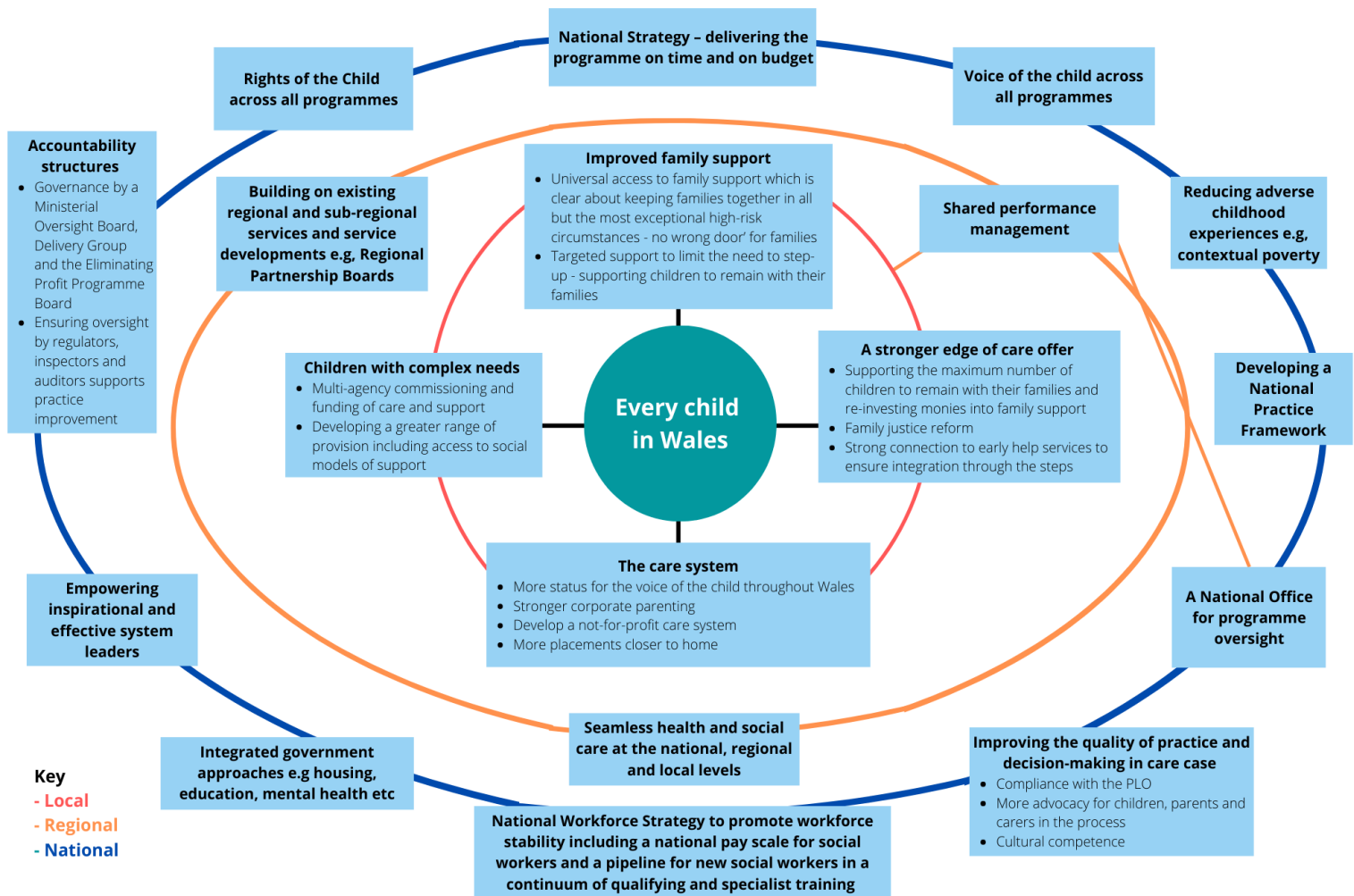




# THE NATIONAL PRACTICE FRAMEWORK FOR WALES: AN ENGAGEMENT STRATEGY



*This infographic summarises the overall Transformation Programme for children's services in Wales and shows the part the National Practice Framework plays in this. The outer ring is the national level. The middle ring is the regional level. The inner ring is the local level where services to children, young people and their families are delivered. The infographic shows the scale of transformation planned and the importance of co-ordinating the moving parts.*

## The National Practice Framework's place in the Transformation Programme

1. The Transformation Programme will shape and define the future of children's services in Wales. The programme is radical, because managing demand, sustaining improvements and supporting a workforce under pressure will be impossible to achieve without radical action.
2. Children and young people in Wales should be supported to remain with their families, where this is consistent with their welfare. We want fewer children and young people to come into care, because of providing evidence-based early help and edge of care interventions. There will be times a child or young person needs to be in care. Support should continue to maintain their important relationships and, where possible, to promote family reunification. When children and young people are in care, we want them to remain close to home so they can continue to be part of their community wherever possible.
3. Children and young people need the right type of care to meet their needs and to respect their rights. This means reforming and joining up services for all care experienced children and young people: providing additional specialist support for children and young people with complex needs; and supporting all those who care for children and young people, whether they are family members or a professional team.
4. This Engagement Strategy sets out why we need a National Practice Framework, what it aims to achieve and how it will work in practice.
5. Extensive work has taken place to ensure that the principles underpinning the Framework reflect a consensus and a shared vision. This strategy seeks to build on our work to date. We will develop a community of practice to develop and write the entire suite of National Multi-Agency Standards which are the basis of the National Practice Framework.
6. The period of engagement will last from mid November 2023 until 1<sup>st</sup> February 2024. 6 draft Standards are included to illustrate our current thinking. They are included to give a sense of what is intended.
7. These first Standards will be published in March 2024, once responses have been analysed and the drafts have been strengthened. The remaining Standards will be developed during 2024, with the intention of publishing the complete National Practice Framework in December 2024. There may need to be a lead-in period for some Standards whilst the conditions for practising them successfully are established. However, we anticipate this being a small minority of the final suite of Standards.
8. Modelling of good practice, guiding and teaching are emphasised as the best way of motivating everyone involved and achieving compliance.
9. E learning modules for the whole system, tailored to the needs of different professional groups will be produced during 2024 to accompany the introduction of the National Practice Framework. Discussions are being held with the relevant Inspectorates with a view to developing a programme of joint inspections of the application of the Standards, to ensure they are embedded.

## The Purpose of the National Practice Framework

10. The National Practice Framework is being introduced to translate policy into practice throughout Wales. Some practice variation is creative but excessive variation is unfair to children and families. Our Standards will be set at the outstanding level of practice being delivered day-in, day-out by several agencies throughout Wales already.

### **The Practice Framework is being developed for 3 reasons.**

1. The first is to ensure that children, young people and their families receive a high-quality service wherever they live in Wales.
2. The second is to ensure that staff use this practice framework wherever they work in Wales, to ensure the greatest possible consistency of professional decision making.
3. The third is to strengthen the quality of practice.

11. The National Practice Framework will ensure a shared understanding of professional and public expectations that every agency engaged with a child will work together effectively and will always 'think multi-agency' as well as 'thinking family.' Having a presumption of 'joint' with 'single agency only' by exception, is one of the policy imperatives we are keen to hear about in this engagement process. We expect all agencies providing children's services to routinely work together. We will be seeking compliance with our expectation.
12. The National Practice Framework is compatible with all practice models currently in use throughout Wales to avoid any risk of dual standards. Those practice models include Signs of Safety, Systemic Practice, Family Safeguarding, Trauma Informed Practice, the 12C's and Family Valued, to name some but not all. The National Practice Framework is an eclectic practice model which places the emphasis on putting children and young people first; on relationship-based practice – which is common to all local practice models: and on the importance of multi-agency leadership and joint working at every step of the child or young person's journey. Strong partnership working is a central feature of all local practice models in Wales.

## The template for the Standards

13. The National Practice Framework is underpinned by our belief in children's rights, social justice and the importance of local service delivery. The recurrent Framework themes for all services are that they must be child-centred, relationship-based and multi-agency across the whole system. Each Multi-Agency Standard concludes with a small number of multi-agency 'must dos'. Children and young people are everyone's business. Two examples of multi-agency 'must dos' are set out below to show the intention.

No child or young person must come into care in Wales unless all possible support has been given to prevent this by the local multi-agency network.

No child protection decision should be taken unless all relevant information has been shared and made available to the decision-takers – with the right people in the room - at either a strategy discussion, a strategy meeting, a child protection conference or a core group.

14. National Standards will be short standards for a general audience, not lengthy standards and procedures for professionals. These are in place already covering every service in Wales. The National Practice Framework will not replace any single document or policy framework, nor will it displace or replace existing local procedures which have been developed over many years. Instead, the National Practice Framework will be the Welsh Government's way of defining and setting out the practice standards it expects, for easy reference.
15. The National Standards draw from research, inspection reports and a range of collaborative conversations that have been held in our work so far. The Standards have been written in line with legislation, the UNCRC, regulation, inspection reports and academic findings. These are assumed and not listed, so that attention is drawn to the practice narratives and the multi-agency 'must dos'. Likewise, the many policy areas, reports, programmes, research and tools covering the same ground as the Standards are not referenced. This is so that the messaging in the Standards can be as direct and uncluttered as possible on paper and to be no more than two pages, again to make access as easy as possible.
16. However, it will be important that the final published version of each Standard has a third and possibly a fourth page pointing the reader to a range of resources and papers which go into the requisite level of detail about each Standard that many audiences will wish to see or find.
17. We now set out the outline National Practice Framework and the proposed Multi-Agency Standards. The first 6 draft Standards are set out in full later in this Engagement Strategy paper, so that responses can help to shape the remaining Standards. The draft Standards are written in different styles. We invite feedback about which you think works best.

The working draft of the National Practice Framework

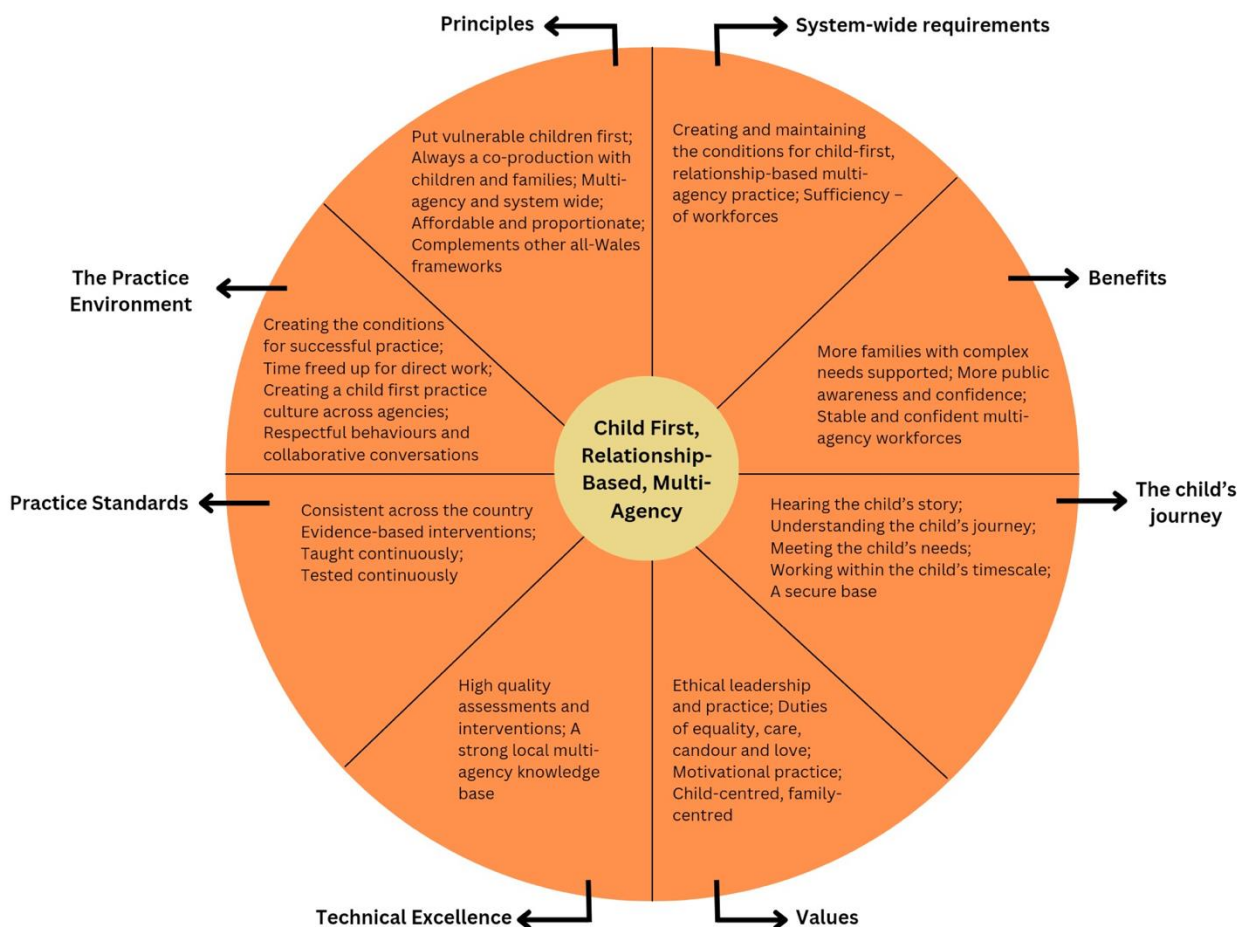
**Our 1<sup>st</sup> Principle** is to put children and young people first in their family and first in our communities, through strengthening relationships at all levels.

**Our 2<sup>nd</sup> Principle** is that children’s services will always be a co-production with children and young people, with families and between professionals. Co-production means a presumption of inclusion, a presumption against exclusion and giving our citizens barrier-free access to the services they need.

**Our 3<sup>rd</sup> Principle** is that the National Practice Framework is a multi-agency framework, to be achieved through child first, relationship-based practice. The voice of the child is everyone’s responsibility, in the same way that safeguarding is. How this will work in practice and the difference it will make are set out in a series of National Standards for children and young people which will apply to all agencies.

**Our 4<sup>th</sup> Principle** is that the National Practice Framework aims to be proportionate and sustainable, using the total available resource to provide the maximum amount of support to the maximum number of families, whilst offering maximum protection to children.

**Our 5<sup>th</sup> Principle** is that the National Practice Framework complements existing all-Wales frameworks like the Wales Safeguarding Procedures, the All-Wales Adoption Policies and Social Care Wales Codes of Practice. We will also draw upon best practice globally.



## The list of proposed National Standards

1. Values-led Children's Services
2. Child-inclusive practice
3. Relationship-based practice
4. The overarching multi-agency collaborative standard
5. Strengths-based practice (diversity)
6. Trauma-informed practice
7. Poverty-aware practice
8. No Wrong Door – and what then?
9. Transitions
10. Thresholds
11. Team around the child, team around the practitioner
12. Trusted adults
13. The child's timescale
14. Advocacy
15. Early Help
16. Eyes on the child – the Child Safeguarding Standard
17. Corporate Parenting, including 'rights' of passage for care experienced young people
18. Missing Children and Young People
19. Children with continuing care needs
20. Practice leadership, practice supervision and practice education
21. Evidence-based practice
22. Implementation: the how to
23. Communication, including the mechanics of practice
24. Manageable workloads
25. Quality assurance, including management oversight and inspections, performance management and improvement
26. Line of sight: national, regional and local government through the eyes of a child

A summary of each Standard, as a pointer to the development work needed in 2024

#### 1. Values-led Children's Services

Caring for and supporting vulnerable citizens is at the heart of good government and has been for centuries. We are still on a journey towards achieving a values-led society. This National Multi-Agency Standard reflects our aspiration to be this society. Inclusion is one such value and we make a presumption of inclusion throughout the National Practice Framework. Transparency is another core value. Our Values Standard will re-state the Welsh Government's commitments to delivering values-driven care and support services to be proud of and on which our citizens of all ages can rely.

#### 2. Child-inclusive practice (included in full in the next section of this paper)

#### 3. Relationship-based practice

**'You can't grow roses in concrete,' Eileen Munro, 2017**

**'They may forget what you said, but they will never forget how you made them feel,' Carl W. Buehner**

**'We often refuse to accept an idea merely because the tone of voice in which it has been expressed is unsympathetic to us,' Friedrich Nietzsche**

**'Don't walk in front of me; I may not follow. Don't walk behind me; I may not lead. Just walk beside me and be my friend,' Albert Camus**

The relationship-based practice standard will insist that the following relationships are warm and inclusive. Strong working relationships are a pre-requisite of successful outcomes.

- Between children's practitioners and the children, young people and families they care for and support.
- All public sector professionals with each other.
- Continuous case holding is the ideal, not interrupted case holding, with a point of contact always made available to children, young people, families and professionals.

#### 4. The overarching multi-agency collaborative standard

Each Multi-Agency Standard in the National Practice Framework ends with a small number of multi-agency 'must dos'. The National Practice Framework takes the form of a joint accountability framework in which all statutory agencies take equal responsibility, showing a positive obligation to one another, especially social services, health, police and education. So, **children in care are in the care of the Welsh Government** as much as their local authority and **they are a national priority**. This cross-references to the Corporate Parenting Standard which emphasises the requirement on the whole of the public sector to support children in care in every way needed. This overarching National Standard about partnership working sets out how services should work together to deliver this



common purpose day-in, day-out. An emphasis is placed on how to establish and sustain high-trust teamwork around every child with a care and support need, irrespective of geography and demography. The importance of 'readiness' for working together will also be referenced as will how best to create the conditions for sustained, high-quality multi-agency collaboration at all times.

#### 5. Strengths-based practice (diversity)

The National Practice framework concentrates on the strengths of individuals and families, whilst being attentive to the risks they face or pose. It is a deliberate antidote to deficit models which tend to define an individual or a family by the problems they face or by actions they take which cause a risk of harm. This standard incorporates the Welsh Government's commitment to equality and diversity, by recognising the uniqueness of each child and young person and the importance of applying diversity principles to how care and support is delivered. Strengths-based practice aims to empower, inspire and motivate children, young people and their families to tackle the challenges they face, with support. An emphasis will be made on supported self-assessment, self-care and self-regulation, to help achieve personal outcomes. All agencies must practise motivationally. The multi-agency 'must dos' will emphasise how each agency can operate a strengths-based model, whatever its roles and responsibilities.

#### 6. Trauma-informed practice

Trauma is a universal inequality. This Standard supports the Welsh Government's ambition to be a trauma-informed nation by 2025. Research has established a clear link between adverse childhood experiences (ACEs) and subsequent trauma which can have, at worst, a lifetime impact and consequence and sometimes a trans-generational impact. Trauma-informed practice aims to reduce the impact and duration of trauma. The National Multi-Agency Standard will reference all aspects of trauma-informed practice, such as trauma recognition, trauma-sensitive and trauma-responsive services in all agencies, with an emphasis on strengths-based methodologies and a focus on, and belief in, recovery. Trauma training for the general public is also included in the Standard, anticipating the direction of travel in Wales.

#### 7. Poverty-aware practice

In line with the Child Poverty Strategy for Wales, this Standard highlights the risks to children and young people in poverty and what can be done within a local hardship strategy. For instance, poverty should not be conflated with neglect. Poverty means families are sometimes forced to take steps to get money into the house in ways which place children and young people at risk of exploitation. Helping families with the necessities of life is increasingly important for all public sector professionals to take responsibility for. Poverty-proofing the school and teaching environment and guarding against poverty blindness in the assessment of criminality are two examples where multi-agency understanding and action are 'must dos'. Poverty is pernicious and takes many forms. Emotional poverty is as significant as material poverty. One is often a consequence of the other because poverty is demoralising. Some practitioners have been delivering food parcels during the current cost of living crisis. This Multi-Agency Standard aims to set out how poverty-aware practice can inform crisis support responses as well as decision-making and as well as helping families to develop greater

resilience.

## 8. No Wrong Door – and what then?

Any child with a care or support need should be connected into the help they need, or re-connected, whoever they ask. As soon as a need becomes evident, the professional in contact with the child, young person or family becomes a *children's practitioner* and should help as much as they can, up to the limits of their professional ability. Concerns can be referred on but not bounced around. Bouncing and bouncers deflate people who need services and push them towards giving up. All concerns must receive a warm handover. Of course, a 'no wrong door' policy means little if the concern is then held up further down the line or if a door in the journey is revolving, denying access. This Standard applies to every transaction during the child or young person's journey. The agencies involved must start with the child or young person, stay with the child or young person and end with the child or young person with a joint decision being made about how a concern is taken on board, resolved or closed down. Referrers must be included in the outcome of their referral.

## 9. Transitions

'It was the hardest thing I've even done in my life' – the words of a parent who stopped her drug habit without help in order to get her child back. Inside every children's service case, numerous complex transitions are likely to be underway. From one country to another, from one family to another - stability can be hard to achieve. Understanding the transitions people are going through, getting alongside them and supporting their journey, is a core task for children's services and for all agencies. Many transitions are an escape route from trauma. A successful transition can be the outcome of motivational practice, hence the importance for practitioners in all agencies to connect with the transitions a child, young person or family is going through. This Multi-Agency Standard will reference the important transitions different professional staff are likely to see in front of them and what care and support can be given.

## 10. Thresholds

Threshold uncertainty is rife. This links with the 'no wrong door' Standard and the requirement not to bounce those receiving and providing services around. Consideration will be given to issuing national guidance, emphasising the importance of prevention and early intervention – too much early intervention is in reality late intervention, and often too late. This Standard will also make clear that thresholds cannot be set at a level which excludes children, young people and their families with a care and support need from the services they should be entitled to. Achieving this will need a radical re-direction of resources over time and, as a consequence, this may be one of our Standards that will need a lead-in period in order to create the conditions for it to be implemented successfully. But it is much needed and that need is growing.

## 11. Team around the child or young person, team around the practitioner

The 'team around' concept and the associated Standard is one of the most important of our National Multi-Agency Standards because it covers multi-agency working in practice. This can be the team around the child, the team around the family, the team around the school, and many other pop-up teams for a purpose. Each 'team around' is made up of people who know the child or young person best and who are charged with providing their care and support. Some of those people will be special for the child and will be trusted adults for them. Others will be responding to a need to play a contributory part in providing a bespoke care and support package. There is no hierarchy of importance between professionals and family members. Equal importance and co-production must be practised continuously with fidelity to the principle.

## 12. Trusted Adults (included in full in the next section of this paper)

## 13. The child's timescale


The child's timescale links to child-inclusive practice. Shortages of key resources, waiting lists and delays can mean that the dominant timescales in service provision are agency timescales or a court's timescale, to name just two. When services to a child, young person or family with a care and support need are being planned, the child's timescale must always be factored into planning. Securing early permanence for a child in care through a culture of urgency is an example of this.

## 14. Advocacy

Children, young people and their families with a care and support need often need an advocate for their voice to be heard. As with many of our Standards, specific national standards for advocacy are already in place and in use. This National Multi-Agency Standard will refer to existing Standards and will aim to add value about how all agencies can play a part in helping those we are supporting to speak up, speak out and to feel more powerful, so that they can get what they need and make best use of it. Innovative practice such as peer to peer advocacy and parent cafes will be referenced.

**CHALLENGE**

- 1 How long does 50 weeks feel to you? Really *think about this and put yourself in the child's shoes: how would 50 weeks feel to them?*
- 2 How can you really *get to* know the children and young people you work with and understand the impact delays are having on them?
- 3 How do YOU explain the delay to the child or young person?  
*We all have a collective responsibility for this*
- 4 Ask the children and young people you work with about how the delays are affecting them and take action.
- 5 Think about how YOU as an individual contribute to the delays: is that expert report *really* going to add value; are your reports filed on time; is that additional assessment going to really make a difference; is a 16.4 appointment *really* necessary; is the case management in proceedings robust enough?
- 6 **DO NOT NORMALISE DELAY!**  
*ALWAYS* consider the impact this is going to have on the child.
- 7 THINK: Am I putting the needs of the child before the rights of the parent?



## 15. Early Help

All children, young people and families in Wales have an entitlement to early help. It is delivered through diverse projects locally and is a universal service. The National Multi-Agency Standard aims to set out a National Offer of the types of services that help children, young people and their families most and the skillsets needed to provide those services. A main theme will be the need to equip all local professionals with early help skills. Services such as Flying Start and the Integrated Family Support Services – see their values in the infographic below - have been crucial in supporting families and keeping children and young people in their family networks rather than children and young people having to come into care unnecessarily. Evaluations of these services will form the basis of our National Multi-Agency Standard which will be extended to say more about the roles all agencies can play in de-escalating worrying situations such as children and young people at risk of school exclusion and children and young people of all ages whose mental health is in decline - both are important current adverse trends.



16. Eyes on the Child – the national Child Safeguarding Standard (included in full in the next section of this paper)

## 17. Corporate Parenting

This Standard will include the commitments in the Welsh Government’s Corporate Parenting Charter and will spell out how multi-agency practice can support delivery of the Charter. Also included will be support to children and young people on the edge of care, including pre-proceedings practice as well as the reunification of children and young people into their family network. The reason for taking a broad approach to corporate parenting in our national Standard reflects the importance of the period before coming into care as well as leaving care, with ‘rights of passage’ into young adulthood.

A lifetime commitment to being a point of contact for care experienced young people is set out, to see how you think this might work. A 'where I live' section covers fostering, adoption and residential care with an emphasis on 'my home,' not on a placement.

18. Missing children and young people (included in full in the next section of this paper)

19. Children with continuing care needs (included in full in the next section of this paper)

20. Practice leadership, practice supervision and practice education

Every action taken by the leaders of children's services should be an act of practice leadership, practice supervision or practice education. This uncludes supporting parental and family leadership. To comply with this Multi-Agency Standard, all business support services must be front-line facing so that business support staff in every agency see themselves as *children's practitioners*. It is important that leaders are linked into the front line in ways that add the most value to practice and to practice improvement. A model of leadership will be set out in this Standard, based on compassionate leadership and other models which support this Framework. Leaders must set cultures and role model those cultures, such as a culture of learning, a culture of urgency, a culture which creates the space to maximise direct work and a culture of friendliness e.g., autism-friendliness, asthma-friendliness. The Standard will reflect best practice across agencies and globally. Children, young people and their families throughout Wales deserve nothing less.

21. Evidence-based practice

This Multi-Agency Standard covers the full range of practice with children in every setting by every statutory agency and also within the third sector as each sector can make a unique contribution to successful evidence-based multi-agency practice. So, in Children's Services, this means assessments, plans, reviews, reports and case-recording. In Health, this covers all roles from nursing, general practice through to specialist care. For Education, this covers all practice and decision-making for children with additional needs. For the Police, this adds into the rationales they use within the National Decision Model as far as decisions about children and young people apply. Evidence about what works also includes feedback from children, young people and families themselves about what has worked for them. This Standard cross-references to relationship-based practice because of the growing evidence base about its positive impact.

22. The Implementation Standard

It is important to pay as much attention to implementing a policy or a Standard as to developing it in the first place. Implementing structural, systemic and practice changes always requires a project plan which is properly organised and resourced, with clear Terms of Reference and clear milestones. The National Multi-Agency Standards must be simultaneously implemented in more than one agency. This places even more emphasis on coherent change management. Lessons from implementation science can help with this, as can understanding how to apply new learning in real life situations and how to embed this learning in multi-agency skill-sets. The National Multi-Agency Standard will set out best practice in implementation science as it applies to the National Practice

Framework.

### 23. Communication, including the mechanics of practice

Children's Services are provided by people to other people, through conversations, in meetings and in written material. Good communication supports children young people and families. Poor communication endangers them. Conversations need to be clear and collaborative, with warm, engaging and honest communication, using plain language, being motivational and putting any fears a child, young person or family might have about engagement with services at rest. This Multi-Agency Standard covers personal attributes such as the need to always show respectful behaviour and to convey hope, optimism and resilience. Likewise, meetings have the power to change lives but in general there are far too many meetings throughout children's services rather than meetings being restricted to those which need a group to make pivotal decisions. At a pivotal meeting, the right people are in the room. Whether a report or a case record, writing needs to be brief, analytical and easy to follow. These mechanics of practice will emphasise how to align the use of professional time with the impacts the individual, team or agency need to produce.

### 24. Manageable workloads (included in full in the next section of this paper)

### 25. Quality assurance, including management oversight and inspections, performance management and improvement

Children's Services carry high levels of risk. The stakes are high for many children, young people and families. Those providing services have a clear accountability to show that the National Practice Framework is being complied with and that services are being effectively overseen. Such quality assurance, inspection and regulation need to take place on a continuous basis inside each organisation without being burdensome and to be externally validated. The methodologies for this need to be standardised so that functions such as performance management and quality assurance operate across Wales to common criteria. Care also needs to be taken to make sure there are not more people watching the work than doing it.

### 26. Line of sight: national, regional and local government through the eyes of a child

Good governance of children's services needs a clear line of sight from senior politicians nationally to the front line locally. Lines of sight are also important within each national, regional and local organisation. Each organisation needs a clearly understood role and remit, otherwise confusion reigns. The governance of children's services in Wales is a complex matrix with many national bodies and partnerships, regional partnerships and local delivery systems. This Multi-Agency Standard will set out how lines of sight around the country can be clear in order to 'drive a straight line through complexity'.

## The 6 draft Standards so far

### The Child-inclusive practice standard

All National Standards are policy-based and are compliant with the Social Services and Well-being (Wales) Act 2014 and all other relevant legislation. Each Standard has its own narrative explanation followed by mandatory multi-agency 'must dos.' Child inclusive refers to practice which is child-led, child- focused and child-centred.

#### Narrative

Children and young people should be at the heart of the services provided for them. They should be included in what is being done in their name. Most children and young people are helped through their families being helped, especially when their parent/s have additional needs as well. Some children and young people need help in their own right, especially if they need protecting or if they are in care. Practice with all children, young people and their families should be strengths-based and motivational, to build capacity and capability whilst at the same time being able to assess and take action about the risks a child or a young person is facing.

Child-inclusive practice means thinking about the child or young person first, in every phone call, every e mail, every conversation, and every visit so that risks such as domestic abuse are viewed through the lens of the child or young person and the impact on them. The child's voice is always the starting point of an assessment or an intervention. A summary of the child or young person's story should be at the front and at the heart of their integrated case record. All practitioners, be they teachers, firefighters or dentists, must think of themselves as *children's practitioners* for the duration of their time with the child or young person. They must be focused on what the child or young person needs, taking their views, wishes and feelings into account.

### Child Inclusive Practice





The child or young person’s story should be summarised on the front page of their integrated case record so that the child or young person can be as effectively supported and protected as possible and so that they do not have to keep repeating their story.

The people who know the child or young person best – their trusted adults – should be at the heart of the assessment and care planning process. Family members should have equal status with professionals, with no hierarchy of importance. Jointly, they are the ‘team around the child.’ The lead practitioner should be a trusted adult. Continuous case holding should be achieved for the child or young person as much as possible. Children in care should have a ‘protected care plan,’ to protect the child or young person against changes of direction announced by a new social worker outside of a structured review process. A ‘protected care plan’ should only be changed at a statutory review.

Child inclusive practice means a radical re-framing of current practice. Here are some examples:

Historic practice	Child-inclusive practice
Recommendations (in a report)	Children’s recommendations (in a report, to court, or recommendations to parent/s on behalf of the child), often requiring changes in their parent’s behaviour for example, rather than using agency phraseology like improvements in parenting capacity
A case plan or a care plan	The child’s (care) plan – which is child-led whenever possible, so the child owns and drives their plan, which takes into account their views wishes and feelings.
Defined contact (between a child and a parent)	A presumption of family time at the child’s discretion unless this is unsafe
Key performance measures	Child and family reported outcomes as well as agency auditing
Reviews organised around the diaries of the invited professionals	No reviews or visits to be held before 4 p.m. so that the child does not miss any lessons in school and is not singled out
Formal language e.g., siblings	Child-friendly language e.g., brothers and sister rather than siblings
An incident-based chronology	A child or family impact chronology should always sit alongside the professional chronology

Multi-agency ‘must dos’ (examples)

1. For each professional to think of themselves as a *children’s practitioner* from the start to the end of their involvement.
2. To govern children’s services collaboratively at all levels of government – local, regional and national.
3. Urgent and inclusive family network meetings must be convened when a child or a young person is at the edge of care, aiming at a family-led plan to avoid an unnecessary admission to care.
4. All agencies have a responsibility to children in care and care leavers because they are in the care of the local state, not just a council. The corporate parenting requirement is to evidence the voice of the child in decision-making, service planning and service delivery in every public agency – ‘nothing about me without me’.



## The Trusted Adults Standard

All National Standards are policy-based and are compliant with the Social Services and Well-being (Wales) Act 2014 and all other relevant legislation. Each Standard has its own narrative explanation followed by mandatory multi-agency 'must dos.'

### Narrative

All babies, children and young people with a care and support need depend upon one or more trusted adults – we all do. Trusted adults are special people, people you are attached to for a short or a long period of time. A basic question in children's services is whether a baby, child or a young person who is at risk or who is vulnerable has a special person looking out for them and looking after them. A tool to identify trusted adults for a baby, child or young person is an ecomap which maps out their risky and protective contacts.

*Children's practitioners* should always be assessing whether a baby, child or young person has a trusted adult, whatever the reason for their involvement. A sign of a baby, child or a young person's worrying detachment from their family and perhaps their school is that they have lost faith and trust in those looking after them. Restorative practice can help a child who is detaching to re-connect, especially with family members - see the NEST infographic below.

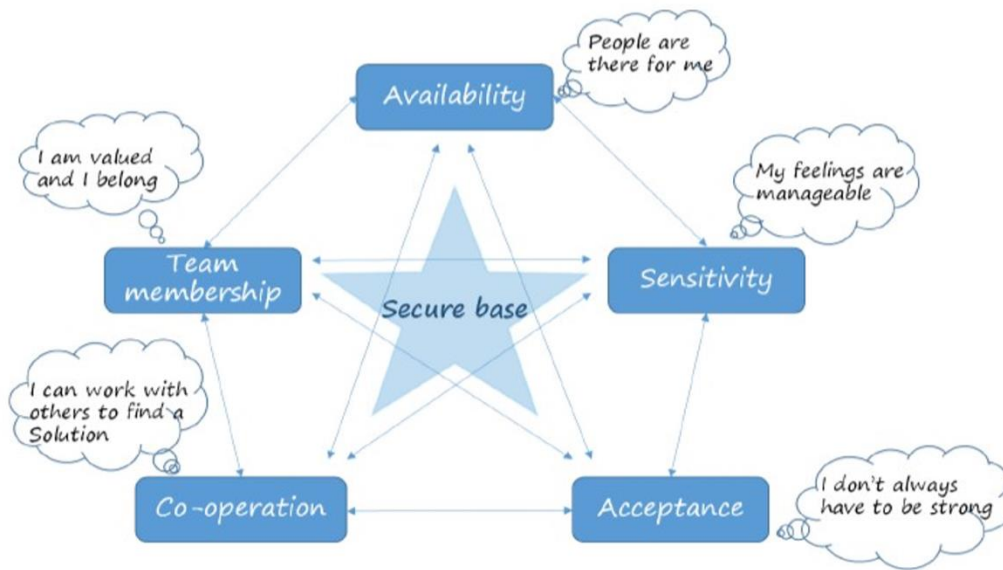


### Trusted adults

- Trusted Adults describes the importance of those closest to the baby, child or young person in supporting their mental health and wellbeing.
- Trusted adults can help babies, children and young people to learn to manage their feelings.
- A trusted adult could be anyone from a family member, youth or playworker, sports coach, teacher, lunchtime supervisor, nurse, councillor and many more. The important thing is that it is the adult the child has chosen to trust and has a relationship with.
- We want to make sure services recognise the importance of trusted adults in children's lives and ensure those adults have access to the help they need to continue to support the child.

A trusted adult is not always the most obvious person in the baby, child or young person's network but, whoever they are, that person needs to be identified and supported, especially if the baby, child or young person is at the edge of care as the trusted adult could be a potential special person (carer) to approach and assess. In early help services, the lead professional can be the person who knows the baby, child or young person best, who understands her or him and who will go to great lengths to make sure they are ok – a professional attachment or connection. Trusted adults provide a baby, child or young person with a secure base – see below. The need for a secure base should be borne in mind in every assessment for a care and support plan. This sits at the heart of relationship-based practice in the National Practice Framework.

## The child's need for a secure base



An increasing number of babies, children and young people at the edge of care or in the care system are experiencing profound emotional turmoil – also called dysregulation. The difficulty they face can reveal itself in troubled and troublesome behaviour. Babies, children and young people without attachments may be forced to make ever greater efforts to find an attachment, including joining gangs who prey on detached young people with the imaginary lure of a safe haven. In supporting these children and young people, efforts should always be made to identify a trusted adult for the baby child or young person at risk to relate to and not to be content to simply find them somewhere to stay. Early permanence is crucial, whatever their age.

Children's rights are fundamental. In the Trusted Adults Standard, the right of a baby, child or young person in care to be helped to find someone they can trust, someone special, is an unchallengeable right. This might be someone special for life or for a short period, depending on the situation and the context. The emphasis in viability assessments and placement finding should be on relational quality for the baby, child or young person, whether in their family network or outside the family. The national shortage of foster carers is a national shortage of trusted adults. The implication is that the

### Multi-agency 'must dos'

1. For each agency to be aware of a baby, child or young person's need for a trusted adult and to actively search for such special people in their role as a *children's practitioner*.
2. For the term 'trusted adult' to be widely used in case recording in each agency when it comes to writing up concerns about a baby, child or young person, as a way of understanding the meaning of their behaviour e.g., the lack of a secure base
3. For training and support to be made available to Trusted Adults who themselves need support to understand the power and significance of the role they can play in the growth and development of babies, children and young people at risk

## Eyes on the child: the Child Safeguarding Standard

All National Standards are policy-based and are compliant with the Social Services and Well-being (Wales) Act 2014 and all other relevant legislation. Each Standard has its own narrative explanation followed by mandatory multi-agency 'must dos.' This Standard is written through the eyes of the child, from a Children's Rights perspective.

### Narrative

*"it's our right to be safeguarded," Sian and Alwyn.*

#### *Eyes on the child and information sharing*

*Start by seeing me, lay eyes on me, to see if I'm ok or if I'm hurting. Come here quickly just in case. Then if you can see I need help, share every possible piece of information you need to keep me safe. Don't worry about my privacy, I want what's happening to me to be exposed, so share everything – that's your clear duty in law. That's your clear duty to me.*

*Don't believe all you hear, be sceptical, ask questions, challenge, be curious, understand what's happening to me*

*My parent/s may not be telling you the truth so don't just accept what you're being told and walk away. Really make sure you find out the truth about me. Find out who lives with me and who is looking after me. You might get a surprise. You have to do this without making my parent/s feel got at. Trust me, you won't get anywhere that way. Somehow, you have to be ruthless about finding out the truth whilst building up their (my parent's) trust so that you might be able to persuade them to look after me better. So don't leave a message on my mum's phone on a Friday afternoon otherwise she'll be worrying all weekend.*

#### *Know your stuff*

*I expect you to know everything there is to know about child safeguarding so that you understand the impact domestic violence, drugs in the house, mental health problems and neglect are having on me. I expect all agencies to know the same and to be using that knowledge in the same way, so it's not confusing for me and for those around me. Some of the things going on in my life are invisible, you have to look really hard to see them. I expect you to do just that.*

*Whatever you decide, it will change my life so make sure you know what you're doing*

*If I look back in 50 years' time, I want to understand why you made these decisions about me. I shall expect to see the evidence and to be sure that I was as involved as I could be for my age in coming to that decision. I want to read what I said back then and how I said it. I want to know you didn't take any risks with my life but that you gave my family every possible chance to keep me safe.*

*What did you actually do?*

*I want to know you're following best practice which is very clear about what you have to do to safeguard me. I want my assessment, my plan, my reviews, my core groups, my case recording, my reports, to be perfect. I want any interventions made to be based upon my assessment and for my case to be properly supervised with management oversight. It's my right that you do this for me. I want you to keep my case open if it needs to be and not to close me prematurely just because you have other work to do. I don't want to be treated differently or better than anyone else but I do want to be treated fairly.*

*Did you work together well and hold each other to account?*

*I will not settle for second best. I don't want any excuses. This is my life we're talking about. If my school are worried about me, social services have to share their concerns. If social services want help from the police, the police must support them. Good partnership working means that a problem for one is a problem for all. Your National Standards talk about no wrong door and no revolving door, so I don't expect to see either of those. I know that working with me and my family can be hard but trust me, you try living here. Please drive each other's standards up, as close to perfection as you can get please.*

#### Multi-agency 'must dos'

1. Compliance with Working Together and the Wales Safeguarding Procedures
2. Absorbing and applying the lessons from all relevant national research, inspection reports and major practice reviews.
3. All meetings held in line with child protection processes should start with the child's story. The child's individual voice, including children of large sibling groups, should consistently feature in all relevant key documentation. (Care Inspectorate Wales, 2023)

## The Missing children and young people Standard

All National Standards are policy-based and are compliant with the Social Services and Well-being (Wales) Act 2014 and all other relevant legislation. Each Standard has its own narrative explanation followed by mandatory multi-agency 'must dos.'

### Narrative

Children and young people who go missing have a clear care and support need. 'Missing' means disappearing from sight deliberately, either to escape from an unhappy situation or to search for a new life. This is very different from a child or young person who goes missing technically but whose whereabouts are known to their parents or carers, including their corporate parent where applicable, who are then able to follow up what has happened themselves as a family or as a family network. They may need advice or help with this but they do not need to share the responsibility.

Our National Multi-Agency Standard concentrates on children and young people who go missing and who are as a result at risk of abuse or exploitation. Our focus is on those children and young people who need multi-agency support to reduce the risks they face from themselves or from others. Children and young people who go missing and who are at risk need professionals to discover where they are with a culture of urgency. A strategy discussion should always take place within 24 hours of a child or a young person going missing.

#### *Technically missing examples*

1. Overstaying at a known address
2. Disobeying a curfew

#### *Missing and at risk examples*

1. Mixing with known criminals
2. Concerns being expressed about the young person's well-being

After being located, children and young people who have been missing and at risk should have a 'safe and well check' and a return interview or de-brief, in order to understand the pressures they faced at the time they went missing, what happened to them during the time they went missing and what needs to be done to prevent any further missing episodes which put them at risk. This involves listening to their story and trying to understand the meaning of their behaviour without being judgmental. Return home interviews should be carried out within 72 hours either face to face or via a virtual platform chosen by the child or young person. The child or young person should be happy with the interviewer who is preferably someone they know already and can relate to. A care and support plan should be considered. A multi-agency risk assessment tool might be needed.

For the most vulnerable children and young people, concerns are that they might be lured into situations where they are exploited, usually criminally or sexually: or where their already fragile mental health might deteriorate; or where they become more progressively detached and isolated. The same principles of care and support apply to these children and young people, the only difference being support will often need to be enhanced and multi-agency. For example, the police may need to disrupt any criminal network targeting the child or young person. Education may need to dismantle barriers if the child or young person's care and support plan includes better integration

into their school or college. Health may need to waive a policy of no service without a prior assessment if a child or young person needs an urgent pre-diagnostic service. Housing may need to be flexible if alternative accommodation is needed to protect a young person.

The multi-agency response should be driven by the child or young person's timescale. Some children and young people can be helped by being supported to draw up a personal safety plan, which is in their language and which they are confident they can put into practice over a period. Other children and young people may need to be extracted from a dangerous situation in which their well-being is under immediate threat, for example if they are being recruited into an organised crime group threatening violence.

All actions must flow from a risk assessment, which should be carried out by those with parental responsibility for the child or young person, be they a parent or a local authority if a child or young person is in care. Other agencies should support the risk assessments being carried out by the child or the young person's main carer. The views of the child or young person about the risks they face must be included so that the risk classification is led by their lived experience.

For children and young people who go missing repeatedly, it can help if a recent photo and profile can be readily available to searchers including guidance on assertive discovery and instructions about what to do when the child or young person is found. This can also help the child or young person as it means those in touch with them will not have to ask them to repeat their story every time. Sharing information between agencies is important and must not be compromised by data protection concerns – safeguarding a young person has a clear priority in law. It is best to include this practice in a local protocol such as the Philomena protocol developed by the police and the local authority, locally or regionally.

Finally, try to understand the root cause of why a child or young person goes missing. Children and young people cannot always express their pain, at least until they feel safe and cared for. It can be difficult to picture what may have happened to them, especially if their behaviour is overtly challenging. Practitioners should use their core skills such as active listening, motivational interviewing and professional curiosity. Parent and carers should show concern and above all else – love.

#### Multi-agency 'must dos'

1. Any agency can trigger a strategy discussion in respect of a child or young person who goes repeatedly missing.
2. A local authority safeguarding professional must be appointed as the 'Missing' co-ordinator and point of contact in the local area. They must oversee compliance with this National Standard.
3. All Local Authorities and Police and Crime Commissioners must use the national commissioning framework service specification when commissioning independent local return interview services, in order to guarantee consistency.
4. A return interview must take place on the first occasion a child or young person goes missing, then after subsequent missing episodes.
5. Return home interviews should usually be carried out by a trained and supervised professional, with the 'Missing' Co-ordinator overseeing the recruitment and training to a pool of suitable interviewers.
6. Regional Safeguarding Boards should collate data annually on missing children and young people to feed back into practice improvement and service development.



## The Continuing Care Standard

All National Standards are policy-based and are compliant with the Social Services and Well-being (Wales) Act 2014 and all other relevant legislation. Each Standard has its own narrative explanation followed by mandatory multi-agency 'must dos'

### Narrative

The 2020 Cabinet Written Statement sets out the position which must be followed and is reproduced below. It should be read alongside 'The Children and Young People's Continuing Care Guidance (January 2020)

If a child or young person is found to be eligible for children and young people's continuing care, I expect agencies such as health, education and social services are to work together to ensure that there are no gaps in meeting those assessed individual's needs. Services provided as part of the package for children and young people with continuing care needs will be arranged by the Local Health Board, local authorities and their partners as appropriate, enabling the child or young person to function optimally within their family, community, education or care setting. It is vital the child or young person's needs are at the heart of the process.

Provision of services should not be delayed by issues around who will pay for aspects of those services and I expect all parties to consider the use of pooled budgets where possible.

This revised and updated guidance not only takes account of legislative changes in recent years in Wales but is also intended to facilitate effective and timely decision making.

*Vaughan Gething AM, Minister for Health and Social Services (March 2020)*

Children and young people eligible for continuing needs will always have the most complex health and care needs in their local area. Their needs are likely to be associated with mental health, learning disability, neuro-developmental disorders and challenging behaviours because of emotional dysregulation. Invariably, professionals will encounter difficulties in meeting children and young people's needs and will have to work harder together. Having said that, local statutory bodies must not dispute eligibility but must assume a joint responsibility and a continuing liability when a child or a young person meets this threshold. A working definition of this threshold is those children and young people who have a sustained high impact on the local health and care system at any given point in time.

Joint responsibility means that a challenge for one public body is a challenge for all, with each showing a readiness to play their part in the care and support package. No public body should withdraw without having satisfied themselves they cannot help and without the agreement of their partners. At many times, all will need to use their inherent jurisdiction as a basis for giving a particular child or young person priority. The mechanism needed for deploying resources at a critical point in time is daily check-ins through established points of contact who form the 'team around the situation'.

Creating the conditions to operate this model flexibly is a pre-requisite of meeting this Multi-Agency Standard. This requires the most senior leaders in the local area to understand this Multi-Agency Standard and to empower their staff to live by it. Points of contact for the child or young person in question need to be given the delegated authority to think outside the box to care for, help and protect the child or young person. For example, in health, this means de-medicalising concerns and not erecting a barrier of 'nothing without a diagnosis.' Pre-diagnostic services are the norm in the highest risk situations. Agencies should avoid bouncing, however tempting this is – all players must remain in the ring for the duration of these emergency situations.

Joint working means a joint assessment, a joint plan which is constantly updated, no unilateral withdrawal by any single body – and joint funding. On funding, the presumption is that in these small number of situations, both health and social services will be making a financial contribution and other bodies will be making a contribution in-kind. Examples of a contribution in-kind are deploying practitioners or use of a building. Settling-up comes after the event, when partners should determine the percentage of the total cost of the intervention each should pay. This can never be an exact science so the same principles of flexibility and a shared approach to difficulty should prevail.

#### Multi-agency 'must dos'

1. Each child or young person with the most complex health and care needs in their local area must be subject to joint case management, with one statutory partner in the lead role.
2. The Continuing Care Pathway set out in the guidance referenced above must be followed.
3. Each statutory partner must create the conditions for operating this Multi-Agency Standard internally and then across the whole system - locally, regionally and nationally.
4. The relevant public bodies working together must ensure there is no 'cliff edge' of the package of care on a young person's 18<sup>th</sup> birthday if their needs continue at a high level.
5. The people who know the child best and any trusted adult or adults they are attached to must be included in the 'team around the situation.'
6. Relevant information must be shared across public bodies – the need to care for or to protect a child or a young person always allows for full information sharing. Information sharing in these circumstances is a safeguarding priority, not a data protection priority.
7. Each public body must ensure its staff understand their role in putting this Standard in practice as 'the way we work in Wales'



## The Manageable workloads Standard

All National Standards are policy-based and are compliant with the Social Services and Well-being (Wales) Act 2014 and all other relevant legislation. Each Standard has its own narrative explanation followed by mandatory multi-agency 'must dos.'

### Narrative

Delays, waiting lists and insufficient professional time to meet the care and support needs of all children, young people and their families is a likely scenario for some years to come, especially with rising demand. It is important to be honest about this, whilst taking every possible step to meet every need and continuously demonstrating improvements in performance.

Most children's services professionals work more hours than they are paid for because it is often impossible to do what needs to be done in the time allocated. It is essential that workloads are kept within manageable limits for individuals. Their employing organisation must take steps as far as they can to increase the resource level, either permanently or temporarily, in order to meet any significant need in the local community which cannot be met. It is also an obligation on agencies to take every step they can to reduce bureaucracy to the irreducible minimum and to ensure that staff numbers away from the front line are also kept to the safe minimum, to avoid the scenario where there are more professionals watching the work than doing it. The requirement to reduce unnecessary burdens applies to national, regional and local bodies and agencies.

A children's services caseload or workload brings with it simultaneous requirements. It contains numerous statutory responsibilities which must be discharged. It can involve protecting a small number of children and young people at risk. It can involve supporting young people to leave care with hope and resources for their future. It can involve motivating family members to change their lives in a big way, to keep children and young people safe. Children's social care workers also need protecting from some of the known consequences of over-work. Cumulative stress and secondary trauma are two.

Systemic supports are important. The first is good supervision, from a knowledgeable and trustworthy supervisor. The second is to be in an organisation where risk is shared at all levels, so that no practitioner feels alone with complex casework. The third is for support services like HR to be front-line facing and to take steps to create the conditions in the workplace and in the environment for manageable workloads.

The best caseload or workload limit is that set by an individual worker in discussion with their line manager about their own ceiling, the point beyond which they cannot safely go. A personal limit can only be self-defined with help from a supportive manager. Sometimes individuals must be protected from themselves. A personal ceiling can vary from time to time as factors outside work have a bearing and sometimes an individual case (child, young person or family) can seem low impact on paper but can be highly impactful on the caseworker. Having the opportunity to set a personal limit is a sign of positive self-regulation and a high-trust culture. High-trust cultures support personal happiness and increased productivity.

This Standard on manageable workloads makes certain assumptions which are borne out by scrutiny of individual practice. The first is the commitment and passion of staff whose working life is

spent on trying to help children, young people and their families. Their employing organisations can help to maintain a high level of purpose by keeping practitioners in touch with the values they started out with and allowing them to express those values in their work. The second assumption is that if agencies develop more time-efficient practice models, practitioners are usually happy to change their working practices to release more time for direct work with children and families.

Creating the conditions for manageable workloads is in the interests of their employing organisations. Doing this well can improve staff retention and decrease sickness absence through stress. It can support continuous case holding by a stable permanent staff team or workforce. This in turn reduces instability and churn for children, young people and their families. Manageable workloads have a system-wide positive impact on those receiving and providing services.

The pressures across children's services oblige all agencies to work well together and to establish a culture of positive partnership working. Many children, young people and families need a carefully planned and synchronised multi-agency service. Professionals chasing each other to play their part wastes valuable time that could be spent on direct work or on another child and family needing help. Of course, some delays and blockages are beyond the ability of the individuals concerned to unblock so their agencies must be ready to intervene to do it. National and regional bodies must play their part in this freeing up whenever and wherever they can, using strategies like digitisation.

Pressure in the system means that many needs are triaged and then allocated a priority and added to a waiting list. Space must always be left to allocate urgent priority cases to a practitioner, by removing lower priority work for a while. Whilst this is undesirable and whilst it should never be regarded as a permanent arrangement, it is important to stay in regular touch with children and families on waiting lists so as to understand the lived experience of the children and young people concerned and to be ready to change their priority if circumstances dictate that. Skills in triaging help to improve the overall standard of assessing and to act as a brake against premature closure of a concern.

Finally, child inclusive practice requires the whole children's services workforce to work to a high standard of practice, considering the high stakes for individual children and young people. Workers must give of themselves several times every day, often when they are tired and preoccupied and when they must be on top form because for the child, young person or family, this may be their first, last and only chance of being heard. The main task of agencies is to create the conditions to make this possible for front-line staff to do well.

#### Multi-agency must dos

1. All agencies should be aware of the workload pressures on their staff team as a whole and on individual workers who may be in crisis at any point in time.
2. That 'a problem for one is a problem for all,' which means agencies must support each other with their top priority at any point in time even if it sits outside of eligibility criteria but inside the law.
3. Agencies must plan to grow or shrink together, not unilaterally. Changes in the level of service in one agency will often impact on other agencies. Planning must be joint and co-ordinated.
4. Agencies must put in place an effective quality assurance model which demonstrates good practice leadership and good supervision outcomes.

Finally, here are 5 open questions we are seeking views about in the engagement process. We have limited these to 5 in recognition of how busy everyone is and so that we can receive the maximum number of responses possible.

**QUESTION 1.**

What difference can the National Practice Framework make for children, young people, their families and their communities?

**QUESTION 2.**

Which changes would you like to see to the draft, including the need for longer standards with more explanation and referencing without losing impact?

**QUESTION 3.**

How can child first, relationship-based multi-agency practice be strengthened?

**QUESTION 4.**

How can implementation of the Standards be supported?

**QUESTION 5.**

Which metrics and processes should be developed to measure the impact and outcomes of the National Practice Framework for children, young people and their families?