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# **Early Help**

For all who need it

Security classification:
Protected

### 1. Introduction

'For children who need additional help, every day matters. Academic research is consistent in underlining the damage to children from delaying intervention. The actions taken by professionals to meet the needs of these children as early as possible can be critical to their future' (1)

Our commitment to early help is central to our Children and Young People's Plan with 'Early help for all who need it' cutting across our four priority areas:

- Improved educational attainment
- Protecting vulnerable children
- Early help and improving life chances
- · Being healthy and positive

Early help supports the broader council priorities of promoting health and well being and protecting the vulnerable and additionally offering value for money by working preventatively to reduce future spend within specialist services.

Early help means providing support as soon as a problem emerges, at any point in a child's life, from the foundation years through to teenage years.

Our early help offer recognises the crucial role that all family members – not just mothers and fathers, but step parents, grandparents, siblings and other extended family members and carers – play in influencing what children experience and achieve as well as the consequences when families are in difficulty.

Our early help offer takes into account reports and reviews by Frank Field, Dame Clare Tickell, Graham Allen and Marmot, with regards to the impact of growing up in poverty on child outcomes, use of evidence based approaches and programmes, and the important focus on the early years given the increasing body of evidence around early attachment and baby brain development. (2, 3, 4, 5)

The new 'Working Together to Safeguard Children' guidance places an emphasis on the importance of early help in promoting the welfare of children, together with clear arrangements for collaboration, and we want to ensure that our early help offer reflects the ambitions of this guidance.

Our offer also takes into account key messages from Munro's review (6):

- preventative services will do more to reduce abuse and neglect than reactive services
- co-ordination of services is important to maximise efficiency
- within preventative services, there needs to be good mechanisms for helping people identify those children and young people who are suffering or likely to suffer harm from abuse and neglect and who need referral to children's social care

Central to our early help offer is the early identification of children and families who would benefit from early help and a co-ordinated early assessment and response to prevent abuse and neglect of children and young people, and improve outcomes for children and families as a whole.

# 2. Identifying children and families who would benefit from early help

Providing early help is more effective in promoting the welfare of children than reacting later. Early help means providing support as soon as a problem emerges, at any point in a child's life, from the foundation through to teenage years. (1)

The effectiveness of early identification is underpinned by professional responsibility both of the referring and of the receiving agency to ensure that if a family does not meet the thresholds for specific services, that action is taken to prevent the lower level needs escalating, whilst also being alert to identifying children who without support will not reach their full potential.

Our early help offer therefore puts the responsibility on all professionals to identify emerging problems and potential unmet needs for individual children and families, irrespective of the whether they are providing services to children or adults (7). The professionals working mainly in universal services are best placed to identify children or their families, who are at risk of poor outcomes. These will be in health services, such as health visitors, GPs and school nurses, or in Children's Centres, or in education provision at any age from early years onwards.

Alongside this is the use of local intelligence set out in the Joint Strategic Needs Assessment and data collated in respect of the Troubled Families Programme criteria that supports us to identify both groups of children and families that are more likely to be in need of early support, but also in the case of Troubled Families the individual families in needs of early intervention approaches.

'Working together' recommends that professionals should, in particular, be alert to the potential need for early help for a child who:

- is disabled and has specific additional needs
- has special educational needs
- is a young carer
- is showing signs of engaging in anti-social or criminal behaviour
- is in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health, domestic violence and / or
- is showing early signs of abuse and / or neglect and / or sexual exploitation

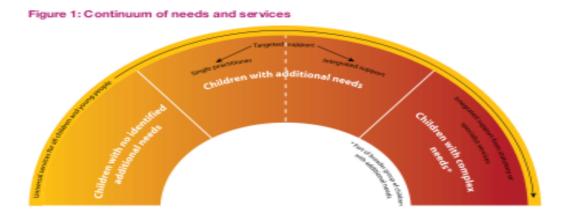
In relation to family circumstances, routine enquiry is developing in 0 – 19 health services in relation to domestic abuse and maternal mental health following childbirth and in Adult Social Care in relation to early identification of young carers. Munro states that in relation to family circumstances, whilst this may increase the risk of poor outcomes, this does not make harm inevitable.

Early help services are also integral to cases stepping down out of Children's Social Care services, and Troubled Families Support, to enable a lower level of help to be offered to reduce future need for high level support and statutory intervention. (See appendix for Step Up / Step Down process)

Ref: LSCB developing thresholds paper to follow

## 3. Who can access support?

The provision of early help services should form part of a continuum of help and support to respond to the different levels of need of individual children and families. (1)



Note: Diagram is not to scale in representing the proportion of children and young people in each section of the windscreen.

Children and family needs are constantly changing and at different times in their lives they will have differing levels of involvement from a range of services, from universal, early help and specialist support services.

Universal services are available to all children, young people and families, working with families to promote positive outcomes for everyone, by providing access to education, health services and other positive activities. Practitioners working in these services should identify where children and families would benefit from extra help at an early stage.

**Early help services** (previously referred to as targeted services) focus on children, young people and families who may need support either through a single service or through an integrated multi-agency response. They work with families where there are signs that without support a child may not achieve good outcomes and fulfil their potential. However early help services are also critical in preventing escalation into specialist services, and will also assist with continuing lower level support once a higher level intervention has been completed.

Specialist services focus on families with individual or multiple complex needs, including where help has been requested through Section 17 and Section 47 or where a specific disability or condition is diagnosed.

What is important is that professionals work together effectively to ensure that families experience smooth transition between services and that all services supporting the family remain focused on the needs of the child.

It is also critical that all professionals remain aware of their responsibilities in relation to safeguarding and protecting children, with regards to families who have an early help assessment (formerly CAF).

## 4. How to access early help

Local agencies should work together to put processes in place for the effective assessment of the needs of individual children who may benefit from early help services. (1)

To ensure that the best possible support is provided to children and families there needs to be an early assessment of need considering child's developmental needs, family and environmental factors and parenting capacity.

Locally this assessment is undertaken through usage of the **Early Help Assessment** (formerly CAF) (see appendix)

In some cases a professional will be able to identify a specific need, but will not be in a position to provide appropriate locally sourced support. In this instance the CAF team will work with the referrer to identify the appropriate help and support to access from a single agency.

Where the assessment identifies support needs that cannot be met by a single agency or service, there needs to be a co-ordinated response with local agencies working together to support the family. The **Team around the Child (TAC)** model is used locally to bring together a range of different practitioners from across the children and young people's workforce and sometimes from adult services to support an individual child or young person and their family. The members of the TAC develop and deliver a package of solution focused support to meet the needs identified through the Early Help Assessment (formerly CAF) with a lead professional identified to co-ordinate the support and act as the key point of contact for the family and professionals / services. Decisions about who should be the lead professional should be taken on a case by case basis and should be informed by the child and their family.

Working Together states that in order for an early assessment to be effective:

- the assessment should be undertaken with the agreement of the child and their parents/ carers. It should involve the child and family as well as all the professionals who are working with them
- if parents and/or the child do not consent to an early help assessment, then the lead professional should make a judgement as to whether, without help, the needs of the child will escalate. If so, a referral into local authority children's social care may be necessary

# **CAF Support and Information Service (current name of service)**

They provide support with:

- Early Help assessment and process
- Helping professionals decide whether an Early Help assessment is the best way forward
- Checking if a family already has an Early help assessment
- Advice and information about appropriate services / agencies

Contact 0300 300 8119 email cafadmin@centralbedfordshire.gov.uk

## 5. Our Early Help Offer

Our early help offer focuses on some key service areas, and is supplemented by a range of services commissioned according to needs identified through data collated through the existing CAF process, the Child Poverty commissions and in the future through the Healthy Child Programme and Troubled Families work.

Children's Centre Services	Early Education / Childcare	Family Learning / Access to employment
Welfare Rights / Benefits advice	Early Help Assessment	Raising aspirations / Positive activities for young people
Emotional Wellbeing Service / Counselling services	Parenting and Family Support / Troubled Families	Healthy Lifestyles / Reducing risky behaviours

<sup>\*</sup>It should be noted that many of the early help services support families across the spectrum of need, further information is available in the appendix

The above is not an exhaustive list of the support available for children and families, as the service landscape is constantly changing to meet the emerging needs and to fill gaps in provision. The CAF team are able to advise on the most current early help services available and ensure this matches the desired outcomes stated on the Early Help Assessment. Additionally the team has information about a wide range of services available across the area from a range of stakeholders, and are often able to broker appropriate services which can be linked into direct payments as appropriate.

Increasingly early help services are drawing upon the use of evidence based approaches and programmes, to increase the chances of support provided bringing about the desired outcomes, for example

- Children's Centres delivering 'Parents as First Teachers' programme and the Nurturing Programme
- Parenting Services delivering 'Mellow Bumps' and 'Mellow Babies', 'Triple P', 'Strengthening Families 10 – 14'
- Adult Treatment Services delivering 'MPACT' family programme
- Two year old entitlement disadvantaged 2 yr olds placed only in good or outstanding settings

Whilst a significant number of services will be delivered to parents it is important that they are evaluated to demonstrate the impact they are having on improving children's outcomes.

### Child at the centre

It is paramount that the needs and views of children are central to the assessment process and that the interests of adults are not put ahead of their children.

### Children have said they need (1):

**Vigilance**: to have adults notice when things are troubling them

**Understanding and action:** to understand what is happening; to be heard and understood; and to have that understanding acted upon

**Stability:** to be able to develop an ongoing stable relationship of trust with those helping them

**Respect:** to be treated with the expectation that they are competent rather than not

**Information and engagement:** to be informed about and involved on procedures, decisions, concerns and plans

**Explanation:** to be informed of the outcome of assessment and decisions and reasons when their views have not met with a positive response

**Support:** to be provided with support in their own right as well as a member of their family

Advocacy: to be provided with advocacy to assist them in putting forward their views

#### References

- 1. Working Together to Safeguard Children A guide to inter-agency working to safeguard and promote the welfare of children (March 2013)
- 2. Allen, G. (2011), Early Intervention: the next steps
- 3. Tickell, C. (2010), The Early Years: Foundations for life, health and learning
- 4. Marmot, M. (2010), Fair Society, Healthy Lives
- 5. Field, F. (2010), The Foundation Years: preventing poor children becoming poor adults
- 6. Munro, E. (2011), The Munro Review of Child Protection: Final Report A childcentred system
- 7. Think Family Practice Protocol (2010), Central Bedfordshire Council



# **Early Help Support**

A range of support services for children, young people and their families are outlined below:

## **Children's Centre Services currently include:**

- Breastfeeding support
- Child and family health services and drop ins
- · Advice from dieticians and oral health
- Smoking cessation
- Early education and school readiness supported by Early Years Professionals
- Links with Job Centre Plus for training and employment advice
- Speech and language support
- Support for children with special needs and their parents
- Parenting programmes
- Outreach and family support services
- Information and advice to parents on childcare, early years provision and 2 year old funded places
- A variety of drop in sessions

## Early Education and childcare

- Funded Early Years provision for three and four year olds (15 hrs per week)
- Funded Early Years provision for disadvantaged 2 year olds (15 hrs per week)
- Short break provision for children and young people with disabilities

# Family Learning and Access to employment:

- A range of Family Learning courses
- Jamie's Home Cooking Courses

- Young Mums to Be and Parents with Prospects courses for teenage/young parents
- Support for parents to get back into employment
- Volunteering opportunities
- Getting Families Working Programme



# Raising aspirations / positive activities for young people:

- Individual and group mentoring
- Monthly clubs and activities for young carers
- Playschemes for disabled children and young people
- Young Mechanics course
- Babysitting courses
- Youth projects and advice

# Healthy lifestyles / reducing risky behaviours:

- Smoking cessation
- Child weight management programmes
- Sexual health services
- Drug and alcohol treatment services for young people
- ASPIRE programme to address risk factors associated with low aspirations and teenage pregnancy

# Parenting and Family Support / Troubled Families:

- Antenatal and postnatal support
- Home visiting support for families
- One to one parenting support in the home
- One to one support for all teenage parents
- One to one support for parents with learning disabilities
- Support for parents of children and young people with disabilities

- Central Bedfordshire
- A range of evidence based parenting programmes, including
   Mellow Bumps, Mellow Babies, Triple P, Strengthening Families 10 14
- Freedom Programme for women experiencing domestic abuse
- Postnatal depression groups
- MPACT programme for families living with parental substance misuse
- Kidstime workshops for families living with parental mental illness
- Family group meeting service
- High level family support services
- Intensive family support service with dedicated workers

# Emotional wellbeing / counselling services

- Emotional wellbeing service for children
- Therapeutic support for children aged 5 13 who have experienced domestic abuse
- Counselling services for young people
- Counselling services for women who have experienced domestic abuse
- One to one support for young carers
- One to one support for children affected by parental substance misuse
- One to one support for children affected parental imprisonment

# Welfare Rights / Benefits Advice

- Support for families facing a drop in income
- Homelessness and mediation service for young people aged 14+
- Support to access food parcels

The range of available services is changing all the time in response to identified needs, for the most up to date information contact the **CAF Support and Information Service on 0300 300 8119.** 

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# Early Help Assessment for Children and Young People

**Practitioner Guidelines** 

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### **Common Assessment Framework**

The Common Assessment Framework (CAF) is a standardised approach to assessing children and young people's needs and deciding how they should be met.

The CAF is a key element of our strategy to delivering more effective early intervention and prevention and is a tool for the identification and initial assessment of children and young people considered to be in need of additional support.

Once completed the CAF will serve as a useful way to share information and to track and review a child or young person's progress. At the point a CAF is completed by a practitioner they are also encouraged to consider and identify any future likely or predictable difficulties a child may face, for example the transition to secondary school. The CAF form should be used by practitioners in all agencies who work with unborn babies, babies, children, young people and their families and have been trained in its use.

### Completing the CAF will help to:

- Gather information about a child, young person and their family. It will also help identify any other professionals already working with the child or young person.
- Consider the information; identify the risks and protective factors which in turn will help you to assess the additional needs of the child or young person.
- Make recommendations about how best to improve outcomes for a child or young person both through your own service and where appropriate from others.
- Facilitate earlier and better joint working with the parent or carer before a child or young person's needs escalate.
- Improve the outcomes for a child or young person where current intervention and support processes are not working.
- Address concerns about a child or young person's well-being that are related to issues beyond your service / support.

If at any time you feel a child or young person is at risk of harm you should immediately refer your concerns to the Intake & Assessment team on 0300 300 8149.

Before you start the assessment process, please contact the CAF Support and Information Service on 0300 300 8119 to check whether a CAF has already been completed and logged by another professional. This is essential to ensure that only one CAF is in existence for a child/young person at any one time.

### **CAF Pre-assessment checklist**

The CAF Pre Assessment Checklist can be used by practitioners when deciding whether to initiate the CAF Process in relation to a child or young person.

This form is not compulsory but can be used to aid the decision making process and to trigger a CAF within your agency. It is not intended to be used directly with the family or to be shared with other agencies.

## Minimum standards when completing common assessments

### **Starting the assessment:**

It is important that all professionals contact the CAF Support and Information Service (CSIS) before they start completing a CAF for a child or young person. A CAF may already exist for the child or young person. CSIS will also be able to advise you of any other professionals/services involved with the family which may assist you and avoid duplication. Contact details are on page 10.

The common assessment is a way of recording your discussion with the child or young person and their family. You will need to make sure they understand what information you are recording and what is going to happen to it. You should consider the child or young person within their family relationship and community, including their cultural and religious context. It will help to use plain, jargon-free language which is appropriate to the age and culture of each person, explaining any unavoidable technical and professional terms.

The discussion does not have to be highly formal or presented as a 'big event.' You will want to use a method and style that suits you, the child or young person, their parent/carer, and the situation. It is not appropriate to do a common assessment without seeing or involving the child or young person.

The key points to remember about your discussion are:

- It is collaborative you are working with the child or young person and their family to find solutions, and they will often know better than you.
- You should consider the child/young person's and family's strengths as well as needs, and these should be recorded.
- If the child or young person and/or their parent/carer don't want to participate, you can't force them it is a voluntary assessment. If you are concerned about the safety or welfare of a child or young person, seek immediate advice at the end of the discussion.

## Completing the form

It is important that as many of the following sections are completed and boxes marked with an asterisk are mandatory:

### Is this Child/Young Person open to Social Care?

Please tick yes or no if you know that the child/young person is currently an open social care case. If so and it is not a step down then a CAF should be completed by the social worker only.

### Is this a step down to CAF/TAC?

If the Child/Young Person is now being closed to Social Care and needs further support via a CAF, please tick yes. A CAF can be completed at the closure meeting, preferably by the social worker and a Lead Professional must be identified.

#### Date of assessment

## Section A – Identifying details

Please ensure that as much identifying details are completed as possible. It is also important that the ethnicity and disability sections are also completed.

### **Assessment Information:**

If you have consulted with any other services/organisations regarding the child/young person then you may want to detail this in the "What has led to this unborn baby, infant, child or young person being assessed?" box. Please include all the people present at the assessment and their relationship to the child/young person.

# Section B – Details of family

It is important that details of the current family and home situation is completed, this should include:

- Parents
- Grandparents
- Other significant adults that the child/young person may spend time with
- Siblings
- Who lives with the child/young person and who does not live with the child/young person
- · Any other relevant details

## Section C – Details of person making assessment

It is essential that all details of the person who completes the assessment are filled in as well as the details of the nominated Lead Professional if known. If the Lead Professional is nominated after the assessment has taken place, then fills in the details on the form and notifies CSIS.

# Section D – Services working with this child

It is essential that the GP details are filled in as this is needed for some referrals to certain agencies. Details of the different services that are working with the child/young person should also be completed; this can include Nursery/school, children's centre, etc.

## **Section E - Assessment Summary**

You should explore areas around your immediate concern, so as to look behind the presenting issues and come up with a more holistic view. You do not need to comment on every element; include only what is relevant.

#### The section includes:

- Development of the child try to detail as much information as possible about the child's/young person's general and physical health, emotional well-being such as self esteem, behavioural development, relationship and social skills with family and peers, education - such as at risk of school exclusion.
- Parents and Carers details regarding basic care, safety and protection, emotional warmth and stability including family environment, frequency of house moves and school changes, encouragement and praise
- Family and Environmental Factors details regarding family history, extended family support, housing, employment and financial situation, social networks, and issues such as domestic violence and/or substance abuse.
- What are the child/young person's/families strengths and resources, what are their needs – e.g. no additional needs, additional needs, complex needs, risk of harm to self or others

### Section F – Conclusions, solutions and actions

With the child or young person and parent/carer identify what changes are wanted, what they can do and what you will do to help this change and what do you want others to do? Make sure they understand what is proposed. Try to focus on what the child or young person and family can do for themselves. Do not make any promises of support on behalf of other services.

Record the child/young person and parent/carer comments on the assessment and actions identified. Give a copy of the assessment to the child/young person or their parent/ carer and explain that they can show it to other services if they wish to, so they don't have to keep repeating their stories.

# Section G – Consent statement for information storage and information sharing

Explain that with their consent, the assessment will be stored securely by your agency, and will also be copied to the CAF Support and Information Service for logging on a central database.

Once any questions have been resolved, use the box "List of Organisations" to explicitly record which agencies the child or young person and/or parent/carer does and does not consent to sharing their information with, and for what purpose, and also to record any other limits to the consent.

# What is a Team around the Child (TAC) meeting?

A TAC meeting is an opportunity for practitioners and families to discuss how additional needs can be met.

The action plan made during a Common Assessment may require the services of more than one additional agency. Ordinarily, the practitioner undertaking the common assessment should refer to the necessary agencies and/or call a TAC meeting to ensure their role in the plan can be recorded using the delivery plan and review.

#### Who is involved?

The CAF author will coordinate and chair the first TAC meeting and invite professionals directly involved in supporting the child or young person to attend the meeting. The Lead Professional will be appointed at this meeting.

Copies of the CAF Form are to be shared with all relevant practitioners that will be attending, before the meeting. Practitioners should bring any additional information along to the meeting as appropriate. Attendance at the meeting is expected of all relevant practitioners. Practitioners unable to attend will take responsibility for informing the CAF Author or Lead Professional and provide information, which can be presented to the meeting in their absence.

It is imperative that the child, young person and/or their parent/carer is also invited to the meeting and has an opportunity to participate in any decision-making. During the CAF assessment the child, young person and their parent/carer must be clearly listened to and they should be involved in recommending what services and support they feel would help.

The meeting venue should be confidential, safe and accessible and the meetings timed to take account of other family commitments.

A key task of the chair is to ensure that all those present, including the family, have an opportunity to contribute to the discussion, formulate and review the delivery plan. The discussion can be recorded on the Delivery Plan and Review paperwork.

### What are the anticipated outcomes?

TAC meetings will always agree the following:

- Action plan identifying who will be doing what and how this will be measured.
- Named or continuing Lead Professional, as required.
- Date of review meeting.

In addition the meeting may also wish to consider:

- Further assessments.
- Actions by family members.
- Actions by practitioners who are present at the meeting.
- Request for services from agencies not present.

At the end of the review the CAF should either be closed or another review date agreed. Make sure any additions to the desired outcomes/action are made or a new plan drawn up if required.

Consent and information sharing issues should be revisited with the young person, parent and/or carer, and along with the lead professional, should all sign the consent section of the delivery plan and review before distributing to other practitioners and agencies.

If the decision is made to close the CAF make sure you record the reason i.e., needs met, Social Care involvement, consent withdrawn or moved away.

After the meeting, send the signed copy to CSIS to confirm that the delivery plan has been agreed.

### What if's

#### What if the parents/carers/young person doesn't turn up?

If this is the case the Lead Professional will need to try and contact them to see if they are running late. If you get no response the TAC will have to be postponed. A TAC must <u>never</u> proceed without the parents/carers or child/young person.

#### What if conflict occurs between TAC members?

Should conflict arise in the room the Lead Professional will need to advise that the conversation will need to continue after the meeting? Where the conflict may affect ongoing work with the child or young person escalate this to the CAF Support & Information Service.

### The role of the Lead Professional

Where a child or young person with multiple additional needs requires support from more than one practitioner, the Lead Professional is someone who:

- Acts as a single point of contact, supporting the child/young person and their parents/carers in making choices and navigating their way through the system. However, the Lead Professional is not an advocate for the child/young person or the parents/carers.
- Ensures that they get appropriate interventions when needed, which are well planned, regularly reviewed and effectively delivered through the CAF delivery plan.
- A practitioner cannot be identified as the Lead Professional in their absence unless this has been previously agreed.
- The Lead Professional is not accountable for the actions/tasks of other practitioners within the group or the group as a whole. Tasks/actions within the group must be defined and recorded in the Delivery Plan and Review and each practitioner is responsible and accountable for their own actions/tasks.
- Although the Lead Professional will usually have the fullest ongoing picture of the child or young
  person's needs and the impact of action plan, it is the responsibility of all practitioners involved
  to ensure that the child or young person is protected from significant harm. Therefore if you are
  concerned that a child or young person may have suffered significant harm or may be at risk of
  significant harm, you must immediately notify Intake & Assessment on 0300 300 8149.

More information can be found on

www.education.gov.uk/childrenandyoungpeople/strategy/integratedworking/a0068961/the-lead-professional

### The review process

The Lead Professional is responsible for co-ordinating the review process. Other relevant agencies and the child, young person and parent or carer should support this. The review date will be recorded on the plan. A maximum of 3 monthly intervals is suggested.

The following options are suggested for reviewing the action plan:

- 1. Lead professional to arrange a meeting with the family and all agencies
- 2. Lead professional to gather reports from all agencies and share with the family
- 3. Lead professional to confirm actions have been met at review date and share with the family.

The Delivery Plan must be signed by the parent/carer, child/young person (where appropriate) and the lead professional, to show that the next steps are understood and agreed.

## **TAC Agenda**

The TAC agenda should include the following:

- Welcome and introductions (Chair)
- Summary of needs and update since the CAF was written (Chair & Family)
- Opportunity for questions (All)
- Agreement on un-met needs (All)
- Agreement on how needs can be met (All)
- Completion of the Delivery Plan (Chair to complete, also acts as a summary)
- Agreement of the Lead Professional (All)
- Agree on review date (All)

### **TAC Invitation Letter**

Below is a suggested letter to use when arranging a TAC. Please feel free to adapt and change the letter to suit your own agency/requirements.

**ABC EFG** 

Name ABC EFG
Your ref:

Address 1

Address 2 Our ref:

Address 3 DD/MM/YYYY

Date:

Address 4

Postcode

### RE: TAC meeting for (child's name)

### **Dear Colleague**

You should have already been contacted by telephone or e-mail regarding the arrangement of a TAC meeting for the above named child/young person. The TAC has been arranged on (date & time) at (venue). Enclosed is also a copy of the CAF assessment for you to read before the meeting, we do however ask you to permanently delete the CAF once you have finished with it.

Please confirm if you are able to attend the TAC meeting within two working days of receiving this letter. If you are unable to attend please advise the work your agency is able to undertake and the time scales involved so we can add it to the delivery plan.

Yours sincerely

A.N. Other

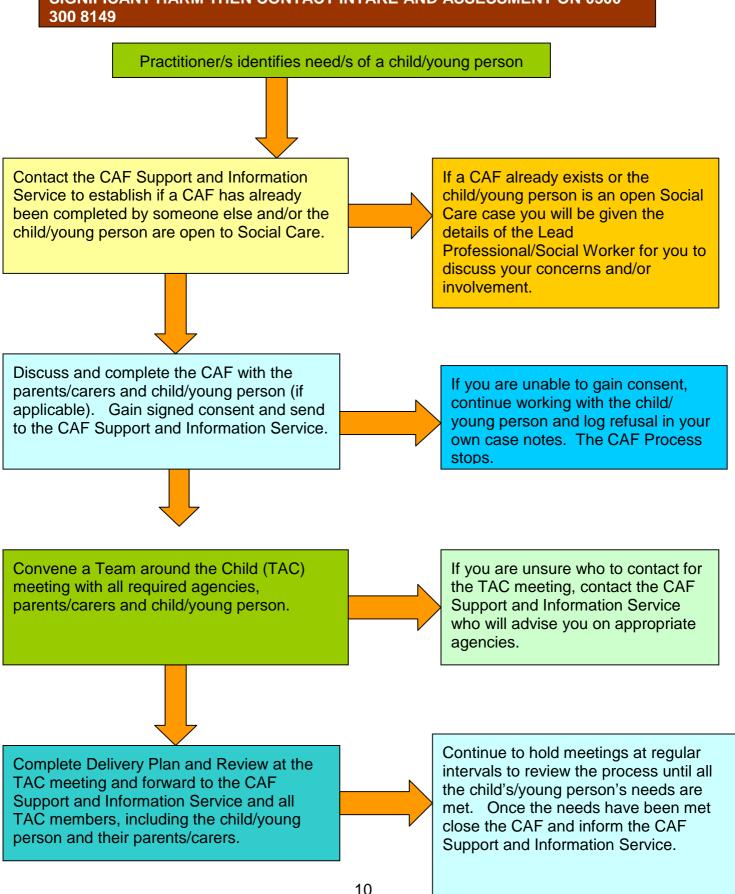
Job title

**Direct telephone** 

**Email** 

### **CAF Process Flowchart**

IF YOU ARE CONCERNED THAT A CHILD/YOUNG PERSON IS AT RISK OF SIGNIFICANT HARM THEN CONTACT INTAKE AND ASSESSMENT ON 0300 300 8149



# **CAF Support & Information Service contact details**

**Postal Address:** DC2, Central Bedfordshire Council Offices, High Street North, Dunstable, Bedfordshire, LU6 1LF

CAF Support & Information Service helpline: 0300 300 8119

E-Mail address for all CAF forms, delivery plan and review documentation: <a href="mailto:cafadmin@centralbedfordshire.gov.uk">cafadmin@centralbedfordshire.gov.uk</a>

Web: www.centralbedfordshire.gov.uk/caf



### **Pre-assessment checklist**

Identifying details - Record details of unborn baby, infant, child or young person being referred. If unborn, state name as 'unborn baby' and mother's name, e.g. unborn baby of Ann Smith.								
Given name(s)*	Family name*				Was this known by names		er	
Male	] Unknown		Date of	birth or E	DD*			
Address*			Contact	name*				
			Contact	tel. no*				
Postcode								
Does the baby, child or young	person appear to	:						
Be physically healthy?		Yes			No		Not sure	
Be emotionally well? Yes					No		Not sure	
Be learning and developing – making Yes progress? (this can include speech and language)					No		Not sure	
Get on with others, have good relationships, has friends and lik others?	ed by	Yes			No		Not sure	
Safe and protected from harm?		Yes			No		Not sure	
Can your service offer support?		Yes			No		Not sure	
If you have answered No or Not sure to three or more of the questions above and you cannot provide the support needed within your own service then a CAF will be required.  Please contact the CAF Support and Information Service on 0300 300 8119 to check whether a CAF has already been completed for this child and also advice on agencies that can offer support.								

Notes for use: \* indicates that this field must be completed. If you are completing the form electronically, text boxes will expand to fit your text. Where check boxes appear, insert an 'X' in those that apply



Please contact the CAF Support and Information Service on 0300 300 8119 to check whether a CAF has already been completed for this child.

Is this Child/Y	oung	g Person op	en to	Yes	No			Is this a Step down to CAF/TAC?				No		
Social Care?							to CAF/TAC?							
								·						
Date assessm	ent s	started					Date of review	w						
Section A: Identifying details - Record details of unborn baby, infant, child or young person being referred. If unborn, state name as 'unborn baby' and mother's name, e.g. unborn baby of Ann Smith.							Э							
Given name(s)*														
Male	Fe	emale [	] (	Jnknown			Date of birth or E	EDD*						
Address							Postcode							
							Contact tel. no	*						
Early years set currently attended		school						you	ng p	ild or Yes erson at cclusion?	s 🔲	N [		
Is the child or y person a carer		g Yes [	N		special	requi	details and any irements signing or							
Does the child young person hadditional need	nave	_	N	o 🗆 '	access	need	ls							
Ethnicity*														
White British		Caribbean		Indian			White & Black Carib	bean		Chinese				
White Irish		African		Pakistani			White & Black Africa	an		Traveller of Irish	Heritage		ב	
Gypsy/Roma		Bangladeshi		White & Asia	ın		Not given							
Any other Black b	ackgr	ound*					Any other Asian bad	ckground*					ו	
Any other White b	oackg	round*					Any other ethnic gro	oup*					ב	
Any other Mixed I	backg	round*		If other, pleas	se specify	y								
Child's first language				Parent's first language			Immigration status							
Assessment in	nforr	mation												

Notes for use: \* indicates that this field must be completed. If you are completing the form electronically, text boxes will expand to fit your text. Where check boxes appear, insert an 'X' in those that apply



What has led to this unit	oorn baby, infant	t, child or yo	ung person bei	ng assessed?		
People present* (pleas	e use separate	sheet to rec	ord additional p	eople)		
Name			or relationship t g person	o child or	Contact telephone	no/email
Section B: Details of I and/or brothers, other s					cture including mo	ther, father, sisters
Name	Date of Birth	Address a	& Contact tel	Relationship to child	Parental responsibility	Additional need (e.g., literacy levels, special requirements)
Section C: Details of	person making	g referral				
Name*				Contact tel no	*	
Organisation*				Role*		
Address*				Postcode*		
				Email*		

Notes for use: \* indicates that this field must be completed. If you are completing the form electronically, text boxes will expand to fit your text. Where check boxes appear, insert an 'X' in those that apply

Larry Help Ass	essillerit for Cillio	iren and young p	Redfordshire				
Name of Lead Professiona (if applicable)		Contact tel no*					
Email*							
Section D: Services work	king with this child (eg, GP, nurs	sery, school, Children's Centre, o	ther relevant organisations)				
Service	Address		Contact tel no				
GP*							
Social Worker*							
* GP must be filled in for CHUMs re	eferral. Social Worker if applicable.						
Section E: CAF assessment summary; strengths and needs (Please give any relevant information, you do not need to comment on every heading. Wherever possible, base comments on evidence, not just opinion, and indicate what your evidence is. If there are any major differences of view, these should be recorded too.)							
Development of the child							
Include information regardi education.	ng health, emotional well-being, b	ehaviour development, family rel	ationships, social skills and				
Parents and Carers							
Include information regardi boundaries and stimulation	ng basic care, ensuring safety and	d protection, emotional warmth a	nd stability, guidance,				
Family and Environmenta	al Factors						
Include information about family history and functioning, wider family, housing, employment and financial considerations and social and community elements							
Strengths/Resources		Needs and Worries					
on enginerixesources		TICCUS AIIU WOITICS					

Section F: Conclusions, solutions and actions\* (Now the assessment is completed you need to record conclusions,

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solutions and actions. Work with the child or young person and/or parent or carer, and take account of their ideas, solutions and goals. At least one action must be entered. In order of priority list the actions agreed for the people present at the assessment)

Desired Outcomes/Aims	Action	Who will do this?	By when?
(as agreed with child, young person and/or family)			
Child or young person's com	ment on the assessment and acti	ons identified	
Parents or Carers comment of	on the assessment and actions ide	entified	

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#### Section G: Consent statement for information storage and information sharing\*

"We (Central Bedfordshire Council) need to collect the information in this CAF form so that we can understand what help you may need. If we cannot cover all of your needs we may need to share some of this information with the other organisations specified below, so that they can help us to provide the services you need. If we need to share information with any other organisation(s) later to offer you more help we will ask you about this before we do it."

"We will treat your information as confidential and we will not share it with any other organisation unless we are required by law to share it or unless you or any other person will come to some harm if we do not share it. In any case we will only ever share the minimum information we need to share."

A copy of the CAF form is stored and logged centrally by the CAF Support and Information Service. There may also be occasions where it is necessary to undertake audits to ensure the process is meeting the needs of children, young people and their families in Central Bedfordshire.

					Child or young Pare person or					
I agree to the assessment and understand why the CAF completed and my role within it	is being	Yes		No		Yes		No		
I understand that the CAF is a voluntary process and I ca consent at any time	an withdraw	Yes		No		Yes		No		
I understand that only information relating to myself or m will be recorded and that all paper copies will be stored in and electronic copies on a secure computer		Yes		No		Yes		No		
I understand that the CAF Form will be recorded and log- Bedfordshire's Council PSS and Frameworki databases.	ged on Central	Yes		No		Yes		No		
I have had the reasons for information sharing and information storage explained to me and I agree to the sharing of information with Children's Services practitioners and between the services listed below:								No		
List of services: e.g., parenting, school, etc.										
Child or Young Person's signature	Printed name						Date	•		
Parents/Carer's signature	Printed name						Date			
Assessor's Printed name signature							Date	•		
Exceptional circumstances: concerns about significant harm to infant, child or young person  If at any time during the course of this assessment you are concerned that an infant, child or young person has been harmed or abused or is at risk of being harmed or abused, you must follow your Local Safeguarding Children Board (LSCB) safeguarding children procedures. The practice guidance What to do If you're worried a child is being abused (HM Government, 2006) sets out the processes to be followed by all practitioners. If you think the child may be a child in need (under section 17 of the Children Act 1989) then you should also consider referring the child to children's social care. These referral processes will be included in your local safeguarding children procedures and can be found in the booklet Working Together to Safeguard Children. You should seek the agreement of the child and family before making such a referral unless to do so would place the child at increased risk of significant harm. More information can be found on <a href="https://www.centralbedfordshire.gov.uk">www.centralbedfordshire.gov.uk</a>										

Notes for use: \* indicates that this field must be completed. If you are completing the form electronically, text boxes will expand to fit your text. Where check boxes appear, insert an 'X' in those that apply

Additional Information: (if required)			Redfordsh
(			
Please and a copy of the completed CATA	the CAE Support and In	formation Carries Cantral De	dfordobire
Please send a copy of the completed CAF to Council, Watling House, Second Floor, E			
	min@centralbedfordshire		

Notes for use: \* indicates that this field must be completed. If you are completing the form electronically, text boxes will expand to fit your text. Where check boxes appear, insert an 'X' in those that apply

Central	
Bedfordshi	re

<b>Delivery Plan ar</b>	nd Review		Date					
Identifying details - Record details of unborn baby, infant, child or young person being referred. If unborn, state name as 'unborn baby' and mother's name, e.g. unborn baby of Ann Smith.								
Given name(s)*	Family name*		s child known by other names					
Male Female	☐ Unknown ☐	Date of birth or EDD*						
Address*		Postcode						
		Parent/Carer tel. no*						
Parent/carer name*								
Desired outcome (at least or must be entered as agreed wayoung person, family)			and by comr	ress and ments (including completed)				

Notes for use: \* indicates that this field must be completed. If you are completing the form electronically, text boxes will expand to fit your text. Where check boxes appear, insert an 'X' in those that apply



People present*						
Name		Role or relation	nship to	child or young	Contact	telephone no/email
Review notes ?(includ	e next steps)*					
Child or young person's	comment on the	e assessment a	and action	ons identified*		
Parents or Carers comr	ment on the asse	essment and ac	tions id	entified*		
Can the CAF be close	d?*	Yes	Reaso	on for closure		
		No 🗆	Agree	d review date		
Signatures*						
Parent				Child or young	person	
Lead professional				Lead Profession and/or contact		
	ouncil, Watling	House, Secor	nd Floo			ind Information Service, orth, Dunstable, Bedfordshire

Notes for use: \* indicates that this field must be completed. If you are completing the form electronically, text boxes will expand to fit your text. Where check boxes appear, insert an 'X' in those that apply

Central Bedfordshire Council www.centralbedfordshire.gov.uk



# Step Up/Step Down

**Process and Guidance** 

Security classification: Protected

The purpose of this guidance is to support staff in CAF Support and Information Services, and Social Care Services, in achieving progression both upwards and downwards through the levels of support available to children and their families via the Framework I database. The desired outcome is that all interventions are proportionate to the child's needs and at the optimum level to have the maximum impact and benefit for the child/family, using resources in the most efficient manner. The child and family should experience the process as seamless and without delay. Key relationships should be maintained where this is in the child's best interest.

**'STEP UP'**: A service request is made to Social Care Services for a child currently supported within the Common Assessment Framework (CAF).

**'STEP DOWN'**: A service request is made to the CAF Support and Information Service for a child currently supported by Social Care Services which will be closing.

## Step Up

A child who has been assessed via the Common Assessment Framework and is being supported by the CAF Support and Information Service may need an assessment from Social Care Service. This could be because the child's needs have changed or escalated. The child may require a different service to that offered by CAF Service, or may require a specialist service in addition to that offered by the CAF Service.

The CAF (or any individual member) may at any point conclude that a specialist intervention is necessary. If a child protection concern is identified, a referral should be made without delay via Intake and Assessment (I&A). Other concerns should first be discussed with the CAF Support and Information Manager. In relation to thresholds being clear, this will avoid unnecessary requests or assessments, saving time and resources in both services. It also avoids subjecting children and families to these processes unnecessarily.

Consent should be sought from the family prior to a step up request, or unless seeking consent would place the child at increased risk of significant harm. Any decision to proceed without consent should be taken in consultation with the CAF Support and Information Manager. Guidance on information sharing and informed consent can be found at: <a href="https://www.education.gov.uk/childrenandyoungpeople/strategy/integratedworking/a0072915/information-sharing">www.education.gov.uk/childrenandyoungpeople/strategy/integratedworking/a0072915/information-sharing</a>

For all step up requests, complete a CAF Early Help Form and send the CAF delivery plan, and record of the last CAF meeting to I&A (indicating that this is a 'Step Up').

If the referral to Social Care Services is not accepted by I&A Service as meeting the 'child in need' threshold, the CAF process should continue as before, although a further referral should be made if concerns escalate in the future. The CAF Service and the Lead Professional should be informed of the decision.

If the case is allocated for an Initial Assessment within Social Care Services, any service provided by the CAF process should continue while the Initial Assessment or S47 enquiry is carried out. Communication must take place between the Social Care Service and the CAF Support and Information Service to ensure service provision is maintained.

If, following this assessment, the child is assessed to be 'in need' and Social Care Services provide a service, the allocated social worker will assume the lead professional/ keyworker role and will convene a Child in Need meeting or Child Protection Conference as appropriate. Those professionals already involved should be invited to these meetings.

Social Care Services will convene regular reviews of the CIN/CP plan, and will aim to reduce the need for Social Care Involvement. The Step Down process may be used to ensure support through the CAF process, or the case may be closed.

# Accessing Integrated Services as an outcome of Initial Assessment

Following an Initial Assessment, the child may not be considered a Child In Need and support from CAF identified and agreed with the family. The social worker should ensure that this decision is communicated to the referrer who should commence/continue to work with the child and should be provided with a copy of the initial assessment (where there is a recorded parental consent). The referrer should liase with the CAF Service with regards to support and services.

The CAF Service, will ensure that they receive a copy of the signed consent and all minimum data to enable this to be logged as new CAF episode. The referrer will convene an initial TAC meeting, and will invite the parents/carers, child/young person where appropriate, and any agency currently involved. The initial meeting will produce a CAF Delivery Plan, identify a lead professional, and set key dates.

# Step Down (from Child in Need to CAF/Integrated Services)

Criteria: Social Care Services should always aim to reduce their involvement as the child's needs become met. If, when a decision has been made that a child is no longer a child 'in need', but an ongoing level of support is required and the family have given explicit and informed consent to the support and to information being shared, then Social Care Services should seek support from CAF Service via the 'step down' process.

Decision to initiate 'step down'. The decision to refer for 'Step Down' will be made by the Social Care Services Service Managers in conjunction with the social worker. This may have been informed by a child 'in need' review meeting or CP Review Conference. Cases must not be stepped down so that children's cases can be 'monitored' or in order to make an onward referral to another agency.

Step down cases will be reviewed by the CAF Support and Information Service who will agree the outcome of Step up/Step Down requests based on the information provided in each case.

Cases that are agreed between the Service as suitable will 'step down' without delay and irrespective of capacity. Priority for allocation of 'stepped down' cases will then be evaluated within the overall workloads of the CAF Service.

The CAF Service will be able to view the information within frameworki on the family's unmet needs. This may include:

- A recent initial or core assessment
- CIN plan and CIN chair's report
- Decision & chair's report from final CP review
- Specialist assessment or other relevant supporting information.

When a case is being stepped down from an existing CIN plan the social worker will convene a final CIN Review meeting which will also serve as the initial CAF meeting. The social worker will inform the family and other professionals. This meeting should identify a new lead professional and produce a CAF delivery plan.

## Recording

Cases open to Social Care Services are recorded on the CCMS (fwi) system. This will include all information form the point of a referral into Social Care Services, until the case is closed to that service. The recording may also include information provided by the family or any agencies that pre dates Social Care Services involvement, where this informs assessment and planning. Management decisions to close the case and recommendation to 'step down' to Integrated Service/CAF service should be clearly recorded on CCMS (fwi).

Where a family is receiving support via CAF, the recording procedures on CCMS (fwi) will be used.

The CAF Service should be informed about all cases subject to Step Up and Step Down process with the required information.

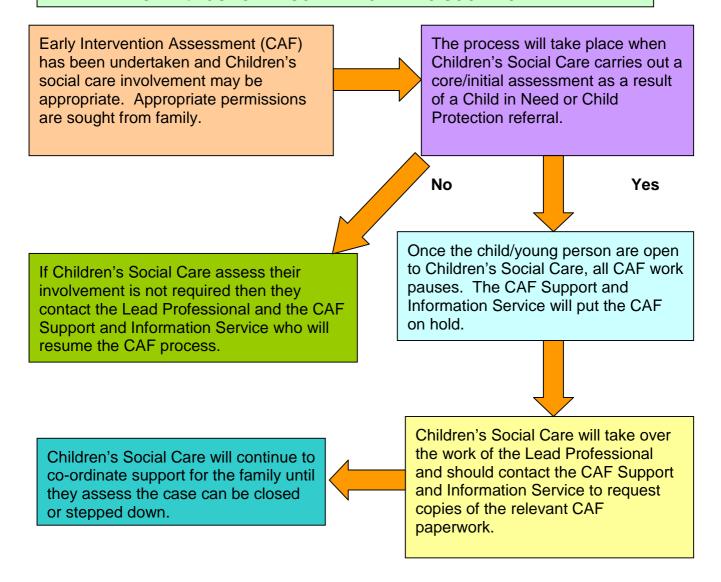
### **Escalation**

In the event of Managers not agreeing on a decision to 'step down' this should be escalated to Social Care Manager and HOS who will ensure resolution within 7 days. It is envisaged that this step will be required in a very few cases.

### **CAF Step Up to Social Care Flowchart**

This flowchart outlines the process of when a child/young person moves from CAF to Children's Social Care and vice versa. Each individual case is different.

UNDER NO CIRCUMSTANCES MUST A CAF/TAC CONTINUE IF THE CHILD/YOUNG PERSON ARE OPEN TO SOCIAL CARE



### Social Care Step Down to CAF Flowchart

Children's Social Care involvement is no longer required and a need for support from tier 2 services has been identified.



Children's Social Care convenes a closure meeting and invites the Lead Professional/referrer. Lead Professional identified and referrals to supporting agencies made through the CAF process. The CAF Support and Information Service will give advice and support if required.