



Step Up Step Down Protocol

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1. Key Principles

The principles of the 'Step Up' / 'Step Down' protocol are:

- ↘ Children's needs are met at the lowest appropriate level of intervention.
- ↘ Children's needs are responded to in a timely, proportionate and co-ordinated way.
- ↘ Having gained family consent, information and assessment findings are transferable across services.
- ↘ Effective coordination and communication between agencies.
- ↘ Planned and seamless transition. Handover is timely and there is a prompt response by all; such as early help professionals and children's social work professionals.
- ↘ There are clear roles, responsibilities and accountability for all professionals involved; families understand their responsibilities and agree the interventions.
- ↘ Assessment and planning is not duplicated.
- ↘ The child and family story is not unnecessarily repeated.
- ↘ The 'Step Up' and 'Step Down' process is acted upon in a timely manner and there is no gap in service provision to families. This protocol ensures that families do not 'bounce' between Children's Social Care and early help services.
- ↘ Children are held safely in the transition from one service/step to another.
- ↘ Professionals are open, explicit and transparent when there is need to resolve disagreement or professional conflict. (See protocol for Resolving Professional Differences in Work Relating to the Safety of Children).

2. Summary

This protocol describes the application of 'Step Up' and 'Step Down' mechanisms across Somerset to ensure a seamless journey for children, young people and their families through services.

The term 'Step Up' and 'Step Down' is commonly used to describe children moving between levels of need and is used to describe the process by which a child's needs change.

This requires all professionals working with children; young people and their families to be familiar with the approach so that if and when a child's needs change due to a reduced or increased level of need, that these children do not fall between services. Instead, children are held safely in the transition from one service or step to another while maintaining a strong emphasis on a strengths based approach to working with families to help them identify solutions as to the challenges and problems they face.

- Early help should happen as soon as possible when difficulties emerge in order to prevent problems from becoming entrenched or escalating.
- Early help is underpinned with Universal Services to identify the need for support at an early stage for those families who may need it.

- The development of an effective early help offer is the responsibility of all strategic partners, and is a responsibility shared with families and their communities.
- All families will have access to co-ordinated early help in accordance with need as soon as increasing needs are identified. This support should be personalised, multi-agency, evidence based and embedded within a whole family approach. Children and young people in those families will be supported to live safe, healthy and fulfilling lives.
- Families will become more resilient and develop capabilities to prevent and resolve problems themselves.

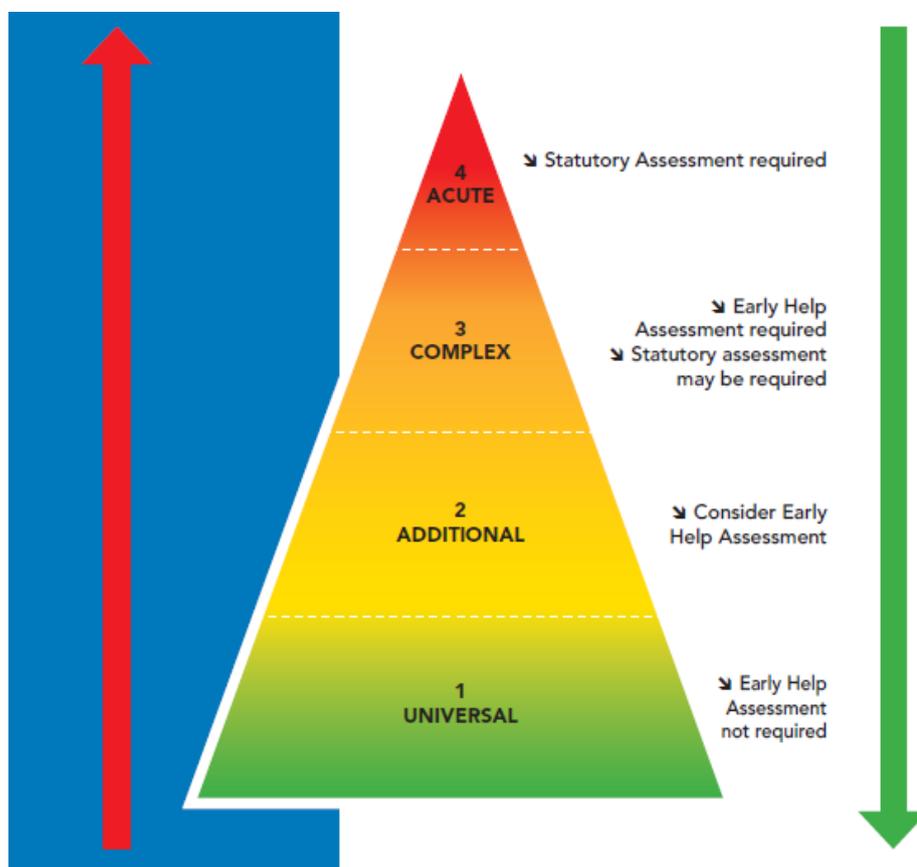
This protocol should be read in conjunction with the Somerset Safeguarding Children Board (SSCB) 'Effective Support for Children and Families in Somerset – Thresholds for Assessment and Services guidance which can be found on the SSCB website and by following the link below.

www.somerset.gov.uk/sscbthresholds

3. Introduction

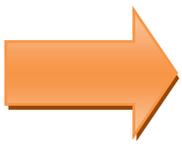
The process of 'Step Up' and 'Step Down' is an extremely important function in a child's journey through services and ensures that children, young people and their families engage with consistent, seamless support, at the right time and from the right range of professionals.

The child's journey through universal, additional, complex and acute levels of need is one that all agency partners wish to ensure is as smooth and time limited as possible. The 'Step Up' / 'Step Down' process is intended to maintain children at universal (Level 1) and additional (Level 2) as much as possible by ensuring early intervention is provided in a timely manner, and any 'Step Up' to complex / specialist provision is only agreed when a child's needs cannot be met at the lower level of the continuum of need.



4. Definitions

4.1 Step In:



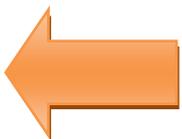
'Step In' is when an additional service is required to meet an identified need in a Team Around the Child (TAC) action plan and the service is asked to join the existing process. The Lead Professional will ensure that the service 'stepping in' provides the required support, however the overall identified need remains at the same level as set out in the [SSCB thresholds guidance](#).

Below is an example of when 'Step In' would be required:

To support partners in managing work appropriately at Level 3 of the thresholds guidance, CSC can, if appropriate, offer any agency leading a Level 3 TAC meeting, the opportunity to request a social worker to attend the next TAC meeting to ensure the application of threshold is correct and that the plan is correct to support and address any increased needs. This 'step in' would involve:

- The nominated social worker will provide advice and guidance to the TAC team about how to focus the plan on the key issues. If the situation does not require step up to CSC the social worker will support the TAC team in the development of an 8 week plan and 'step out'. If the nominated social worker identifies at the TAC meeting that the level of need meets a lower or higher threshold, the nominated social worker will advise the team of their opinion and request that the child is referred to the appropriate agency by the Lead Professional.

4.2 Step Out:



'Step Out' occurs when a service with an action in a TAC plan has completed that action satisfactorily and the family no longer require that particular support. The service will then step out of the process. The overall identified need remains at the same level as set out in the SSCB thresholds guidance.

Note: Lack of engagement by a family or failure to keep appointments is not a reason for a service to 'Step Out' of a TAC process. The professional should review their approach to working with the family and consider whether an alternative approach or goals are required to effectively work alongside the family to achieve the desired outcomes.

If engagement with the family is no longer possible then a risk assessment will be required to determine if 'Step Up' to the next level of the SSCB thresholds guidance is necessary.

4.3 Step Down:



Step Down: describes the process that occurs when problems experienced by a child, young person and their family have been addressed, the objectives within the plan for the family have been met and the identified level of need has moved down.

'Step Down' is a crucial facet of practice to prevent re-escalation and re-referral. It is important that professionals work together to sustain positive progress to improve outcomes for children. Below are examples of when 'Step Down' would be required:

- 'Step Down' can occur following an Early Help Assessment (EHA) (including the multi-agency request tool) and TAC process. If issues have been addressed satisfactorily and the needs have been met the case can step down to lower level provision.
- 'Step Down' can also occur within statutory frameworks. An example of this is when a child, young person and their family have been subject to a Child Protection Plan and risk has diminished as the child and family have made positive progress. In this instance 'Step Down' to a 'Child In Need' (with a TAC approach initially led by Children's Social Care (CSC)) would occur when a Child Protection Plan is no longer required. Here, 'Step Down' would mean that the case remains within a statutory framework until it is agreed that the child, young person and family's needs can be managed using a TAC approach without CSC involvement.

4.4 Step Up



Step Up: can occur at various points across the child's life. 'Step Up' describes the process of supporting children and families when additional, escalating need occurs. Below are examples of when Step Up would be required:

- A child engaging with universal provision can require an EHA because additional unmet needs are identified. A professional working with the family should consider an EHA if they consider that there are increased needs additional to universal services.
- 'Step Up' can also occur to specialist services when children's needs are escalating and outcomes are not being met, despite intervention through the EHA and TAC process.

5. Process / Practice – Step Up



5.1 Step Up from Universal provision (Level 1)

When stepping a case up because there is evidence of additional need (not of a child protection nature) it is important to discuss this in the first instance with the parent/carer and if age appropriate, the child to gain the appropriate consent. This discussion should involve a description of the EHA process and how it can help and support families who require some extra support or intervention.

In instances of 'Step Up' from universal provision an EHA should be considered and completed with the family and relevant professionals. The family and relevant professionals from the universal and additional provision should discuss how best to support the family, through the TAC process.

When the child is of school age it is always important to encourage discussion between lead professional, parents/carers and schools as it is vital that the school is aware of any issues that are impacting on the child, so that appropriate support can be offered in school and if the school cannot meet this need alone, it can be discussed at a Team Around the School multi-agency meeting.

Where other services/agencies are required to support the child and family it is important to discuss this with the parent/carer and then discuss this with the relevant service(s). This dialogue is crucial to broker the best possible support for children and families.

Other relevant services/agencies should be invited to contribute to and support the EHA and TAC process.

5.2 Step Up from EHA (Level 2 / 3)

In instances of 'Step Up' when an EHA/TAC intervention is already in progress, the updated EHA and any additional, relevant evidence should be shared with CSC through Somerset Direct who will make a decision on whether the issues highlighted warrant allocation to a CSC Social Worker.

Dialogue with CSC is always welcomed and Lead Professionals / Organisational Safeguarding Leads can telephone the Consultation Line (0300 123 3078) or, if the child is at immediate risk of significant harm, refer immediately through Somerset Direct (0300 123 2224). Information and frequently asked questions regarding the consultation line can be obtained by following the link.

www.somerset.gov.uk/sscbthresholds

Where a case already open to getset is referred to CSC because of concerns regarding significant harm, getset will remain involved whilst CSC undertake their safeguarding enquiries. This will provide continuity of service for the child and family, if the outcome of the enquiries concludes that they are appropriately supported by getset intervention. Where CSC assesses that there are on-going safeguarding concerns which require social care intervention, CSC will become the lead agency.



6. Process / Practice – Step Down

When children, young people and their families are engaged with a statutory intervention, and the family have progressed positively, it is important that the progress made is sustained and that children and families do not feel that they are being passed from 'service to service'. The 'Step Down' process enables relevant professionals from CSC and a range of other services to support the intervention plan appropriately. EHA and TAC are crucial to the step down process as it enables the effective planning and monitoring of cases once statutory services 'step out' of the TAC process.

6.1 Step Down from CSC Statutory Children and Families Assessment (Level 4) to the EHA

When issues affecting the child and family no longer require statutory involvement it is important that good progress is sustained. Effective dialogue between the Social Worker and the future Lead Professional is crucial to pave the way for a seamless transition for children and families. When CSC 'step out' of a case, communication is important to gain agreement on who the Lead Professional will be and this should be recorded clearly.

6.2 Step Down from CSC First Response Team following submission of EHA

Once the Early Help Assessment which includes the multi-agency request tool, has been received by the First Response Team, the Social Worker will complete written analysis and outline what activity/intervention is required to support the child and family as the threshold for statutory intervention is not met. The responsibility to complete or update the EHA then reverts back to the original referrer. This is managed through the TAC process noting the following principles:

- Where a Lead Professional hasn't been negotiated, the original referrer will be identified as the Lead Professional.
- The Lead Professional will be contacted and a request made to complete/update the EHA within 20 working days.
- The Lead Professional will be advised of the First Response Teams' analysis / outcome, and what additional services could offer support to the EHA and TAC process.

Important - Where the original referral was from the Police, Accident and Emergency or the Ambulance Service and an EHA recommendation was made, the Lead Professional will be identified by the Social Worker who has completed the First Response analysis.

6.3 Step Down at point of CSC Statutory Children and Families Assessment completion and TAC meetings have been convened by CSC

When CSC make the decision to 'step out' of a case following a full statutory assessment the Social Worker should discuss the 'Step Down' of a case with the key stakeholders and negotiate a Lead Professional to take over coordination of the case.

The CSC statutory assessment can be used as the document to inform the TAC action plan as this would further reduce the need for duplication for the family and professionals involved. The emphasis should be on the family to drive and inform the on-going intervention and plans to meet any identified needs.

The identified Lead Professional coordinates intervention using the agreed TAC action plan. The EHA and TAC plan should be regularly updated to reflect activity and intervention that improves outcomes for children and families.

6.4 Step Down from EHA to Universal provision:

When all issues have been addressed satisfactorily and the child/family no longer requires support, the EHA should always be closed by completing the relevant section of the EHA. This is crucial to ensure that the EHA episode does not remain open on central records. This can be done by contacting the Early Help Advice Hub (01823 355803).

7. Monitoring Effective Application of Step Up / Step Down

All partner agencies are responsible for monitoring the effective application of Step Up Step Down within their agency. Reports will be requested by the Quality and Performance sub group of the SSCB as part of their annual work programme to provide information about the effectiveness of early help across the partnership.