



***MULTI-AGENCY SAFEGUARDING CHILDREN
INFORMATION TO ASSIST GOOD PRACTICE***

COMMON ASSESSMENT FRAMEWORK PROCEDURE

Adopted **November 2010 (V1)** by

**Stockton-on-Tees Children's Trust
Board & Local Safeguarding Children
Board**

SLSCB Procedures : Section **5.3**

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1. INTRODUCTION

- 1.1 Common Assessment Framework (CAF) is a national standardised approach that is used across all services working with children, young people and their families. It is a holistic assessment tool that summarises a child's strengths, needs and goals after considering all aspects of his/her life, family and environment. It designed to be shared between professionals/services and used as a starting point for planning coordinated multi-agency support. The CAF process is underpinned by collaborative partnership working with families and the child/young person. Stockton's process is broken down into 5 steps which provide a robust and fluid system for practitioners to use. CAF 1 (Pre CAF) does not require consent but enables practitioners to consider whether CAF 2 assessment is required. Consent must be obtained from a parent/carer and a Fraser competent young person before using the CAF 2. CAF 3 is a universal referral form to services. CAF 4 is used for reviewing and planning. The CAF Closure form is to enable the practitioner to inform all services that the CAF episode has finished.

2. PURPOSE/PRINCIPLES

- 2.1 The Common Assessment Framework process for children, young people and families will help agencies meet the obligations set by Sections 10 and 11 of the Children Act 2004 to make arrangements to safeguard and promote the welfare of children and young people. The CAF process will help early identification of need and promote coordinated service provision for children with additional needs.

3. SCOPE

- 3.1 This procedure applies to all professionals/practitioners working, or coming into contact with, all children, young people and families. For those services not directly working with children, young people and families, please refer to 10 .3.

4. REFERENCES

- 4.1 This procedure should be used and read in conjunction with Stockton-on-Tees Children's Trust Board and Local Safeguarding Children Board:

SLSCB Procedures for safeguarding children

<http://www.stockton.gov.uk/citizenservices/safeg/procpro/lscbproc/>

Continuum of Need and Services

<http://www.stockton.gov.uk/citizenservices/safeg/procpro/>

"An introduction to CAF"

<http://www.stockton.gov.uk/resources/childrenstrust/cafdocs/INTO2CAF.pdf>

"How to complete CAF Forms"

<http://www.stockton.gov.uk/resources/childrenstrust/cafdocs/doingacommonassess.pdf>

Children Act 1989 and 2004

Every Young Person Matters: Change for Children in Social Care 2004

Working Together to Safeguard Children 2010

First Contact Team Tel: 01642 527764

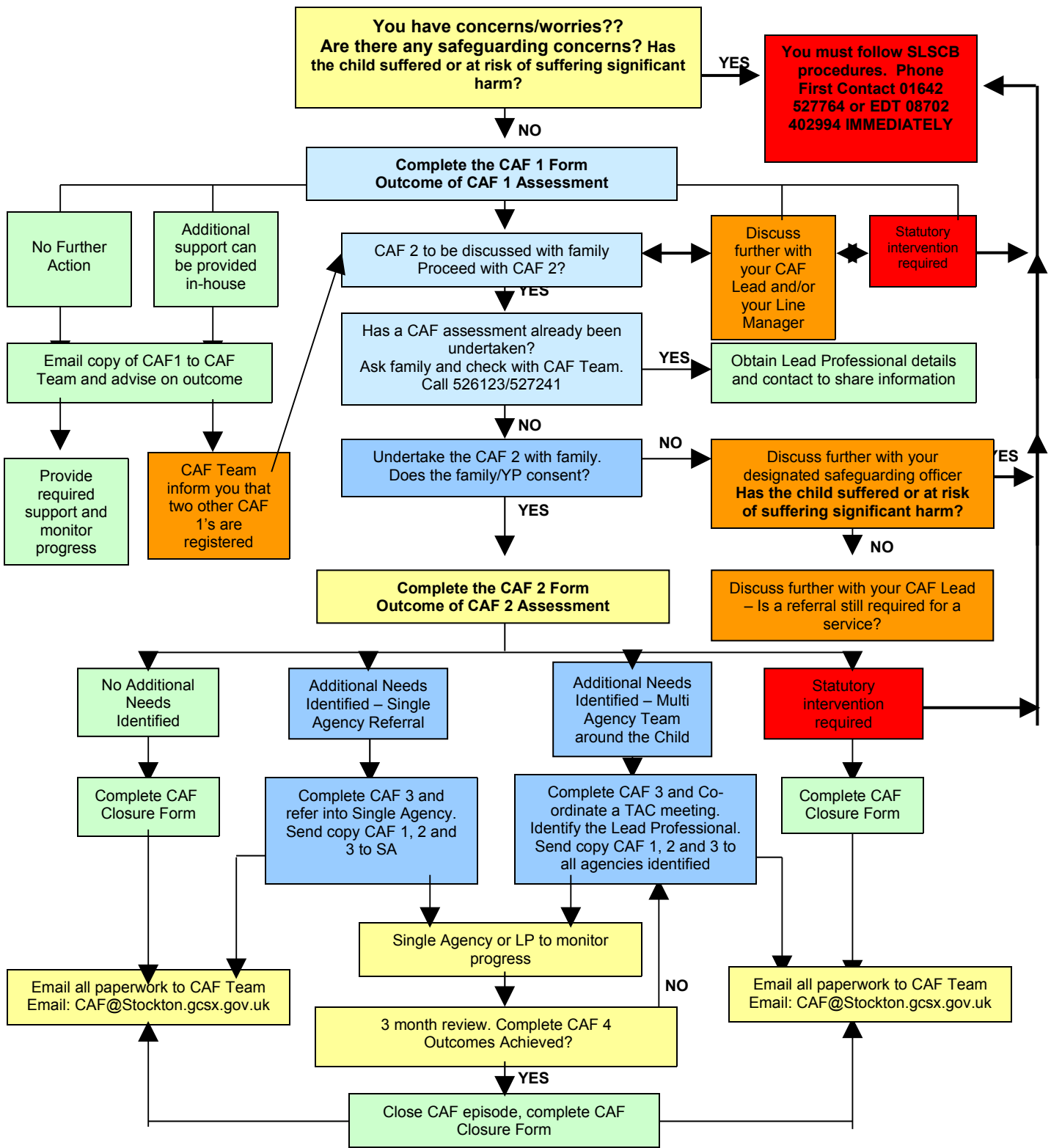
Emergency Duty Team. Tel: 08702 402994 (Outside of Hours)

5. PROCEDURE

5.1 This procedure is separated into the following areas:

- 6 Process overview chart
- 7 Role of involved professionals
- 8 Pathways
- 9 Continuum of Need and Services
- 10 Completing a Common Assessment.
- 11 Team around the Child (TAC)
- 12 Review of Progress
- 13 Closure of episode
- 14 Step Up Step Down process

6. COMMON ASSESSMENT FRAMEWORK PROCESS – FLOWCHART



7. ROLE OF INVOLVED PROFESSIONALS

- 7.1 Within each agency/service there is an identified CAF Strategic Champion who is accountable for the strategic overview, implementation and promotion of CAF within their area of responsibility.
- 7.2 Within in each setting there are at least two CAF Leads that are responsible for ensuring the operational delivery of CAF across their settings. They will be the point of contact for the setting and provide support and advice to practitioners completing CAF's.
- 7.3 Every professional/practitioner who works with, or delivers services to, children/young people and their families will be responsible for commencing the CAF process where they have identified additional needs that can not be met within universal services.

8. PATHWAYS

- 8.1 The need for CAF will predominately be identified through universal services and those practitioners working with children/young people and their parents/carers on a regular basis will recognise when families require supportive early intervention. The following services are therefore best placed to conduct the CAF process.

0-5 yrs

Children's Centres

Health Visitors

Midwifery Service

Primary Schools

Early Years & Childcare Service

GP's/Dentists

Voluntary, Private and Independent Sector

5-11 yrs

Primary schools

School Nurses

GP's/Dentist

Voluntary, Private and Independent Sector

11-18 yrs

Secondary schools

School Nurses

Connexions

IYSS

GP's/Dentists

Voluntary, Private and Independent Sector

9. CONTINUUM OF NEED AND SERVICES

- 9.1 Stockton's continuum of needs and services provides a clear framework of required professional intervention in relation to levels of vulnerability. The windscreen model, appendix 2, offers quick reference to the continuum of a child's needs but must be used in conjunction with the Continuum of Need and Services guidance. <http://www.stockton.gov.uk/citizenservices/safeg/procpro/> See Appendix 1 for Continuum of Need and Services windscreen model.

9.2 The vast majority of children stay within level 1 and their needs are effectively met within universal services, at the other end of the windscreen are a small percentage of children, who are within level 4 and 5 and will require a statutory or specialist service. CAF is not to be used for those Children with significant additional needs that have not been met following a coordinated, multi agency response and for whom significant concerns remain and it has been identified that statutory intervention is required. Where this is applicable a practitioner must follow Stockton's Local Safeguarding Children Board procedures for safeguarding children. <http://www.stockton.gov.uk/citizenservices/safeg/procpro/lscbproc/>

9.3 At level 2 and 3 are those children who require some additional support and services to meet their identified needs. It is at this is the point at which the CAF process should be used.

9.4 CAF should be considered when:

- You are concerned about how whether a child is failing to meet one or more of the Every Child Matters outcomes, which are:

Be Healthy
Stay Safe
Enjoy and Achieve
Make a Positive Contribution
Achieve Economic Well-Being

- A child, young person or parent has raised a concern with you
- A child or young person's needs are unclear, or broader than your service can address
- A CAF would help identify or clarify the child or young person's needs, and help to involve other agencies in meeting those needs

The CAF does not replace specialist assessments such as the Framework for the Assessment of Children in Need or the Special Educational Needs Code of Practice. Where it is identified that a further specialist assessment may also be required the CAF process will provide better evidence based information to access such services.

10. COMPLETING A COMMON ASSESSMENT

CAF 1

10.1 Before you commence CAF 2, CAF 1 must be completed to help you consider if the assessment process CAF 2 is required. CAF 1 does not have to be completed with the child or parent present. CAF 1 does not need consent.

10.2 Practitioners should discuss their findings with the designated CAF Lead in their service and record the outcome on the Child's records/file.

10.3 For those services/practitioners who do not work within children's & young peoples services but, identify during the course of their own work, there is a child or young person in the household who may require additional support they must complete CAF 1. Once completed this must be sent through the identified pathway. The CAF Lead for that service will contact the parents/carers and child/young person to try to obtain consent to undertake a CAF 2 assessment. Such agencies may include Housing, Tristar, Adult mental health and substance misuse services, Police, Substance and Leisure etc. This list is not exhaustive.

- 10.4 Where a practitioner is concerned, the child has suffered or is at risk of suffering significant harm SLSCB procedures must be followed and they must ring First Contact on 01642 527764, or for out of hours EDT on 08702 402994.

Registering a CAF 1

- 10.5 Once CAF 1 is completed the practitioner must contact the CAF team on 526123 to register the CAF 1, advise of the outcome of CAF 1 and to see if the child is already known on the database. The outcome will be recorded on the database. The practitioner must e-mail the form to the CAF team within one working day, this must be password protected. Email: CAF@stockton.gcsx.gov.uk
- 10.6 If the outcome is NFA but the database indicates there have been two previous CAF 1's undertaken, the practitioner will be given this information and then be responsible for undertaking CAF 2. The practitioner must then inform the CAF lead in their service.

Consent and the CAF

- 10.7 In order to effectively identify needs and solutions, practitioners will need to share information with other agencies. Before commencing CAF 2 the practitioner needs to discuss with parents, carers and the child/young person and seek their consent to participate and share information. A young person aged 16 or over, or a child under 16 who is deemed Fraser competent, may also give (or refuse) consent.
- 10.8 Informed consent from the child/parent is an essential requirement for the completion of CAF 2. In the event that a practitioner has concerns that a child has additional needs which are unlikely to be met if consent is refused, the practitioner, together with his/her line manager or agency designated officer should consider whether information sharing without consent can be justified under Section 17 Children in Need or Section 47 Children in Need of Protection. **(If in doubt share)** Refer to SLSCB Procedures & Practice Guidance. <http://www.stockton.gov.uk/citizenservices/safeg/procpro/>

CAF 2

- 10.9 Once the CAF 1 has been completed and the outcome is to proceed to CAF 2, but on registering the CAF 1 the practitioner is informed there is already an active CAF, you should share your information with the current Lead Professional, and where a CAF episode has ended, you can ask for a copy of the original assessment (where the child/young person or family consents to the sharing of the document). The CAF team will advise you of the details of this.
- 10.10 The CAF 2 was created to assess important aspects in the life of a child or young person. To help with the process please complete in as much detail as possible. It's useful to think of the CAF 2 as a means for recording the discussions you have had. The handbook 'How to complete CAF Forms' is a useful reference tool. <http://www.stockton.gov.uk/resources/childrenstrust/cafdocs/doingacommonassess.pdf>
- 10.11 When the assessment process is complete and any needs have been discussed, parents/carers, child /young person and the practitioner will have a better understanding of what additional or unmet needs there may be. It will be helpful at this point to talk about and agree on the outcomes intended for the child or young person. Focusing on a realistic outcome will also help to clarify how to meet the need, and helps manage everybody's expectations. At the end of the discussion there should be a list of agreed actions that practitioners, child /young person and parents need to undertake to meet the needs.

Outcome of CAF 2

- 10.12 If it is identified that there are no additional needs at this time the practitioner must complete the CAF Closure form to complete this episode and e-mail all paperwork to the CAF Team. Information will be logged onto the database.
- 10.13 Where additional needs have been identified but can be met by a single agency, the practitioner must complete the CAF 3 and send this with CAF 1 and 2 to the agency/service. All paperwork must also be e mailed to CAF@stockton.gcsx.gov.uk
- 10.14 Where a multi agency response is required, the practitioner will need to consider and coordinate the Team around the Child process (TAC). The practitioner will send CAF 1, 2 and CAF 3 to all relevant agencies/professionals that need to attend the meeting. Once a Lead Professional has been identified at the TAC meeting they will be responsible for monitoring progress and coordinating future review TAC meetings. Once the outcome has been achieved a CAF closure form must be completed and this with all other CAF paperwork must be sent to CAF@stockton.gcsx.gov.uk.
- 10.15 If at any time during the CAF process a child/young persons additional needs are not met despite coordinated support, or they are felt to be at risk of or have experienced significant harm the practitioner must follow SLSB Procedures & Practice Guidance. <http://www.stockton.gov.uk/citizenservices/safeg/procpro/>

11. TEAM AROUND THE CHILD (TAC)

- 11.1 A TAC meeting should be convened where two or more agencies are identified to work with the child, young person or family to meet the needs. Appropriate representatives from those agencies should be invited to the meeting, together with the child, young person, parent or carer to share information and agree an action plan. A TAC meeting provides an opportunity to explore creative options, identify overlaps or gaps and develop effective working relationships with practitioners from other agencies. At the TAC meeting, the child or young person and practitioners should also identify who will be the LP.

Lead Professional (LP)

- 11.2 In most cases the LP should be identified in accordance with the wishes of the child or young person or family. This is the practitioner with whom they have an effective professional relationship. A LP can be any practitioner who works with children, young people and their families who:
- Acts as a single point of contact for the child or family
 - Someone who the child and family can trust
 - Who can engage the child or young person in making choices
 - Navigate their way through the range of services
 - Co-ordinate TAC meetings and review meetings
 - Ensure action plans are agreed
- 11.3 LP will expect any practitioner involved in the TAC meeting to take active responsibility for their role in the multi agency action plan to improve outcomes for the child or young person. If an agency or practitioner does not fulfil their obligations as agreed at the TAC meeting the LP will contact the respective CAF lead in that service area. If this does not change the situation the LP must inform the CAF strategic champions in their own service area and the matter will be resolved at service manager or head of service level.

- 11.4 The LP may change over time if the focus of the work within the action plan alters. The LP should be confirmed at every review meeting and if the LP changes please contact the CAF team on 526123 to update the database.

12. REVIEW OF PROGRESS – CAF 4

- 12.1 This needs to be undertaken as and when required, but no longer than a 3 month period, with the involvement of all participants. If a TAC meeting has previously been undertaken a further TAC meeting must be convened to ensure that all elements of the action plan have been successful. In some cases it may be necessary to have more than one review. CAF 4 will need to be completed for each review meeting and sent to CAF@stockton.gcsx.gov.uk.

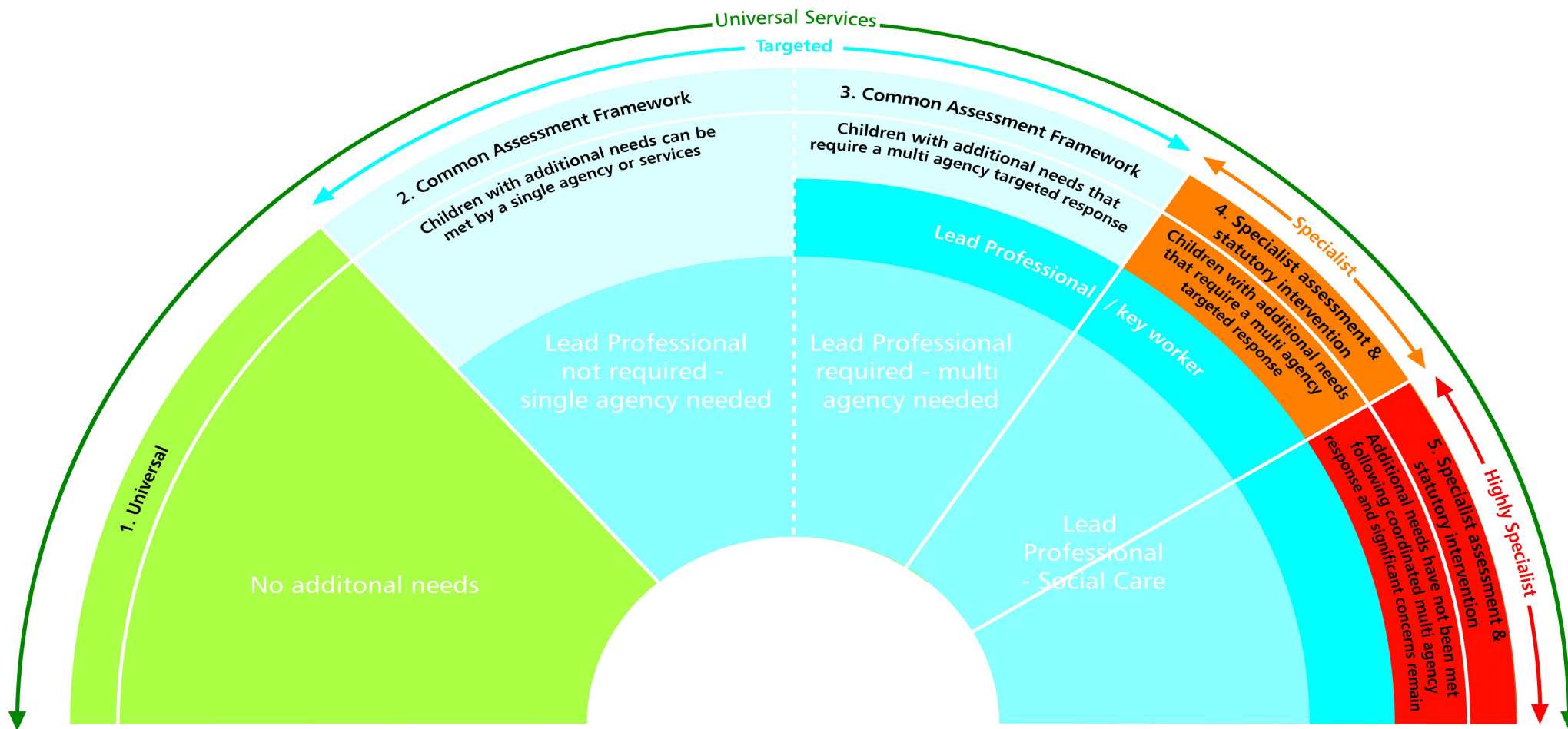
13. CLOSURE OF CAF

- 13.1 Once all work is completed and outcomes achieved the practitioner/lead professional will need to complete the CAF Closure form and send all paperwork to CAF@stockton.gcsx.gov.uk.
- 13.2 Where it has been necessary to stop the process of CAF following a referral for statutory intervention the CAF Closure form must still be completed.

14. STEP UP STEP DOWN PROCESS

- 14.1 Where any practitioner is involved with a child/young person who is subject to a CAF action plan and is concerned that a child may be suffering, or is likely to suffer, significant harm, they should contact the First Contact Team who will provide advice, support and a protective response. All CAF information can be emailed along with the children and social care referral and information record to the first contact team following discussion. This must be password protected. It is good practice for the lead professional to be informed of the referral immediately and if possible, to make the referral. An attempt to contact the lead professional, however, should not, under any circumstances, delay the process of referral.
- 14.2 If the referral progresses to the duty team, once allocated to a Social Worker, the lead professional should share information on the child and family and if so required attend any necessary meetings.
- 14.3 Once it is deemed that the child is no longer a Child in Need; or that the assessed level of need is not at a level that fits the criteria for Social Care intervention but that there remains a need for a co-ordinated multi-agency response, the social worker/family support worker will be responsible for commencing a CAF 1 and 2 and coordinating a TAC meeting. At the TAC meeting the lead professional will be identified, for those cases that have been stepped up into children's social care there would be an expectation that the original lead professional would pick up this role again.
- 14.4 The step down process can also be used effectively for children/young people who are subject to a child protection plan and it has been identified that their names can be removed from the list and that social care no longer has a role in supporting the child but there is a continued need for a coordinated multi agency response. See flow chart Appendix 2.

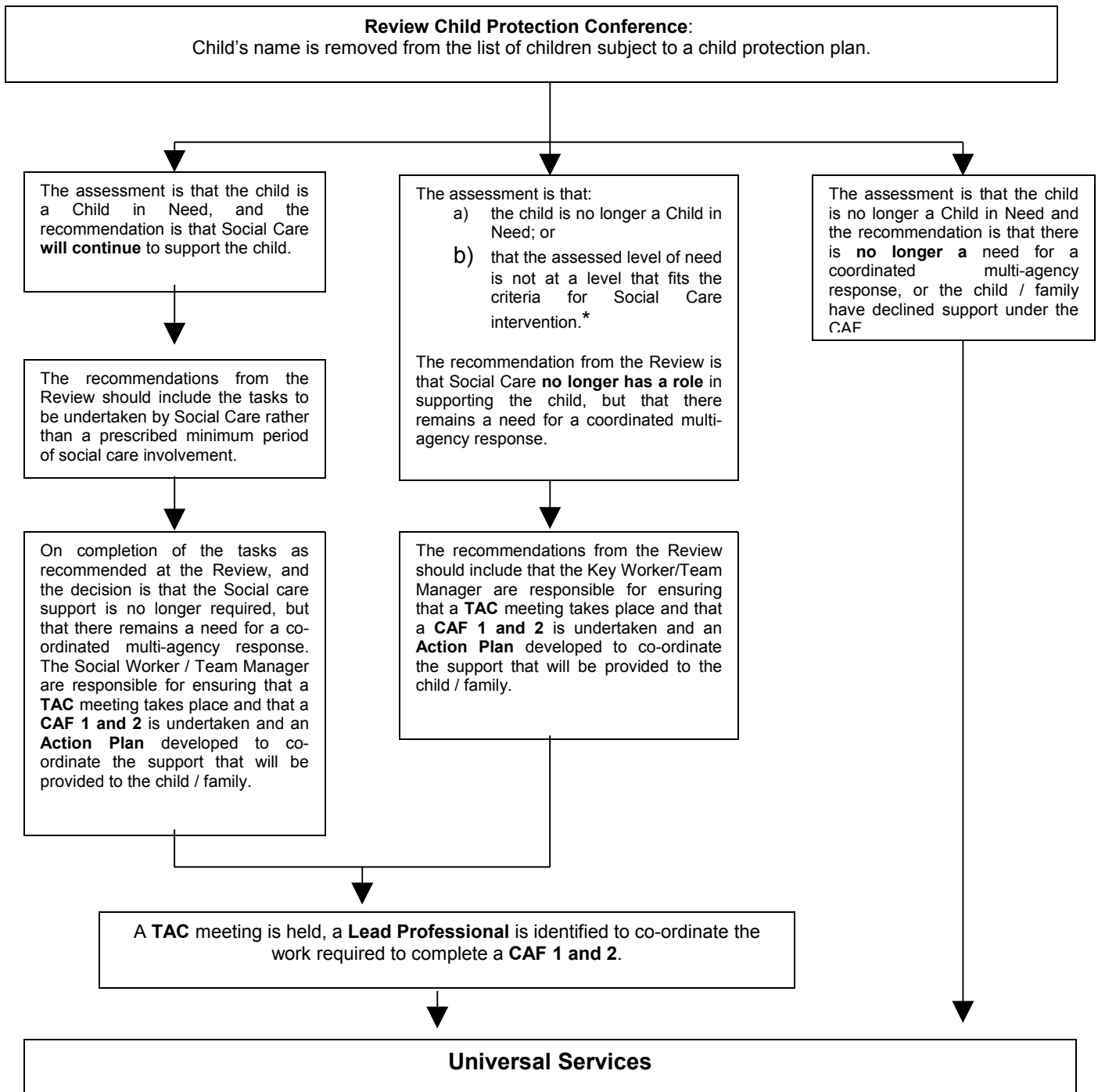
Stockton on Tees Children's Trust Board/Local Safeguarding Children Board Continuum of Need and Services



Appendix 2

STEP DOWN PROCESS FLOWCHART

Flowchart of removal of child's name from the list of children subject to a child Protection Plan and the potential transition into the Common Assessment Framework (CAF) / Team around the Child (TAC) procedures



* as defined by the Continuum of Need and Services