

## Mobile Families Guidance

### 1.0 Scope

The purpose of this guidance is to raise awareness amongst practitioners in all organisations and encouraging vigilance and professional curiosity when it comes to families that move frequently and appear to live very transient lifestyles.

This Guidance seeks to provide clarity and assistance to key professional groups who are likely to be engaged, or have concerns with such families, and acknowledges the balances that need to be made with respect to privacy and confidentiality: a number of families move relatively frequently for legitimate reasons.

### 2.0 Introduction

Children who experience frequent changes of address and/or are placed in temporary accommodation can be subject to particularly transient lifestyles. They are likely to lose contact with previous support networks and may become disengaged from services, or not known to services in the new area. Frequent movers can find it difficult to access the services they need. For those already socially excluded, moving frequently can worsen the effects of their exclusion. Children and families who move most frequently between Local Authorities are often:

- Homeless families;
- Asylum seekers and refugees;
- Gypsy and traveller families;
- Looked After Children;
- Children in the criminal justice system;
- Families experiencing Domestic Violence;
- Those families who move to the coastal area for the summer;
- Families the move within the private rented sector;
- Military families.

It is important to note that some families move deliberately in order to avoid professionals discovering abuse within the family and will access multiple services in order to avoid one professional building a picture of the family. It is however, equally important to note that not all families that move frequently are doing so to avoid professional scrutiny and in fact some families just like to move or have to move due to employment, for example military families. Nevertheless, this does not mean that frequent moves do not have a detrimental effect on children and young people, particularly in relation to feelings of social isolation and lack of educational consistency.

It is vital that services working with children maintain an awareness of how easily information and networks can be lost in moves. Effective systems must be put in place and robust action taken to ensure that as soon as such highly mobile, vulnerable children and unborn babies are identified appropriate multi-agency planning is put in place.

All agencies have a specific 'duty to co-operate' to ensure better outcomes and to improve the well-being of all children, including children who move frequently.

### **3.0 Identifying Children at Risk**

When families move frequently, it is more difficult for agencies to identify risks and monitor a child's welfare. Professionals in all agencies should be alert to the possibility that a child or family who has moved may not be in receipt of universal services. Any professional who comes into contact with a family should proactively engage with the family in order to link them into local universal services, e.g.;

- Seeking information about the child / family (full names, dates of birth, previous address, GP's name, if attending any school, etc.);
- Providing information about relevant services;
- Following up to ensure that the family has managed to make contact and register with a local GP, school and other relevant services to which the child is entitled;
- Engaging appropriately with relevant agencies regarding any concerns which emerge.

A number of Rapid Reviews and Child Safeguarding Practice Reviews from around the Country identify that a risk factor to children is them missing from universal services.

The following circumstances associated with children and families moving across district authority boundaries are a cause for concern:

- A child and family, or pregnant woman, not being registered with a GP;
- A child not having a school place or whose attendance is irregular and who isn't being electively home educated;
- A child or family having no fixed abode (e.g. living temporarily with friends or relatives);
- Several agencies holding information about the child and family, which is not co-ordinated and / or which has not followed the child or family, (i.e. information which is missing or has gaps);
- A move which disrupts an assessment or planned work with the child or their family which is likely to identify safeguarding concerns or address the child's needs

### **4.0 Professional Curiosity**

Professional curiosity is the capacity and skill for proactive questioning and challenge rather than making assumptions or using professional optimism not based on assessment of history and current circumstances. Never be frightened to ask the obvious question and share concerns with colleagues or your supervisor: a "fresh pair of eyes" looking at a case can really help practitioners and organisations to maintain good practice standards and develop a critical mindset.

Professional curiosity is much more likely if practitioners:

- Are given good quality training to help them develop;
- Have access to good management, support and supervision so that they can reconsider challenging and potentially upsetting work with families;
- Have time to review the lived experience of children and families and undertake regular assessment to ensure new information and developments are reflected;
- Have the capacity to keep 'working away' to find what might have happened.

Practitioners should always try to see all family members separately; however when that is not possible and particularly when a victim (this could be an adult or a child) is not being allowed to be seen alone, professionals should also be alert to the following combination of signals:

- The victim waits for their partner to speak first;
- The victim glances at their partner each time they speak, checking their reaction;
- The victim smooths over any conflict;
- Someone speaks for most of the time;
- Someone sends clear signals to the victim, by eye / body movement, facial expression or verbally, to warn them;

- Someone has a range of complaints about the victim, which they do not deny.

## 5.0 Information to Record

For agencies to maintain contact with children and families who move frequently, information needs to be accurate. Professionals should:

- Ensure that all names used by the family are provided, and clarification is obtained about the correct spelling;
- Ensure that accurate dates and places of birth are obtained for all household members, wherever possible;
- Obtain the previous full addresses, any earlier addresses, and contact telephone numbers;
- Clarify relationships between the child and other household members, if possible with documentary evidence (e.g. birth certificates, marriage certificates, Department for work and pensions documentation, passport/visa);
- Ask the child / family with which statutory or voluntary organisations they are in contact;
- Be vigilant about Identification.

## 6.0 Information Sharing

Knowing when and how to share information isn't always easy, but it's important to get it right. Families need to feel reassured that their confidentiality is respected. In most cases you will only share information about them with their consent, but there may be circumstances when you need to override this.

Remember the [Seven Golden Rules for Information Sharing](#).

## 7.0 What is Expected of Organisations

- Use your professional curiosity, whilst respecting the family's privacy and recording the information that is detailed above;
- Include the risks that mobile families can pose to children within the organisational safeguarding policy;
- Make relevant staff aware of the risks to mobile families and their children and the need for vigilance when working with such families;
- Include information in relation to mobile families in existing training and briefing programmes;
- Ensure internal organisational monitoring systems are in place that help identify families that have significant moves and pose a risk to children;
- Agency transfer in and out processes that includes the transfer of information when families move out of the area of the service provider – this should be with consent where required;
- Robust mechanisms in place for professionals to discuss concerns with managers/supervisors.

## 8.0 Agency Response / Responsibilities

Although all agencies can play a role in identifying mobile families and subsequently the signals that may cause concern, it is acknowledged that some agencies will be more likely to identify transient families, those being Health professionals, Schools, Housing Authorities, Children's Services and Department for Work and Pensions. In addition it is acknowledged that many of these agencies have their own procedures and practices in relation to transfers in and out of their service, either within the County or outside of the County. The following is a summary of those processes or a link to the statutory guidance which is in place:

### 8.1 Education

Schools and Education Support services should apply professional curiosity where information demonstrates that a child and their family have moved frequently within a short period of time. School admissions are able to identify when a number of mid-year applications have been submitted for one child. Any such discovery would be escalated within the admissions service area to an appropriate team manager. This however would only find children who have moved

within the authority and therefore schools have a key role in identifying children who have moved from school to school within and from outside the local authority. Not all mobile families are in need of support, however, where a school have further evidence to suggest they are, the school would follow their appropriate safeguarding and welfare procedures.

Children who move frequently are also more likely to be at risk of becoming a child missing education (CME). It is important that a school does not take a child off roll until they know the next school a child will be attending. The school should then transfer school files as soon as possible. If despite all reasonable attempts, the school cannot locate the family, then they should report the child as CME as set out in the [NSCP Child Missing Education Procedure](#).

## **8.2 Further Education**

As with schools, further education establishments should apply professional curiosity where information demonstrates that a child and their family have moved frequently within a short period of time. Further education establishments are required to have robust admissions and attendance policies and procedures which clearly outline their arrangements for checking previous education prior to admission and monitoring once on programme. If concerns are raised then the establishment should follow their safeguarding procedures.

Children who move frequently are also more likely to be at risk of becoming a child missing education (CME). It is important that a further education (FE) establishment does not make assumptions that a child is safe and well. Where a college operates a 14-16 provision they need to follow the guidance above in Section 8.1, Education.

## **8.3 Children's Services**

If a child is known to Children's Services and has left the area or is about to leave the area on a Child in Need Plan, a transfer will take place when the carer/parent has consented to information being shared and wants continuation of service from another local authority. If the carer/parent does not consent or does not want a service from another local authority consideration shall be given to whether the discontinuation of the child's plan will result in safeguarding issues. In these circumstances a referral will be still be made to the other local authority. The Social Worker will also send a letter notifying the Northamptonshire GP, Health Visitor, school and any other agencies involved of the details of the move, including the date and new address. This should be sent in all circumstances, planned or unplanned moves.

If a child is on a Child Protection Plan on establishing that the child is moving, or has moved out of the county, the social worker must make immediate telephone contact with the new authority to exchange information regarding reasons for the original Child Protection Plan, current level of concern and date of last visit. This should be followed up as soon as possible by written confirmation with relevant reports. The Northamptonshire Social Worker has responsibility for taking any immediate action necessary to safeguard the health or welfare of the child; informing Children's Social Care in the new authority, and establishing temporary arrangements for case responsibility; ensuring that all agencies involved in Northamptonshire are aware of the move and that they are taking responsibility where relevant for informing their equivalent agency in the new authority; informing SQAS NCT Conference [Conference@nctrust.co.uk](mailto:Conference@nctrust.co.uk) who will contact their equivalent within the receiving Local Authority and ensuring that the child/ren are on temporary plans. The Social Worker; will send initial and most recent child protection conference minutes; attending and/or providing relevant information for the child protection conference in the receiving authority.

For more information regarding Northamptonshire's process (see [Notifications from other Local Authorities / Placement Providers](#) and [Out of Area Placements](#)).

There is also an NSCP procedure for [Children and Families Moving Across Local Authority Boundaries](#)

## **8.4 Youth Offending Service**

Under the Crime and Disorder Act 1998, youth offending teams (YOTs) are responsible for providing youth justice services to all children and young people within their area. There are significant challenges for YOTs which have a high number of cases transferred into their areas. However, it is imperative that the best quality services are available to all children and young people regardless of where they would usually live.

Improving practice in relation to case transfers and the management of cases where children and young people are living away from their home local authorities will produce better outcomes for children and young people and enable greater public protection. Continuity of supervision and support, during a time often fraught with risks to the child or young person and others, is vital if reductions in reoffending and improved community safety is to be achieved.

The [National Protocol for Case Responsibility](#) provides practice guidance for Youth Offending Teams in England and Wales.

## **8.5 General Practitioner (GP)**

General Practitioners and their staff should be aware of the discontinuity of care that may affect mobile families and the effect this can have on their health. They should also be knowledgeable of which families tend to move frequently (homeless families, asylum seekers and refugees, gypsy and traveller families, Looked After Children and families experiencing Domestic Violence).

Whilst children and families who move most frequently may not register permanently with a GP, they may seek treatment as a temporary resident. The GP practice should ensure information about the child and family is accurate, ask about the planned duration of stay, assess healthcare needs and liaise with other agencies as appropriate.

Evidence from Rapid Reviews and Child Safeguarding Practice Reviews highlights the vulnerabilities that mobile families present. In order to embed lessons learnt from these reviews, the GP practice should ensure that records of mobile families are fully reviewed upon registration.

## **8.6 Acute Trusts**

Within Northampton and Kettering Acute Hospital Trusts, guidance for managing patient transfers out of area, or to another Trust is available in varying formats. There is specific guidance available for Maternity and is the responsibility of the midwife involved in the care of any woman to share all relevant information / social history or concerns with the Midwife /GP or any other member of the Multidisciplinary Team she thinks necessary, in the area the woman is transferring to.

The information must be shared in a timely fashion and in an appropriate and secure manner via telephone with the relevant Community Midwifery team and the Social Worker informed if the case is open to Children's Services.

The information should also then be shared electronically with the Community Midwife with whom the case has been discussed via a secure email account (nhs.net account). Named Midwife for Safeguarding should be informed to enable them to liaise with the Named Midwife for Safeguarding in the area concerned.

It is also important that the midwife who is completing the transfer informs the Health Visitor of the transfer.

## **8.7 Public Health**

The Health & Wellbeing Service includes the 0-19 children's health service which offers health visiting and children and young peoples' nurses for school aged children. The Health Visiting service in Northamptonshire receives notification of a large number of transfers in every year. Transfers in include families who have moved into Northamptonshire either from another county or from abroad, also transfer in notifications when families move between areas within the county. The Children's Health Transfer In and Out Policy supports the Health Visiting Teams in ensuring that all children aged 0 to the end of reception year receive all the services offered in the Health Visiting

core offer as guided by the Healthy Child Programme (Department of Health and Social Care 2009). The aim of the policy is to ensure referral, support and early intervention agreed between all agencies is provided in a timely way. The policy also gives guidance on the process to follow to ensure all pre-school aged children who transfer out of their care are notified to the relevant Health Visiting service in their new location. The Health Visitor Team will notify the new area HV as we did previously.

## **8.8 Northamptonshire Healthcare Foundation Trust (NHFT)**

All staff working across the Trust's services including both Child and Adolescent Mental Health, drug & alcohol and Learning Disability Teams engage with mobile families. The Trust's staff are trained to recognise the additional risks and vulnerabilities that families with multiple moves and transient lifestyles face. The Trust has a robust transfer and discharge policy which ensures the relevant sharing of information with other areas and agencies. Child and Adolescent Mental Health Services have a do not attend policy which identifies where children and young people do not attend and the appropriate liaison with other agencies should there be concerns. The Trust also engages with the local procedures for families which are missing on a local and national level.

## **8.9 Housing**

Social housing has a very broad remit and is different dependent on district, varying further with landlord functions. In Northamptonshire, each Borough or District Council has the responsibility for delivering housing advice, homelessness prevention and statutory homeless services; furthermore those that have their own housing stock are responsible for allocations of tenancies and general landlord functions. Those that do not have their own housing stock work closely with other registered providers. As with earlier reference to general professional curiosity, this can be in the context of a housing register application disclosing multiple addresses of short stays with different friends and/or family members or not disclosing details of universal providers working with them. All staff are appropriately trained in safeguarding in context of their role particularly in identifying risks, should a member of staff identify a household with particularly high number of moves in relative short periods or a reluctance to share required residency information, the safeguarding lead would be informed and agree/determine next steps in line with organisational safeguarding policies and procedures.

Registered Providers (Housing Associations) are independent organisations. As such they should have their own policies, procedures and staff training programmes to ensure they are alert and able to respond to the needs of their tenants.

Private Landlords are also independent and can range from an individual with a single, to-let property they rent out to an individual or organisation with a portfolio of properties rented out directly or through a Lettings Agency. Private Landlords can choose to become part of national and/or local accreditation schemes which show their commitment to being a fair and reputable landlord. Local Authorities have the power to discharge their homelessness duties into the private sector. Properties are allocated subject to their suitability to the needs of the household. Local authority officers routinely inspect houses of multiple occupation. Other privately rented properties (including residential mobile homes) are also inspected when a complaint is received relating to the condition of the property. Safeguarding concerns may be identified during these inspections. Local Authority Officers would follow their own organisation's safeguarding policy and procedures should a concern be raised or witnessed during an inspection.

## **9.0 Pathway for Support**

### **Early Help for Children**

The Early Help Assessment process has been designed to help practitioners assess needs at an early stage and then work with the child/young person, their family and other practitioners and agencies to meet these needs. As such, it is designed for use when:

- You are worried about how well a child/young person is progressing;

- You might be worried about their health, development, welfare, behaviour, progress in learning or any other aspect of their wellbeing;
- A child / young person or their parent/carer raises a concern with you;
- The child's or young person's needs are unclear, or broader than your service can address alone;
- The child or young person would benefit from an assessment to help a practitioner understand their needs better.

If you have any of these concerns complete an [Early Help Assessment](#) with the child and family. If on completion a need is identified that you are unable to address you will need to initiate a Team Around the Child (TAC).

If you are unsure what action to take you may want to ask Early Help for advice which can be done by completing an [Early Help Advice Form](#).

### **Safeguarding Children Referral Process**

If you believe a child or young adult under the age of 18 years might be suffering, or is likely to suffer significant harm (including any mistreatment or abuse), contact the MASH 0300 126 3000 and 0300 126 7000 to make a telephone referral, you will subsequently be required to put this in writing.. If it is outside normal office hours you can contact the Emergency Duty Team on 01604 626938. If your referral is assessed as a safeguarding concern then you will be required to complete the Safeguarding Referral Form.

If your concern is in relation to an unborn child then you should follow the [Pre-Birth Practice Guidance](#) and [Pre-Birth Protocol](#).

## **10.0 Quality Assurance**

As part of the quality assurance and audit principles within Northamptonshire, the NSCP is committed to continuous development of policies and procedures. Consequently it is important that new guidance or protocols are assessed to ensure they are being used effectively, that professionals are familiar with the guidance and that amendments are made to improve new protocols and guidance through the feedback from professionals in practice.

With this in mind the NSCP will monitor and test understanding on a regular basis.

## **11.0 Useful Links**

[Children and Families Moving Across Local Authority Boundaries](#)

[Children Moving Across Local Authority Boundaries](#)

[Children and Families that Go Missing \(including Unborn Children\)](#)

[Children Missing Education](#)

[Children Missing from Home, Care and Education](#)

[NSCP Multi Agency Protocol who Go Missing from Home or Care](#)

[Uncooperative Families Practice Guidance](#)

[Conflict Resolution Policy](#)