

# Protocol for Children's Centre Multi Agency Team (MAT) meeting

Hackney pathway to integrated  
support in children's centres



## Children's Centre pathway

Hackney's pathway to integrated support in children's centres was developed in 2007 in collaboration with Health, Children's Social Care and children's centres. Its aim was to show professionals how to access integrated services, and how the centres and schools should:

1. enable families to access universal and targeted support through children's centres;
2. sign post families to appropriate agencies;
3. refer to the Hackney Child Wellbeing Model (agreed definitions of tiers of need) when identifying and planning family support;
4. use the Common Support Framework (CSF) form;
5. seek advice from Children's Social Care where there are significant concerns or where circumstances have deteriorated.

Children's centres are looking to avoid fragmented service delivery which can have a negative impact on outcomes for children and families. The inquiry into the death of Victoria Climbié highlighted a number of problems that can occur when services are not joined up and agencies fail to work together.

1. If information and concerns are not shared or passed on between agencies, the child can slip through the net.
2. Several agencies may be in contact with a family, but no one person is providing continuity or coordinating services.
3. Several agencies may be spending money on the child, rather than one agency coordinating a package of support and making the best use of resources.



## Multi Agency Team (MAT) family support meeting protocol

This protocol for multi agency support in children's centres extends the integrated service framework by creating a 'Multi Agency Team (MAT) Family Support Meeting' in strategic children's centres. These meetings allow professionals involved in different aspects of services for children and families to work together to explore ways to best meet the needs of children and families who have been identified as needing additional support.

This protocol sets out the procedure for the MAT meeting. However, local terms of reference and further protocols between agencies may be required to agree practical issues such as where, when and how often the MAT will meet.

### Cluster approach

Strategic centres have a responsibility to work collaboratively with children's centres, schools and settings in the private, voluntary and independent sectors in the cluster. This will allow them to reach the most vulnerable children and to share resources. Strategic centres have responsibility for ensuring that information about their resources and activities, including the arrangements for the MAT meeting, are disseminated to schools and settings in the cluster, and representatives from the settings are invited to the MAT meeting where appropriate.

### The aims of the MAT family support meeting are:

1. early identification of strengths and needs of children and their families;
2. early intervention of need;
3. the assessment of children's needs against the Hackney Child Wellbeing Model;
4. better support for children and parents by providing weekly packages of support which are regularly reviewed every six weeks. This support may be long term if the families need it to be;
5. quick and easy access to services and expertise;
6. to identify a lead professional who will hand hold and support the family;
7. to monitor and review the packages of support arranged for the family using the Common Support Framework tracking form.

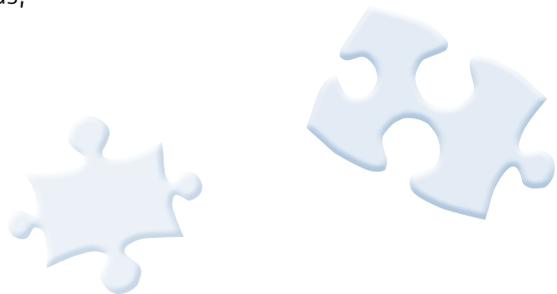
The MAT meeting should not need to discuss families known to Children's Social Care (Tier 3) unless it is to monitor known families, in partnership with Children's Social Care, or to discuss new information about families. Tier 3 families who come into contact with the centre, or who have been referred to the centre, should be sign posted to the appropriate services listed below without waiting for a MAT meeting:

- Children's Social Care; Early Years Children in Need Panel; First Response; Children's and Adult Disability and Mental Health Teams – referrals to Children's Social Care First Response may take place following a MAT meeting using the Children's Social Care agency referral form.
- Family Practitioner Team – children and families referred to this team may receive a service before the MAT meeting, but those accessing services from the Family Practitioner Team must be discussed at a MAT meeting and monitored at that meeting using the tracking form. Requests for services from the children's centre Family Practitioner Teams must be made on the Common Support Framework form. All cases held by the family practitioner must be closed at MAT.

## Membership of MAT family support meeting

Membership of the MAT meeting may vary from centre to centre. It should consist of key professionals who are able to identify risks and suggest suitable support packages. Membership should include:

- extended services manager and/or head of centre;
- public health coordinator and/or health visiting nurse manager;
- senior speech and language therapist (SALT);
- psychologist/child mental health specialist/first steps worker;
- cluster based social worker;
- Early Years and Primary curriculum leads;
- behaviour support teams.



Other members of the children's centre team, such as the nursery education officer, dietician, midwife, family support worker, manager or practitioner from another children's centre, school or setting, may attend the meeting when they have a family they wish to present for additional support. They may also attend if a family known to them is being discussed, or if the meeting would benefit from their skills and expertise.

### **Arrangements for MAT family support meeting**

The MAT meeting is mandatory in order to achieve the best outcome for children and families.

- MAT meetings should take place at least fortnightly.
- The meeting will focus on children up to age 11.



## Roles and responsibilities

### The role of the chair

The chair should be a senior member of MAT with sufficient safeguarding and chairing experience, such as the social worker or public health coordinator. However, other members may be asked to chair the meeting occasionally. The chair should be fully trained and have the necessary competency and skills to chair the meeting so that any risks are correctly identified and managed.

A suitably experienced chair should be appointed whose role and responsibilities are to:

- ensure an agenda is prepared;
- liaise with Triage to ensure appropriate checks are undertaken to establish the agencies involved with the family;
- ensure that the Common Support Framework form is completed and sent to the children's centre before the MAT meeting. The Common Support Framework form should be used to identify the strengths, needs and desired outcome for the family;
- ensure systems are in place, with clear timelines, to record and review support plans (with SMART Targets);
- ensure that the meeting has reached a decision about the key practitioner;
- ensure that support plans are monitored and reviewed at an agreed period within six weeks or less;
- ensure families are tracked on the EMS system;
- concerns should be reported to, or discussed immediately with, the cluster based social worker or group manager, or escalated to Tier 3 group manager or head of service.

### The role of the social worker

The cluster based tier 2 social worker is required to obtain their caseload from MAT. They should use a systemic approach with families undertaking individual or joint assessments and caseloads where a family has complex needs.

## The role of the lead professional

The lead professional is not a new role. Instead, they deliver three core functions as part of their work:

- act as a single point of contact for the child or family;
- co-ordinate the delivery of the actions agreed;
- reduce overlap and inconsistency in the services received.

## Team Alongside the Family (TAF)

The Team Alongside the Family (also known as Team Around the Child; Team Alongside the Child or Team Around the Family) is a much looser organisation, brought together to address the needs of a specific child or family. Their meetings are administered by the lead professional and can be ad hoc and/or virtual. The TAF is responsive to changes in the family's situation and has responsibility for amending the plan to achieve desired outcomes.

Each child and family will require an identified individualised team drawn from a range of services, some of whom may not be represented at the MAT. While MAT meetings may take place without the presence of the child or parents, it is impossible to have a TAF that does not include the child and parents as equal participants. Parents should therefore be invited to attend TAF where appropriate.

Normally, a lead professional would be appointed by the MAT Meeting and s/he would be responsible for working closely with the family, contributing (and in some cases completing) a more in depth assessment and drawing in other practitioners (including those from adult services) where appropriate.

Development of effective functioning of TAFs should be a priority area for children's centres.

## Confidentiality

Information sharing is one of the common core competencies for Children's Services, the Information Sharing Guidance (DCFS, 2008) sets out the expectations for sharing information. All staff must be given a pocket sized copy of the Information Sharing Guidance by their manager.

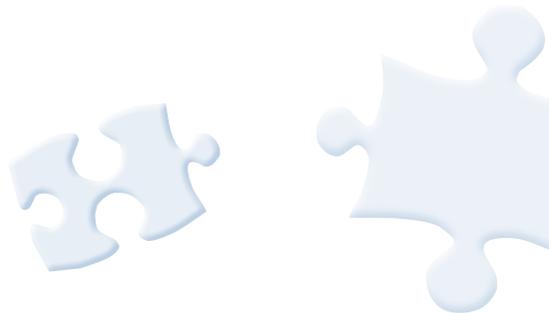
When sharing information, the MAT meeting must:

- share the information on a 'need to know' basis (Lord Laming);
- maintain respect for children and families;
- share the information purposefully;
- secure parents' permission, where possible, before disclosing information about families. However, failure to gain parental consent should not prohibit the child from being discussed at the MAT meeting if there are concerns about the child's welfare;
- keep in mind that safeguarding the child takes precedence over confidentiality;
- notes should be circulated in accordance with the rules governing confidentiality.

## Mapping and tracking families

A case management system is required to:

- report and monitor referrals;
- track children and families;
- monitor outcomes;
- identify jointly worked cases;
- use the monitoring information to assess whether referral to children's social care is required.



## Common Support Framework (CSF)

1. Professionals working in collaboration with a family must complete the CSF form to gather information that will give a holistic assessment of the family and identify their strengths and needs. The form will also inform discussion about how best to support the family. It may be completed by one professional or agency, and used as a referral form to access children's centre services through the MAT meeting. It can also be used to access the Family Support Team. The referrer can attend and may be invited to the MAT meeting to discuss the referral.
2. Generally, there should be a referral to MAT completed when there are two or more professionals involved. Once permission to access the database from the family is obtained, the Triage Unit will verify which agencies are working with the families and will inform the children's centre.
3. Support that has been coordinated for the family following the MAT referral will be monitored and reviewed every six weeks, or at the time agreed by MAT, provided it does not exceed six weeks.



The CSF form can be posted to:

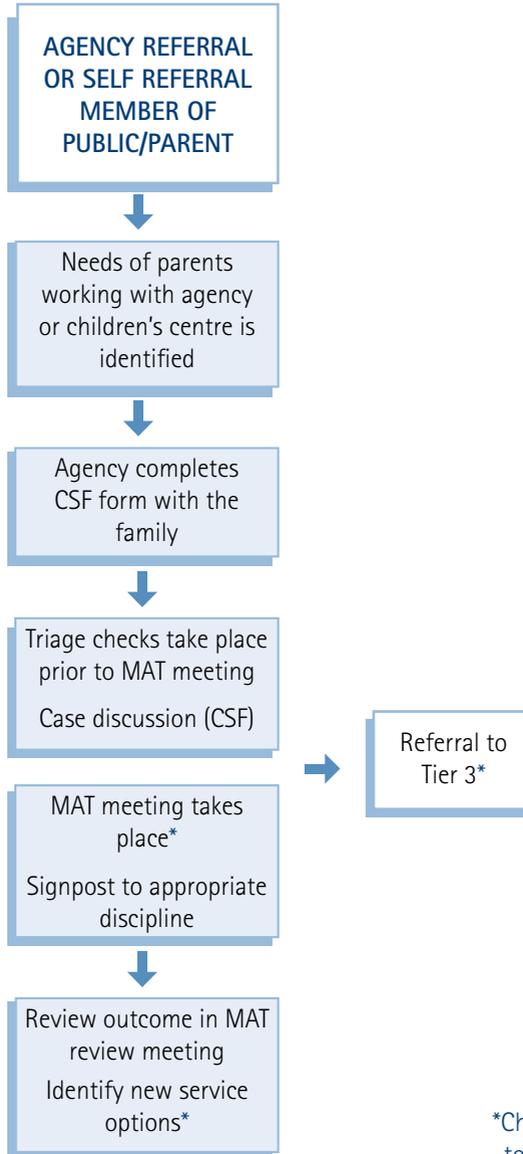
**CSF manager, Triage Unit, 275 Mare Street, London E8 1GR**

The envelope should be marked 'Private and Confidential' – to be opened by addressee only.



# Multi-Agency Teams (MAT)

## Hackney's pathway to integrated support in children's centres



\*Children's Centres need to update the database

In partnership with:

