

## MANCHESTER LEAVING CARE SERVICE

### DEALING WITH REFERRALS

#### 1. Introduction; General Principle

Because of the pressure on the Service in terms of caseload numbers/staff available ONLY referrals that meet the legal criteria of the Children (Leaving Care) Act will be accepted. Thus no matter how heartbreaking the situation!! referrals which don't meet the criteria will NOT be accepted.

Thus with all referrals received, whether in writing, over the telephone or in person, the first thing that will be checked is that young person's legal status. Within Manchester Social Services, if there is doubt, this should be done by ringing a Social Work office, asking for the Childrens Services Admin and asking them to look up on their computer system who the case was open to, where the file is and what dates the young person was 'Looked After'. This is particularly important to check where a young person themselves, or another Agency on their behalf, is saying they used to be in care but experience has often shown that they are not always clear either about their previous legal status or the actual dates they were in care. Obviously similar details of young people who were in care of other Authorities should similarly be checked with that Authority.

#### 2. Straightforward Referrals

Referrals should be made to MLCS in writing, using one of our Service Referral forms and with an accompanying social history and latest LAC review/pathway plan. In the vast majority of cases this is how referrals are made, but if someone rings in they should be sent a referral form and told to follow this process as, other than in the instance described below, we will not start working with a young person until we do have a proper written referral on them and have considered it properly.

#### 3. Duty Work on behalf of other Authorities

Occasionally, though we should always be cautious about this, we might agree to do something on a one off or regular basis on behalf of another Authority's young person e.g. give them some money as they are in Manchester and then reclaim it from the 'home' Authority. This is fine up to a point though we must be careful that such work doesn't in effect become a 'referral', in which case we do need to follow the proper referral form procedure above.

#### 4. Deciding how to deal with Referrals

Essentially referrals meeting the legal criteria for Leaving Care will fall into one of 2 categories;-

- a) Young people for whom the Responsible Authority is Manchester.
- b) Young People from another Responsible Authority than Manchester.

5. Discussing 'Manchester Responsible Authority' Young People with a Referrer

i) Within 5 working days of the receipt of the referral, the Duty Manager will ring the referrer to discuss the case.

ii) Having checked the referred is a legitimate one, the Duty Manager will further check with the referrer

- the spelling of the young person's surname and forenames.
- the spelling of their address and get the postcode if at all possible.
- contact telephone number
- the young person's correct date of birth.
- the young person's ethnic origin (in relation to the DOH code list on our Livelink system)
- the young person's legal status in relation to both the Children Act and the Children (Leaving Care) Act.
- if an asylum seeker, the person's asylum status.
- whether the young person has any children, and if so how many.
- whether the young person has any mental health problems, diagnosed or non-diagnosed.
- whether the young person has any offending history, and if so what types of offence.

*The above is all factual information that we need to get correct from the start so we can enter it accurately on Livelink (see later section).*

iii) Ensure the referrer has included a social history and most recent LAC review/pathway plan. Really there is very little reason why this shouldn't be possible, though I have to say I try to be sympathetic to Social Workers etc having to do lots of paperwork!

iv) Ideally also ask the referrer if they know the young person's National Insurance Number (often they don't) and if they have included a copy of the young person's birth certificate.

v) Discuss the case with the referrer. This should always include

- why the young person first came into care.
- the young persons current contact with, and views about, their family.
- the stability or otherwise of the young person's current placement.
- what are they doing currently in terms of education/training/employment.
- what interests the young person has that we might help them follow up.
- a view from the referrer on what sort of young person they are.

- are there any risks we need to know about (bearing in mind we will be including a risk assessment soon within our referral form).
- what are the current plans for the young person's future. Does the young person see things this way. Does their carer.
- does the young person and their carer know they have been referred to MLCS. What do they think about/expect of their referral.
- does the young person specifically need to have a male/female, black, worker etc etc.

End by telling the referrer in what timescale we will consider allocating the case and how we will let them know.

Create a new case within 'Pending' on the Livelink system and put on all the information you have got from discussing the referral. In putting on information, you need to do everything in Capitals. Make sure you fill out the following Livelink forms:-

- 1 – Referral Details
- 2 – Service User Basic Information
- 3 - Agency Contact List
- 4 – Service User Address Details
- 5 – Start the first line only of the Accom/Housing History Snapshot.
- 6 – Start the first line only of the Educ/Train/Emp History Snapshot.
- 7 – Case progress Sheet – Ignore this form at this stage.
- 8 – Only fill in the 4 sections headed Children, Special Needs, History of Offending and What they are Currently Doing. Ignore all the other sections at this stage, unless you particularly wish to complete more.

Make sure when you input information to each form that you click on Apply when you've finished, or the info will be lost.

The discussion with the referrer then needs to be typed and 'filed' within the Contacts Section of that young person's file within Livelink. In writing up your discussion, always begin with a paragraph that sets out the current facts about a young person i.e. their age, where they are living and what their Children Act and Children Leaving Care Act legal status are.

Put all the referral papers, including your continuation sheet, into the referral tray in Admin for them to make you a file on the young person. They should return to you a made up file, together with a sling.

When you get the file back, stick a label on the front of it in the right hand bottom corner and write the young person's date of birth, their Children Leaving Care Act Legal Status, the date that commenced, when they will be 18 and when they will be 21.

## 6. Deciding what to do with a Case

Essentially, there will be 4 possible outcomes:-

- i) Allocating the case to an Assessor/Planner
- ii) Allocating the case to a Leaving Care Worker
- iii) Not being able to decide yet until more is known about the case or, for e.g., the young person has been referred whilst too young.
- iv) Keeping the case 'on hold' to oneself as a Team Manager for various reasons (see below).

Looking at each one of these in turn:-

a) Allocation to Assessor/Planner

At present we are trying to allocate the majority of cases to Assessor/Planners, who will undertake the initial needs assessment and write the initial Pathway Plan. Currently we are deciding which Assessor/Planners to allocate cases to at fortnightly allocation meetings. Having made such a decision the Team Manager needs to:-

- i) Enter the decision in the Referral Book.
- ii) Send a letter to the Referrer telling them who we have allocated the case to.
- iii) Allocate the case to the named Worker on Livelink.
- iv) Change that Case's status from pending to open.
- v) Change the field within form 2 (Service User Basic Information) 'Who is dealing with this case' from Manchester Social Services to Manchester Leaving Care, and enter the name of the allocated Worker in the appropriate field.

b) Allocation to a Leaving Care Worker

Occasionally we will have a referral that is more appropriate to allocate straight to a Leaving Care Worker, or a case that we want either to allocate to a Leaving Care Worker from an Assessor/Planner, or to jointly allocate for a period between the two.

In such instances follow the same steps as for allocation to an assessor/planner (above). If the case is changing however from an A/P to a LCW, besides creating a relationship to the new worker on Livelink, the old relationship also needs closing down. On the other hand if it is a joint allocation, 2 relationships can be created for that case.

c) Can't decide yet who/whether to allocate the case

This could be for example because the young person is too young yet for a service; we are making further enquiries as to how best to deal with the case etc etc. In this instance, leave the case on Livelink within the Pending category until we have made an initial decision. The only point about any Pending case that is being kept Pending for a reason is that the Duty Manager needs to have a system for 'chasing the case up' and deciding what to do with it.

d) Keeping the case 'on hold' to a SDTM

There are circumstances - we genuinely don't know where a young person is; they are living in another Authority a good way away and are being dealt with by another Leaving Care Team/Agency; etc etc – when cases can be kept 'on hold' to a SDTM. This action needs to be balanced with the fact that the Children (Leaving Care) Act does not allow for Inactive cases, in that we are supposed to be actively reviewing and trying to keep in touch with all young people who qualify for a Service and Manchester Leaving Care's aim is to achieve this to the extent we are practically able.

Once a Manager decides to do this with a case, they need to transfer the case from Pending to Open and create a relationship allocating the case to themselves, closing down any relationship to any other allocated Worker and altering the allocated Worker screen in Form 2.

The Manager then needs to have some self devised system of attempting to update the case. Obviously if the young person's whereabouts are truly unknown this is very difficult/almost impossible. If however they are being dealt with by e.g. another Leaving Care Team a periodic phone call / getting from them any plans/reports they have done would be appropriate. Such efforts to update the case then need to be recorded directly onto Livelink by changing any details on the forms and writing a brief note of the update under 'Contacts'.

#### 7. Dealing with 'non Manchester' referrals

The Manager needs to be aware of the agreed Transfer of Cases Protocol across the North West Region. Even though it has only been formally agreed with the 22 Authorities who make up Manchester and Merseyside, nevertheless we should apply the same principles to referrals from other non North West cases.

In essence the Protocol says that whilst we will be as helpful as possible in giving information as to services in Manchester, and where appropriate letting a young person who is actually living in Manchester use our duty service, we nevertheless won't take a referral proper and allocate it until a young person really has been living in Manchester for at least a 3 month period. This is to prevent us taking on cases that quickly disappear again, as young people are prone to do. The Protocol describes how we would then get a written referral on one of our forms and the initial Pathway Plan from the Responsible Authority. Thereafter we would consider allocation in the same way as any other case.

#### 8. Dealing with 'Manchester' young people living outside Manchester

Quite rightly we should receive referrals from all Manchester's Looked After young people, irrespective of where they are living.

The practical problem arises how to write at least the Initial Pathway Plan as the young person could be living a long way away and we have agreed MLCS, not SSD, will write Pathway Plans. Like wise a lot of other Leaving Care Teams will take on cases, but not without first receiving a proper referral and a Pathway Plan as indeed we ourselves would expect in reverse. Occasionally, despite this, I have got another

Authority to take the case and write the Plan on behalf of Manchester, or on 2 occasions Manchester Social Workers have done them. Nevertheless in the vast majority of cases, our Service's Assessor/Planners need to do an initial Pathway Plan in the best way they can and then, if the case is a long way away, we negotiate with the local leaving care team as to them taking on the case and keeping the plan updated as per the North West Transfer Protocol agreement.

#### 9. Updating Information on Livelink

Once an SDTM has created a Case within Livelink and put in all the initial information, as above, it will be the allocated Worker's responsibility to keep all the case details updated on Livelink.

#### 10. Closing a Case

The MLCS Manager 'responsible' for the case and making the decision to close the case will ensure all the basic information/address screens on Livelink are up to date and the paper file too is complete. They will then pass the paper file to John.

John will then

- Move the case file to Closed within Livelink
- Shut down the relationship to the allocated worker
- Fill in the field on the Case Progress form that the Case Closure form has been completed.
- Send an Exit Interview form to the young person and get the member of staff to whom the case was allocated to complete their version of the Exit Interview form.