



Cheshire East

TOGETHER for Children and Young People

Together we will make Cheshire East a great place to be young

Step Up / Step Down Policy

Receiving the Right Help at the Right Time

Children's Social Care & Early Help services

(a guide for all practitioners including multi agency partners)

December 2024



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Executive Summary

This policy outlines the process for stepping cases up to Children's Social Care, where the level of need and/or risk has increased, and for stepping cases down to the wider Early Help services within the Local Authority and across the partnerships, where risk and need has reduced no longer requiring targeted services. The aim is to ensure families are supported at the lowest level of intervention as appropriate, and where the level of risk or need reduces or increases, the transition is managed effectively¹.

Restorative Practice

In Cheshire East we have adopted restorative practices when we support children and families. This model is based on relational practice that encourages practitioners working with children and their families to build relationships, seeking to understand their perspectives and working with them to build on their strengths, empowering them to better manage the risks and challenges they may face now and in the future. In the workplace teams work in an environment where reflection and mutual respect underpins working relationships, and where restorative approaches are used to challenge.

1. Purpose, Scope, Aims and Vision

- 1.1 The interface between Early Help Services and Children's Social Care is an essential component to ensuring that children, young people and families receive the right help at the right time. The pathways between these services play a vital role in safeguarding all children, regardless of their situation within the [Cheshire East's Thresholds of Need](#).
- 1.2 The pathways between the thresholds of need, particularly the interface between Targeted Help Lower Tier (Early Help) and Targeted Help Upper Tier (CIN and CWD) must be simple and seamless with roles, responsibilities and lines of accountability explicit and with clear management oversight recorded. Equally the pathway to Statutory intervention at Child Protection level needs to be well understood, robust and swift to avoid any delay.
- 1.3 This policy details what is required of staff within the Children's Social Care and the Early Help multi-agency workforce. It includes the whole of Children's Services and all partners who may be involved in Early Help.

Early Help Levels

- Targeted Lower Tier (these may be led by the Local Authority Family Help Service or partners)
- Extra Help (agency response, typically led by education, health and community partners)

¹ While changes in Working Together 2023 enable alternatively qualified staff to support families under Section 17, these permissions are not yet being utilised, this policy will be updated if this changes.

- 1.4 Decision-making should always be child and family focused. The child's needs should be kept paramount. The policy should be used alongside the revised [multi-agency threshold of need document](#), launched in July 2023, to map out the current strengths but also areas of concern to identify the appropriate level of support required.
- 1.5 Safeguarding procedures will always remain paramount. If a child is at risk, or believed to be at risk, individual safeguarding procedures must be followed, and Cheshire East Consultation Service (ChECS) must be contacted without delay.
 - Contact ChECS on 0300 123 5012 Option 3, Option 2
 - Out of office hours 17:00-08:30am Mon-Thurs, 16:30 Friday Please call our Emergency Duty Team on 0300 123 5022.
- 1.6 The [Multi-Agency Assessment Toolkit](#), which contains the approved screening tools used across Cheshire East, has been developed to support practitioners within the partnership to undertake effective assessments that enable them to accurately identify children, young people and their families in need of extra or targeted lower tier help or onward referral to Children's Social Care.
- 1.7 The tools included should also be used to review the effectiveness of the support plans that are in place and the outcomes for the child/ren to ensure effective support and intervention is being provided. Plans should use the SMART principles (Specific, Measurable, Achievable, Realistic and Timely).
- 1.8 They should be revisited regularly to assess impact and identify where plans need to change.
- 1.9 They can be used to support escalation, but this shouldn't be the only time they are utilised. Please submit your screening tool when you are contacting the Integrated Front Door to support your rationale for escalation and to aid decision making.
- 1.10 Using the Extra Help and Targeted Help assessment and planning tools at the earliest opportunity will hopefully support positive outcomes for children, meaning onward referral to Children's Social Care may not be required. However, should a case need to be referred, professionals will be expected to evidence why a threshold has been met despite appropriate intervention and reflective review.

2. Children's Social Care to Early Help Step Down Pathways

- 2.1 The Step-Down Pathways from Children's Social Care to Early Help services have been developed to promote both consistency and clarity of practice across the continuum. They seek to recognise that children and families are more likely to engage and respond to support, working with professionals to improve outcomes, where they already have a positive relationship with the professional and understand the worries held. Relationships are key to effective help and support to achieve improved outcomes.

- 2.2 The Step-Down Pathways enable practitioners across Children's Social Care and Early Help services to work together to ensure that families receive the right help at the right time and, when it is no longer appropriate that a social worker is involved but some continued support is required, there is appropriate support available. This may be delivered by the wider Multi-Agency Early Help partnership referred to as Extra Help (educational settings, health providers, voluntary, charity, faith sector and others) or, where more targeted intervention is required, via the Local Authority resource across our family hub services (e.g portage, home learning, or group activities and support) and/or Family Help services.
- 2.3 Effective step down helps to ensure that families do not remain open to statutory intervention longer than necessary and helps to ensure that needs are met, and outcomes improved at an early help level which reduces the risk for cases needing to step back up. It also ensures children, and their families, are supported to transfer from one part of the system to another in a planned way.
- 2.4 The Step-Down Pathways have been split into two specific sections to reflect key differences for step down from Children's Social Care to an Early Help professional where families will benefit from continued support:
 - Step down from a Children and Families Assessment
 - Step down from a Child in Need Plan

3. Step Down from Children and Families (C&F) Assessment Principles and Practice Expectations

- 3.1 C&F Assessment completed, management oversight in supervision to step down for further support, with family's consent (as part of family led decision making, doing with, not to). The conclusion of C&F Assessment includes a recommended action/safety plan of support for either Early Help or multi-agency partners (referred to as extra help). Where step down is to Early Help (targeted lower tier) the plan is developed at the Family Help meeting with the family and where appropriate the child/young person.
 - Allocated social worker completes C&F Assessment and the family consent to ongoing support.
 - Team Manager authorises assessment and agrees decision to step down to an appropriate Early Help Service and final supervision records the decision to step down.
 - Social worker identifies and discusses with, where possible, who in the current professional network or able to provide the relevant services is most appropriate to act as lead professional at either a Targeted Lower Tier level or Extra Help level. These services will have been identified as part of the holistic assessment and detailed in the conclusion of the C&F Assessment.
 - Consideration should always be made as to whether the family require support over and above universal response.
 - Assessment analysis should make clear recommendations that must include

- a clear outline of tasks/interventions that need to be actioned
- contingency plan if the family fail to engage post step down
- Allocated social worker seeks to ensure that all relevant professionals including the family, consent and agree to engage in and lead on the co-ordination of support moving forward.
- There should be a handover visit or meeting with both the family and all professionals remaining involved to agree and finalise the plans required. Families should be supported to lead these discussions to understand what will help and support them effectively. Agreeing the actions and support required utilising the SMART principles.
- Where there is no clearly identified lead professional or the relevant professional is not already involved with the family i.e. Family Help worker or other professional, the allocated social worker will confirm step down with their manager and complete the EHM form to request the step down through the Partnership Family Help Team (PFHT). This will then be reviewed by a PFHT Officer who will review the information and invite the allocated social worker, and other multi-agency professionals where necessary, to a Joint Allocation Meeting. In this forum there will be a discussion around the actions identified from the C&F assessment, the appropriate level of support will be confirmed along with the lead professional.
- This needs to be actioned within 5 working days of the decision to stepdown following supervision as we do not want delay in intervention for the family as this could lead to drift, non-engagement or increased risk.
- Where appropriate the identified lead professional can request support from the partnership family help officer regarding process, guidance and support.
- If there is a suitable professional already involved with the family whilst the C&F Assessment is underway, but they refuse to take on the lead role at an Early Help level, practical support for the professional can be accessed via the Partnership Family Help Officers. If they continue to refuse and there are no justified grounds to do so and as a result, they are not fulfilling their safeguarding responsibilities, then the [Escalation Policy](#) should be followed as necessary by the social care team manager in the first instance.

3.2 Handover from Children's Social Care to Early Help and formal transfer of case responsibility:

- Best practice would denote that within five working days of the step down been agreed and the new lead person identified, a joint visit between the Social Worker and newly allocated Early Help practitioner from either the partnership or Local Authority services should take place with the family. The sharing of the C&F Assessment and recommendations for the Early Help Plan should already have been shared before this visit. Whilst this is best practice, and there are many benefits to a face-to-face joint visit at handover to reduce the risk of non-engagement and potential re-escalation, it has to be recognised that this won't always be possible, and the early help intervention shouldn't be delayed or paused as a result of this not taking place.

4. Step Down from Child in Need Plan Principles and Practice Expectations

- 4.1 Child in Need meeting confirms plan for step down with families consent at the next meeting:
- Team Manager confirms decision to step down in supervision and records this on the child's record
- 4.2 As soon after the penultimate Child in Need meeting as possible, a Lead Person to take forward the Early Help intervention should be identified from professionals already involved in the current plan or where appropriate a Family Help Worker.
- The Social Worker is expected to have discussions with the family network and involved professionals regarding the Lead Person role. Consideration should be given regarding who is best placed to lead on the intervention required. The family view on this is imperative as early help intervention is consent based.
 - The [Thresholds of Need document](#) should be referred to inform whether the ongoing support sits at 'Extra Help' (led by the wider multi agency partnership) or Targeted lower tier support which could be with the LA Family Help Team or a partner dependant on the needs of the family.
 - Consideration should always be made as to whether the family needs can be met via universal services.
 - Where there is no agreement or resolution cannot be achieved regarding a Lead Person from within the current membership of the Child in Need planning process, and it is appropriate for a member of those involved to lead and this may be the family's wish, the social worker will discuss with their team manager who will then pick the matter up with the line manager of the professional to try and resolve.
 - Further disagreement will result in following the [Escalation Policy](#) if the reasons for not leading are not justified and there is evidence, they are not fulfilling their safeguarding responsibilities.
 - Where appropriate, the identified lead can seek advice and practical support via the LA Partnership Family Help Officers.
- 4.3 Assumed "bottom lines" for families that are being stepped down from social care to both the partnership Early Help offer as well as the LA Family Help:
- Authorised C&F Assessment
 - Appropriate screening tools have been completed to inform the step down e.g. GCP 2 where neglect has been a concern.
 - Clear plan of intervention for lead worker to co-ordinate
 - Visit to family recorded within the last 4 weeks.
 - Record that the family have been spoken to and agree with support from Early Help services
 - Plan has been reviewed and updated within the last 4 weeks.

- Summary of Reasons for step down and interventions completed so far including by whom.
- Is there a need for a contingency plan if parents withdraw consent?
- Date of the final CIN meeting shared to ensure appropriate attendance.

There is an expectation that the identified Lead Person attends the final Child in Need meeting. If not possible, then a final handover visit is to take place to the family between the Social Worker and the Lead Person.

- 4.4 All the above information should be shared by the social worker with the lead practitioner.
- 4.5 Once the step down from either route has been agreed – the transfer to Ecaf form should be completed, this will be reviewed and once accepted a confirmation email sent to the social work manager, social worker and identified lead practitioner

5. Step Up Pathways

- 5.1 The Step-Up to Children's Social Care Pathways enable practitioners who recognise and can evidence that needs have escalated and meet the threshold for Upper Tier Targeted Support (CIN) or Statutory intervention (CP), they are reviewed in a timely and robust way to ensure the child, young person and family receives the right help at the right time.
- 5.2 The Step-Up Pathways have been split into two sections to reflect key triggers for step up from Early Help case management to Children's Social Care:
- Step up- Immediate safeguarding led pathway
 - Families already open to Early Help services

6. Step Up – Immediate Safeguarding-Led Pathway

- 6.1 The family may be open to Early Help services or in some cases in receipt of universal services and a trigger event occurs.
- 6.2 The trigger incident could relate to a child or a parent, for example a child presenting with a potential unexplained injury or a significant incident of domestic abuse.
- 6.3 Referrer clarifies details and context of potential incident, considering the significance of the incident, the impact upon the child, and the impact upon the capacity of the parent to protect the child.
- 6.4 Any allegation of injury to a child should have clarification as to whether this is accompanied by a disclosure or not.
- 6.5 The referrer must contact ChECS immediately by telephone. Completing a

portal form in this instance is not appropriate. If the referrer is not also the lead professional of an open Early Help Plan but they know one is in place, they should inform the lead professional too following the contact with ChECS so a risk assessment can be carried out. There may be other professionals that were due to go and visit the family and this may no longer be appropriate or safe depending on the circumstances so this information sharing across the professional network is really important.

6.6 If threshold has been met for intervention via Children's Social Care (CSC), ChECS will create a referral and pass through to the area team within two hours. The Child in Need/Child Protection team will make a decision regarding a S17 or S47 response.

- CSC Duty Team Manager to decide whether an urgent Strategy Discussion is required or if an initial joint CSC/Early Help visit is the immediate next step; this should take place the same day.
- CSC Duty Team Manager to allocate Duty/Lead Social Worker to complete the joint response.
- C&F Assessment to be completed as appropriate
- Expectation that the Lead Person of an existing Early Help Plan remains involved for approximately four weeks or until the C&F assessment is completed, and a decision made about future intervention. Cases will not be closed automatically at the 4-week mark if the C&F assessment is still ongoing. This is to ensure a seamless transition back to Early Help services where the C&F Assessment does not result in further social care intervention. However, a mutual decision can be made to close within the assessment period should there be clear indicators that the family will remain at children's social care level and ongoing intervention will be picked up by their services instead. Early Help services should be proactive in understanding what their role is within this assessment period to ensure ongoing visiting and intervention is carried out at this crucial time.

7. Step Up – Families already open to Early Help Services

7.1 Open case to an Early Help service and there is evidence that the plan is not keeping the child safe from harm and there are identified lack of improved outcomes despite best efforts

- The Lead Person should discuss concerns and rationale for step up with their supervisor during supervision (planned case file supervision or ad hoc supervision as appropriate) and where appropriate plan a multi-agency professionals meeting to discuss the concerns with those involved to establish the impact and the lack of progress is having upon the child/ren.
- Ideally, but not in all cases, there should have been Early Help Services intervention for a minimum of three months and there will be clear and effective management oversight.
- The professional looking to step a case up should have completed relevant screening tools and reviews where appropriate as part of their intervention to evidence the lack of progress.

- A chronology detailing attempts made to engage the family, which evidence-based assessment tool have been utilised and what impact this failure to progress has upon the child should be recorded and shared as part of the referral
- There should also be evidence that the family has been advised of the referral to Children's Services where this occurs (case note or letter to the family as evidence in the chronology)
- Where these points have been satisfied and there are concerns where the lead agency feels that the threshold for children's Social Care is met and the child/ren are likely to be impaired, or further impaired, in their health or developmental needs, a phone call to ChECS should be completed by non-Local Authority staff. Local Authority staff will open a ChECS contact followed up by a phone call.

7.2 If threshold is agreed by ChECS, the referral will be sent to the relevant CIN/CP/CWD team within 24 hours.

7.3 Children and Families Assessment to be completed.

- The C&F Assessment should be completed within an agreed time, not to exceed 45 days, recorded in supervision and recorded on the child's records.
- As per point 3.6, the Lead Person should remain involved during this time whilst the assessment is completed, and a decision is made about future intervention but through mutual agreement, may end their involvement prior to the assessment concluding. This is to ensure a seamless transition back to Early Help services where the C&F does not result in further social care intervention.

Appendices

Appendix 1 – Policy Information Sheet

Policy Information Sheet	
Service Area	Children’s Social Care and Family Help
Date effective from	January 2025
Sponsor / Document Owner	Head of Service CIN/CP and Head of Service Family Help and Domestic Abuse
Date for review	January 2027
Status <ul style="list-style-type: none"> • Mandatory (all staff named must adhere to policy/procedure) • Optional (procedures and practice guidance can vary between teams) 	Mandatory
Target Audience	All Integrated Children’s Services staff All partner agencies
Related Document(s)	Pan Cheshire Multi Agency Escalation Policy – see CESCP website Multi-Agency Thresholds of Need
Superseded Documents	Step Up/Step Down Policy November 2022
Equality Impact Assessment	
Date of Approval	

Type of Document	Policy	X	Standard Operating Procedure		Guidance / Other	
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Document control

Version no	Type of change	Date	Description of change

If you have any comments or views on this document, please contact us at childrensdevelopmentandpartnerships@cheshireeast.gov.uk

Appendix 2 – EIA information and checklist

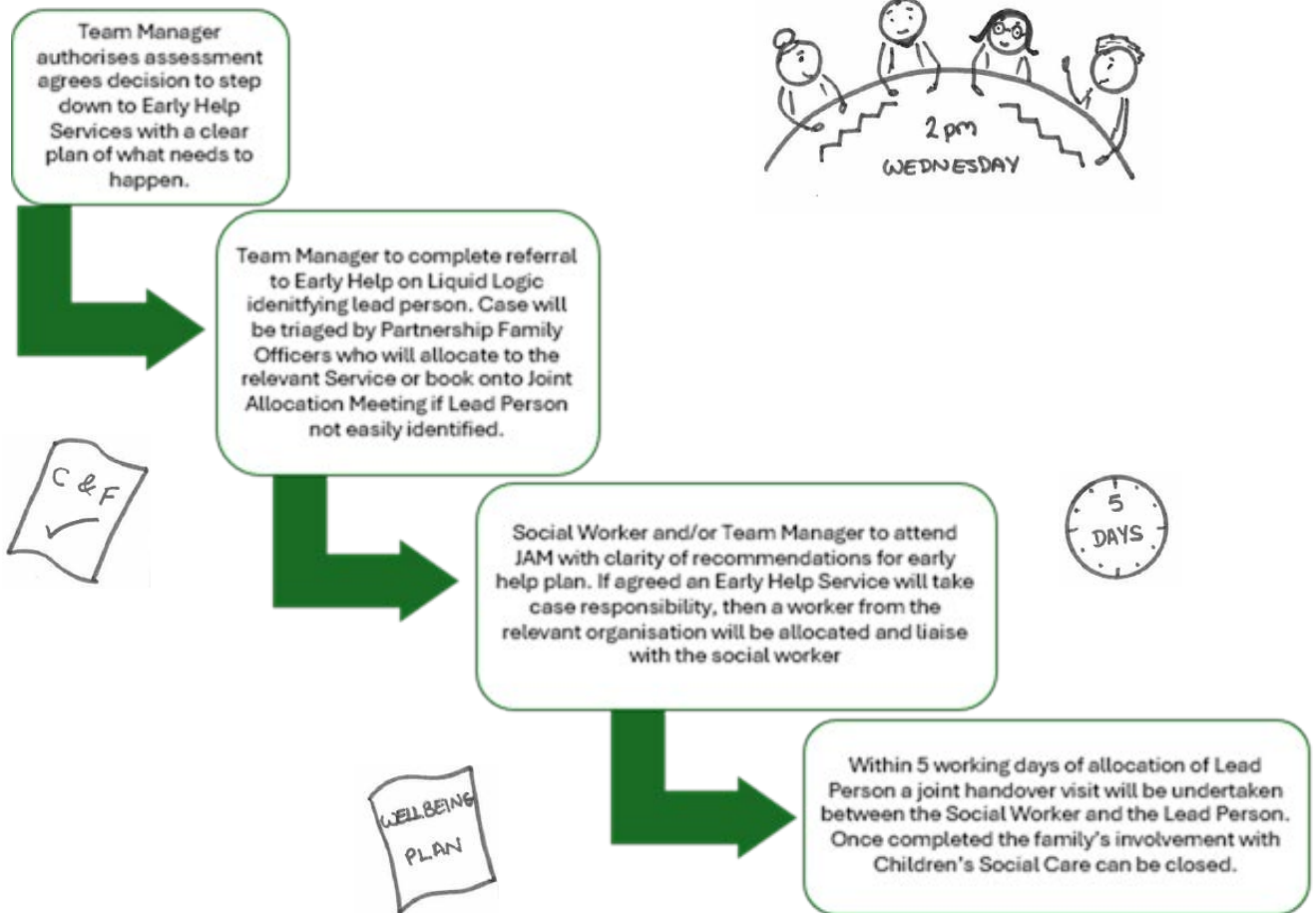
Equality Impact Assessments

Equality Impact Assessments (EIAs) must be completed whenever you plan, change, or remove a service, policy or function. They should be an **integral** part of continuous service planning and policy development. For further details and guidance on completing EIAs please see here on centranet: [Complete an Equality Impact Assessment](#).

EIA Checklist

Equality Impact Assessment			
1	Does the policy/guidance affect one group less or more favourably than another on the basis of:	Yes/No	Comments
	Race	NO	
	Ethnic origins (including gypsies and travellers)	NO	
	Nationality	NO	
	Gender	NO	
	Culture	NO	
	Religion or belief	NO	
	Sexual orientation including lesbian, gay and bisexual people	NO	
	Age	YES	Service is for children aged 0-18 (18-25 for SEND)
	Disability-learning disabilities, physical disability, sensory impairment and mental health problems	NO	
2	Is there any evidence that some groups are affected differently?	NO	
	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	YES	
3	Is the impact of the policy/guidance likely to be negative?	NO	
a	If yes can the impact be avoided?	N/A	
b	What alternatives are there to achieving the policy / guidance without the impact?	N/A	
c	Can we reduce the impact by taking different action	N/A	
4	Evidence considered – What data or other information have you used to evaluate if this policy is likely to have a positive or an adverse impact upon protected groups when implemented?	YES	For us to complete the policy we looked what power Bi reports are reporting on and how they could be used in the future
5	Initial consultation – Have you consulted staff representatives and/or external representatives including those from protected groups? What were their views?	YES	Team managers in both family help and social care have been consulted to understand the barriers/challenges to inform what would work best in practice
6	Promoting equality – Does this policy have a positive impact on equality? What evidence is there to support this? Could it do more?	YES	Policy is used holistically and should not have an adverse impact on any protected group

Appendix 3 - Step Down From C&F Assessment:



Appendix 4 - Step Down from CIN Plan:



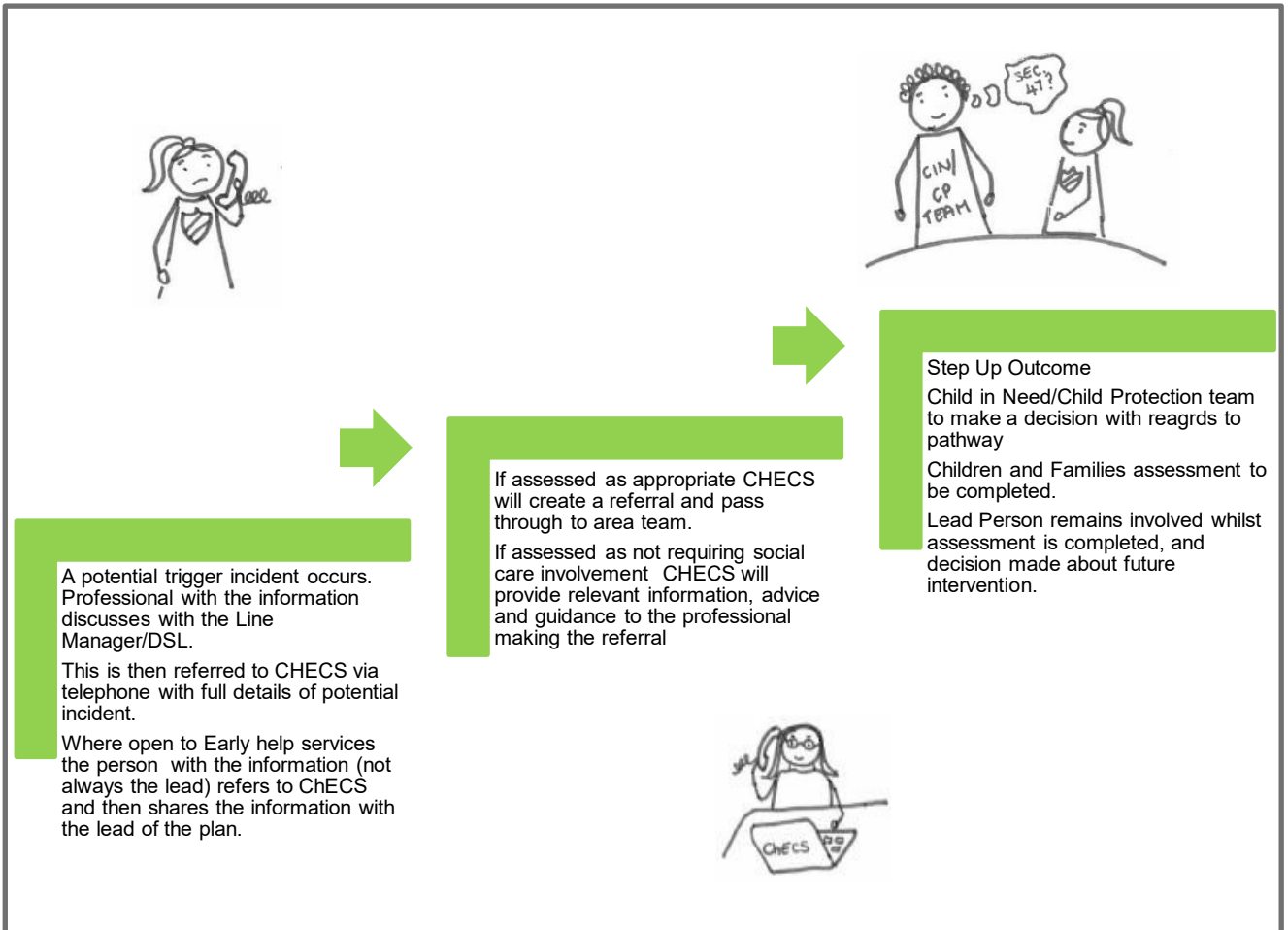
Decision made that case should step down to Early Help Services in the penultimate multi-agency Child in Need meeting. Social Worker supervision record confirms decision. Lead Person should be identified prior to the final Child in Need meeting. Social worker to have discussions with the family network and involved professionals regarding lead person role.

Case will be triaged by Partnership Family Help Officers who will allocate to the relevant Service or book onto Joint Allocation Meeting if lead agency not identified.
Case is discussed at JAM with Social Worker/Team Manager in attendance.



Good practice would mean that a final handover meeting takes place between the Social Worker and Lead Person with the family. Once completed the family's involvement with Children's Social Care can be closed.

Appendix 5 - Step Up – Immediate Safeguarding-Led Pathway:



Appendix 6 - Step Up – Families already open to Early Help

