placement or Care Plan.

Home's managers should be aware of these wider responsibilities and should ensure that children are informed of their right to consult or notify the IRO; and Home's Managers should also consult the IRO if they are concerned about the child's placement.

2.8- Case Recording Policy and Staff guidance

Records Must be Kept on All Children

Also see- Care and Placement Plans Guidance.

Records must be kept on all children: in electronic format or on paper files- audio or video recordings may also be kept.

Information held within paper files must accurately reflect the corresponding information recorded in electronic records.

Records held on paper may extend to more than one volume. Where more than one volume exists, the dates covered by each volume must be clearly recorded on the front cover.

The Design of Records and Forms Must be Approved

Records and forms must be designed to fit their purpose and used consistently across the organisation.

The design of all records and forms must be approved by company before coming into use.

Children and their Families must be informed about and have access to their Records

Children and their families have a right to be informed about the records kept on them, the reasons why and their rights to confidentiality and of access to their records.

See:

[Confidentiality Policy](#)

[Access to Records Procedure](#)

Information must be provided in a form that children and their families will understand - in their preferred language or method of communication. An interpreter will be provided if needed.

The Practitioner Primarily Involved Should Complete the Record

The practitioner primarily involved, that is by the person who directly observes or witnesses the event which is being recorded or who has participated in the meeting/conversation, must complete records. Where this is not possible and records are completed or updated by other people, it must be clear from the record who has provided the information being recorded. Preferably the originator should read and sign the record. Records of decisions must show who has made the decision and the basis on which it has been made.

All Relevant Information about Children must be recorded

All visits, meetings or appointments made in relation to children must be recorded, stating who was present or seen, the relevant discussions which occurred, actions or decisions taken and by whom; the reasons for taking any decisions should also be recorded.

All other relevant contacts with children, their families, colleagues, professionals or other significant people must be recorded. When recording such contacts, it will be necessary to state who was present or seen, the relevant discussions, which occurred, actions or decisions taken and by whom; the reasons for taking any decisions should also be recorded.

Children should be involved in the Recording Process

Children must be routinely involved in the process of gathering and recording information about them. They should feel they are part of the recording process.

They should be asked to provide information, express their own views and wishes, and contribute to assessments, reports and to the formulation of plans.

Generally, they must be asked to give their agreement to the sharing of information about them with others - but there are exceptions.

Information about children and their families can normally be shared with them

Information obtained about children and their families can be shared with them unless to do so would place them or others at risk.

For example, where the sharing of the information may place the child or another person at risk, or where the Police request that information should be withheld in order to enable them to investigate or prosecute a serious offence.

Records of sanctions and other measures of control or incidents e.g. where physical intervention is used or if children are absent/missing must be carefully recorded with full details by the staff involved within 24 hours in a record* kept for the purpose*

Where information is recorded which should not be shared with the child concerned, it should be placed in the Confidential Section of the child's file and a note of the lodging of the document should be recorded.

Where records contain information about third parties (for example, other family members or other children), this information cannot usually be shared, unless permission is gained from the person concerned. In such cases efforts must be made to separate the information relating to third parties from that concerning the child/parents.

Subject Access Request SAR

If service user or ex-service user wishes to see their file this can be facilitated by the Data Protection Officer Anil Kalbag. This process involved data redacting and establishing proof of identity in the case of ex-residents. SARs are responded to within one month.

Managers Must Monitor Information in the Confidential Section of the Child's File

Managers must monitor information held in the Confidential section of files, ensuring that the reason for holding it there is valid; if not, it should be shared with the child and/or moved to another section of the file.

However, before sharing any information previously deemed to be confidential, the manager must take all reasonable steps to consult the originator and take account of their views and wishes.

Records Must be Legible, signed and Dated

If possible, manual records should be typed or handwritten in black ink and all records must be signed and dated. Those completing computerised records must show their name and the date when the recording was completed.

Any handwritten records must be produced so that readers not familiar with the handwriting of the writer can read the records quickly and easily. It must be possible to distinguish the name and post title or status of the person completing the record. If there is any doubt of the identity of the writer from a signature, the name should be printed.

Records Must be Up to Date

Records should be updated as information becomes available or as decisions or actions are taken as soon as practicable.

Records Must be Written in Plain English and Prejudice Must be Avoided

Records must be written concisely, in plain English, and must not contain any expressions that might give offence to any individual or group of people on the basis of race, culture, religion, age, disability, or sexual orientation.

Use of technical or professional terms and abbreviations must be kept to a minimum; and if there is likely to be any doubt of their meaning, they must be defined or explained.

Records Must be Accurate and Adequate

Care must be taken to ensure that information contained in records is relevant and accurate and is sufficient to meet legislative responsibilities and the requirements of these procedures.

Every effort must be made to ensure records are factually correct.

Records must distinguish clearly between facts, opinions, assessments, judgements and decisions. Records must also distinguish between first hand information and information obtained from third parties.

See [Confidentiality Policy](#)

Other Agency involvement

Where a young person may be receiving additional Care, treatment or Educational Needs from an alternative service then a Lead Agency Form will be completed. This ensures that all parties are aware of how information will be shared between agencies, who has co-ordinating role and when there will be reviews.

Managers Must Oversee, monitor and Review Records

The overall responsibility for ensuring all records are maintained appropriately rests with managers with day to day responsibility, delegated to other staff as appropriate. The Manager should routinely check samples of records to ensure they are up to date and maintained as required and, if not, that deficiencies are rectified as soon as practicable.

Records are reviewed at the biweekly Frontline Managers Meetings

Records should be kept securely and must be tamper proof

All records held on children must be kept securely and must be tamper proof.

Children's files should normally be stored in a locked cabinet, or a similar manner, usually in an office which only staff/carers have access to.

Other day to day records, such as handover, should also be kept securely in a manner authorised by the manager and in keeping with the principles of good practice laid out in this Chapter.

These records should not be left unattended when not in their normal location.

*This can be an electronic record, but this must be accessible to all who have a need to see the record including children to whom the record refers. All records must be in formats that cannot be tampered with after the events e.g. bound numbered or electronic entries that are then 'barred' so they cannot be amended at a later dates and in a manner that they can be accessed later e.g. for historical investigations.

Removal of Records Must be an Exceptional Occurrence

Records should not normally be taken from the location where they are normally kept.

If it is necessary to remove a record from the home, a manager, who should stipulate or agree how long it is necessary to remove the record, should approve this. The manager must also be satisfied that adequate measures are in place to ensure the security of the record(s) whilst they are removed.

For example, records must never be left in unattended vehicles.

The authorisation for a record to be removed must be recorded and those who may have need to see the records should be informed of their removal.

The manager must then ensure the record is returned as required/agreed.

Records Must Usually be Retained After Closure

Records must be retained for 75 years from the date of birth of the child or 15 years from the date of death in the case of a child who dies before the age of 18

When a file is closed, the date for its destruction should be put on the cover and on the computer record. Records should be destroyed on the relevant date unless the person concerned has been re-referred. Each home and team should maintain a list of records which have been destroyed, the date when they were destroyed and by whom.