

FAMILIES AND CHILDREN'S TRUST

N O R T H U M B E R L A N D

Integrated Processes and Tools:

Common Assessment Framework
Protocol

Acknowledgements

In producing this document I would like to thank everyone who contributed to its development.

Particular thanks go to my CAF colleagues in the region for so generously sharing your knowledge, materials and evidence based good practice, especially:

Sandra Thompson in North Tyneside

Grainne Fegan in Newcastle

Fiona Robson in South Tyneside

Gina Birchall in Middlesbrough

For their assistance in consultation, revision and comment thanks go to:

Glenda Devlin

Andrew Flounders

The Integrated Teams Project Group

The Integrated Teams Wider Steering Group

The Integrated Teams Implementation Group for Wansbeck

The FACT Leadership group

And other practitioners who were consulted about the documents and who gave constructive comments that contributed to the final version.

Bridget Atkins

Integrated Teams Project Manager

23/04/07

Integrated Processes and Tools

Most children will make good overall progress in their development and will not need any additional support than the services that are universally available for all children. However some children will need extra help to support them with additional needs and enable them to reach their potential in terms of the 5 Every Child Matters outcomes – staying safe, staying healthy, enjoying and achieving, making a positive contribution and achieving economic well being. ***The Integrated Tools and Processes*** have been developed and are being implemented nationally to assist these children achieve their full potential.

Most practitioners already undertake some form of assessment (formally or informally) when working with a client. Assessment is a process of gathering together information about a client and interpreting the information to decide what help or support the client needs, whether the practitioner can manage that support themselves or if they need to involve someone else and who. Often this is, or begins as, a simple conversation with the child/ parent, perhaps with some meaningful questions to draw out the relevant information.

The ***Common Assessment Framework (CAF)*** is one of the tools within Integrated Working practices. The CAF aims to provide a structure to help practitioners undertake and record this process of assessment, and can act as a prompt to ensure appropriate questions are asked to provide a holistic picture of the child. ***However it does not replace Child Protection procedures or more specialist assessments.***

The purpose of the CAF is to introduce a standard format to collate information which can be shared with other agencies and practitioners, so the needs of the child can be more easily understood and the support can be provided as early and effectively as possible, in many cases before the need becomes so acute that they require specialist assessment or services. The CAF should develop a common framework and understanding between agencies and enable more effective referral, especially where the needs are assessed to be more complex and statutory intervention is required.

There is a simple ***Pre-assessment checklist*** document that can be used to help practitioners identify children and young people who would benefit from a common assessment. This will be especially useful for those practitioners who are not trained as assessors, but who identify concerns about a child/ young person and want to refer this onto an assessor, either in their own organisation or a partner agency.

The CAF is a tool that can be used to support practice – it should not be used purely as a form to fill in or if it adds little value for the practitioner or child/ family. The form supports the process of looking at the child holistically, rather than just within the service boundaries of the practitioner. Using the CAF involves the child/ parent throughout the entire process from start to finish and requires informed consent at every stage. The assessment takes account of a child's strengths as well as needs; it brings together the information in one place, to enable practitioners to share this with other agencies as required and agree how they will work together to meet the child's needs, involving the child and family in the solutions and acknowledging their role in the development of the child. This involvement throughout the process should create 'buy in' from the child/ parent to the actions that are agreed. The CAF process should avoid the child/ parent having to repeat their story a number of times to different agencies and having to submit to a number of assessments, often overlapping in the information they ask for. ***A copy of the completed CAF should be signed by the child/ parent to give consent and a copy given to the child/ parent.***

The ***Service Directory*** is a further tool for Integrated Working. This is a resource for practitioners to refer to for information about a range of services – voluntary and statutory – that are available to children and their families in Northumberland. When completing the CAF and considering the actions to be carried out from the assessment, it could be useful to refer to the Service Directory to ensure all available support is considered for the child and family.

A Northumberland Threshold document has been produced to give some guidance around the different levels of need, to give practitioners some guidelines as to when a CAF is required and when the level of need dictates a more specialist intervention (see 'continuum of need' or 'windscreen' Northumberland FACT CAF Protocol April 2007 – Review date Oct 2007)

diagram in appendix). The document is not exhaustive and should not be a substitute for professional judgement, dialogue and expertise.

Where the child's needs are such that a single agency could support the child and meet the needs (i.e. 'level 1') a CAF could be done as good practice by the practitioner to assess the needs, collate the information and plan the action with the child/ parent. The CAF is not compulsory at this level and can be done if it would help the practitioner identify and provide appropriate support to the child, including for example collating the information to support referral(s).

Where the child's needs are more complex and would usually require more than one agency working together to support the child (i.e. 'level 2') a CAF should be used to assess the needs and identify who should be involved in supporting the child. Once the key agencies and practitioners have been identified, a 'Team Around the Child' meeting should be called, which would include the child/ parent, so a multi-agency response can be discussed and an action plan can be agreed. A **Lead Professional** will need to be chosen from the group – the child/ parent should have some choice in this decision, but in some cases the Lead Professional will be decided by the actions that are required e.g. where there is a statutory involvement.

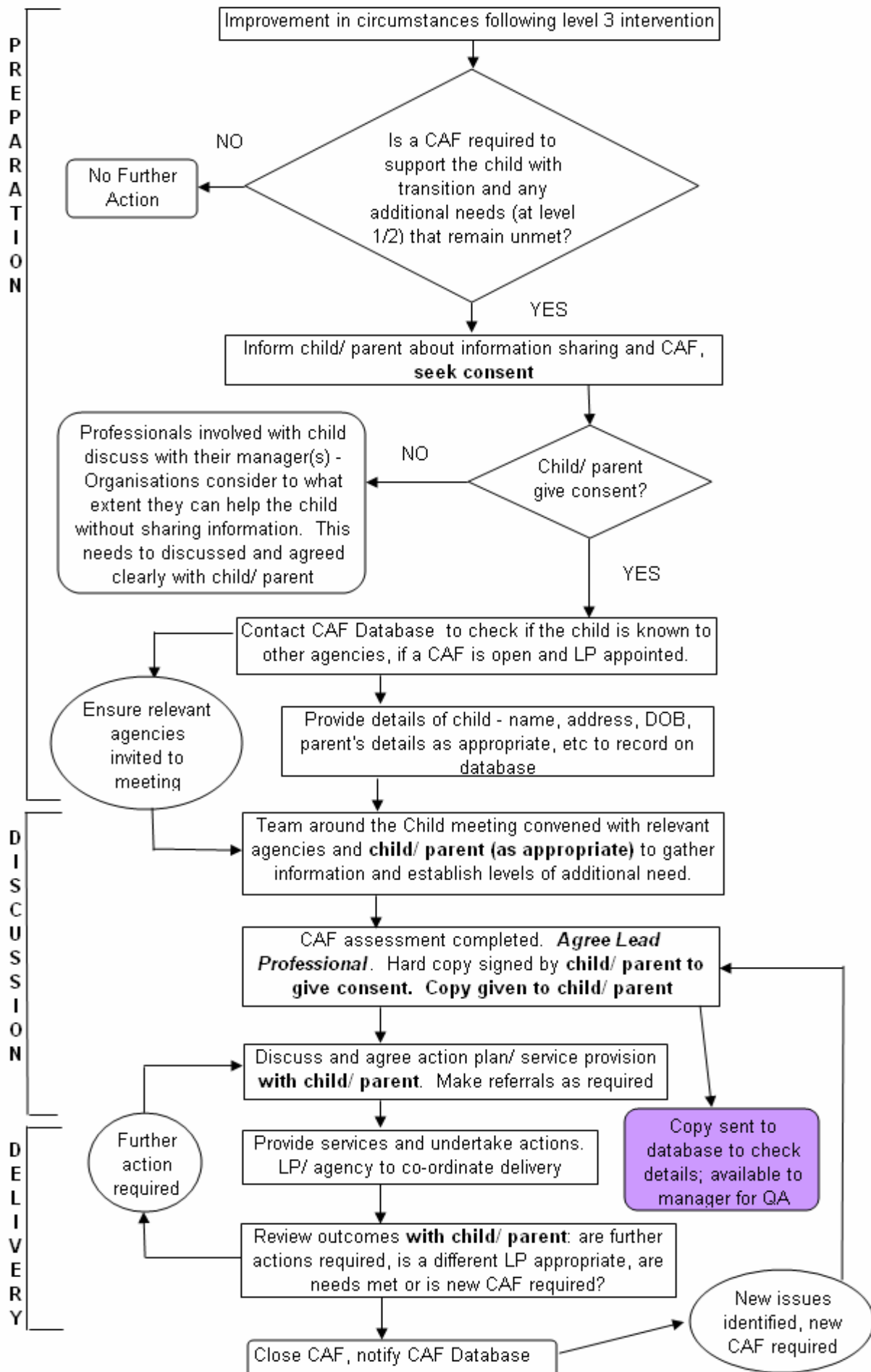
The **Lead Professional** role is another tool for Integrated Working. The Lead Professional's role is to co-ordinate the actions set out and agreed in the meeting, to ensure the child and family receive an effective service which is regularly reviewed. It is not the Lead Professional's job to do everything and they cannot be responsible for any other agency or any other practitioner's actions (or inaction). They act as a single point of contact for the child/ parent and for other practitioners. They support the child/ parent in getting the help they need and should reduce the overlap and inconsistency in services.

Until **ContactPoint**, the national Children's Index is available in 2008, there will be a central database and query line in Northumberland. When a practitioner identifies that a child has additional needs and feels a CAF is required, they should contact the query line to check whether one already exists and a Lead Professional allocated. If there is, then the practitioner will need to contact the Lead Professional for that child to discuss the issues identified and become involved in the Team Around the Child, as appropriate.

If a CAF does not yet exist then the basic details for that child will be recorded on the database (so consent will be required before contacting the query line and before a CAF is initiated) with the name of the practitioner (or CAF 'author') along with date CAF is initiated, any other practitioners involved, etc. This information will need to be updated on a regular basis e.g. as the assessment is completed, agencies involved, date CAF is closed etc. This must be done in order to avoid duplication of assessments and support the principles of sharing information and integrated working.

A copy of the CAF should be sent to the CAF database to ensure the information on the database is correct and complete and a copy should be made available to the author's line manager for quality auditing.

CAF Process following Level 3 Involvement



Process for completing CAF.

Introduction

Most children will not need a CAF. The Common Assessment Framework is for children and young people with additional needs. These are children and young people who, according to the judgement of practitioners, require extra support to help them achieve the five *Every Child Matters* outcomes:

- being healthy
- staying safe
- enjoying and achieving
- making a positive contribution
- achieving economic well-being

The Common Assessment Framework is one of the tools the Government has introduced to support integrated working and equip practitioners across all agencies and sectors. These tools and processes are interlinked and work together to help practitioners achieve improved outcomes for the children and young people of Northumberland and across England.

There are three stages to the Common Assessment Process: **1. Preparation, 2. Discussion, 3. Delivery** (see *The Common Assessment Framework: Practitioners' Guide*) See also flowchart 'Process for Completing a CAF'. There are a set of standard forms to accompany this document, which are recommended for use in the process.

1. Preparation

Pre-Assessment:

There are concerns that a child/ young person has additional needs that may impact on them achieving the ECM outcomes; these concerns can be raised by either:

- Child/ young person
- Parent
- Practitioner

(See *Thresholds* paper for different levels of need to identify type of assessment that may be required)

In these circumstances the practitioner could use *Pre-Assessment checklist* to collate some initial information and make a decision about whether a *Common Assessment* is required.

Or the collated information in the *Pre-assessment checklist* could be used to determine the level of need and type of assessment required using the *Thresholds* document for guidance.

Where the *Pre-assessment checklist* is completed and the need for a *Common Assessment* is agreed, but the practitioner is not trained as a CAF assessor they will need to refer the child/ young person/ family to an appropriate agency or organisation. They should use established referral systems to do this (see *Service Directory* for details) It may be useful to forward the *Pre-assessment checklist* with the referral as supporting information, but the consent of the child/ young person/ family must be sought to do this. The process must be clearly explained to the child/ young person/ parent and the reasons why the form is being passed on.

If the child/ young person's needs are initially assessed as being at Level 1 (see *Thresholds* document) and can be met by a single agency, then the practitioner can choose to use the *CAF* as a means of collating information about the child/ young person's needs and strengths, but they should only do this if it adds value to the process and supports the work they are doing. The *CAF* can also be used to collate the information to support a referral to another agency or specialist assessment.

Consent seeking and Accessing the CAF Database:

The practitioner should clearly discuss the *Common Assessment Framework* process with child/ young person/ parent – they can ask if they have any previous Common Assessment documents. They should explain the steps in the process, including the need to register the child/ young

person's personal details on the database, i.e. to avoid duplication of assessments etc (see *The Common Assessment Framework: Practitioners' Guide*)

Who should sign the forms to give consent?

It is difficult to assess competency with young people under the age of 13, so it is likely that for children aged 12 or below the parent/ carer will sign to give informed consent. It is generally accepted that from 13 years onwards, practitioners should assess the level of competency of the child/ young person, i.e. their level of understanding and ability to comprehend and engage in the process (see Information Sharing documents and Fraser guidelines for details).

The *CAF* author/ assessor must ensure **CAF1 Consent form to store info on database and initiate CAF** is completed. The practitioner should give the child/ young person/ parent a copy of 'Using and Sharing Information about You' leaflet. The *CAF1* form must be stored securely by *CAF* author/ assessor.

Where consent is not given, **CAF1b** should be completed to show consent is being withheld; in these circumstances the *CAF* cannot be completed as the child/ young person's details cannot be recorded on the database without consent. **CAF1c** will be given to child/ young person/ parent within 10 days of receipt of *CAF1b* to acknowledge receipt. The practitioner will need to explain this as a potential barrier to the child/ young person getting appropriate services and that information will be shared with or without consent where there is a suspicion of a risk of significant harm.

Consent can be withdrawn or withheld at any point during the process and the practitioner should use *CAF1b* and *CAF1c* forms as above to record this. If this happens during the process, the database will be informed that the *CAF* is being closed and is incomplete due to the withdrawal of consent.

Where consent is withheld or withdrawn, it is recommended that the practitioner discuss the situation with their manager or seek advice, to agree whether information should be shared without consent and the matter referred through safeguarding procedures. The practitioner must record the decision made and why on their recording systems.

When *CAF1* is signed and consent is gained and where the practitioner is trained as an assessor, the practitioner should contact the *CAF* database to see if a *CAF form* has been completed/ child is known.

- Where an open *CAF form* already exists – the database administrator will pass on the name of the author/ *Lead Professional*. The practitioner should contact the author/ *Lead Professional* to have an input in to the *CAF* process and provide appropriate support to the child/ young person.
- Where an open *CAF* doesn't already exist, the database administrator will require the basic details of the child/ young person to register them on the database and note a *CAF form* is being started, the date and the author etc. They will provide a reference number from the database for the *CAF* form and documents.

The practitioner should then commence the *CAF form* with child/ parent/ young person.

Where the needs are such or there are already practitioners involved, the practitioner should consider, in consultation with the child/ young person/ parent, whether to call a meeting of other practitioners (form *CAF3b Letter to call a Team Around the Child Meeting before assessment can be used*) to complete the *CAF* as a multi-agency group.

2. Discussion

Single Practitioner completing the CAF

The *CAF form* must be completed with the child/ young person/ parent, including strengths as well as needs. This could take some time and may be done over a number of meetings, but the form should be completed within 4 weeks or 20 working days. The practitioner should discuss and agree solutions and next steps, possibly prioritising actions, with the child/ young person/ parent to ensure 'buy in' to the action plan and the actions agreed must be 'SMART' (i.e. Specific, Measurable,

Achievable, Realistic, Timebound) The practitioner should consider the question 'How will you know when things have improved?' carefully, as this will guide them as to when to close the CAF.

Once complete, a copy of the CAF form must be signed by the child/ young person/ parent and a copy kept by them as well as the CAF author; a copy should be sent to the CAF database administrator to check contact information is correctly recorded. The CAF author should make a copy of the CAF form available to an appropriate manager for Quality Monitoring, to check appropriate services have been identified to support the child/ young person and to identify any issues that are likely to arise e.g. workload of practitioner, brokering of additional services where a manager may need to support the practitioner, training needs of practitioner etc.

If at anytime during this assessment, the practitioner becomes concerned that the child/ young person is at risk of significant harm (i.e. there are level 3 issues arising, see Threshold document), then they must stop the CAF process and follow the LSCB procedures. They should advise the CAF database that the CAF has been closed and is incomplete.

Multi-Agency Group Completing the CAF

Where the needs of the child/ young person are such or if there are already a number of agencies involved who have relevant information about the child/ young person, it may be beneficial to call a 'Team Around the Child' meeting to complete the CAF form with the child/ young person/ parent. The practitioner identifying the need for a Common Assessment could use CAF3b Letter to call Team Around the Child Meeting before Assessment to invite the agencies or practitioners identified as relevant to the process to the meeting. A list of the practitioners or agencies being invited to the meeting should accompany the letter. CAF3c Letter to Child/ Parent/ Young Person can be used to invite the child/ parent/ young person to the meeting. This meeting should be held within 4 weeks or 20 working days of the need for a CAF being identified, which should allow time for practitioners and the child/ young person/ parent to co-ordinate dates.

Where the recipient of the CAF3b cannot attend or does not think it is appropriate for them to attend the meeting, they should contact the sender of CAF3b as soon as possible (and at least 5 working days before the meeting) to inform them of their non-attendance and reasons for the non-attendance. This decision and the reasons why should be recorded in the sender's recording systems. The child/ young person/ parent must be kept informed about progress of referrals. The practitioner then continues as described below in 'Team Around the Child meeting'

Once complete, a copy of the CAF form must be signed by the child/ young person/ parent and a copy kept by them as well as the CAF author; a copy should be sent to the CAF database administrator to check contact information is correctly recorded. The CAF author should make a copy of the CAF form available to an appropriate manager for Quality Monitoring, to check appropriate services have been identified to support the child/ young person and to identify any issues that are likely to arise e.g. workload of practitioner, brokering of additional services where a manager may need to support the practitioner, training needs of practitioner etc.

If at anytime during this meeting and assessment, the practitioners become concerned that the child/ young person is at risk of significant harm (i.e. there are level 3 issues arising, see Threshold document), then they must stop the CAF process and follow the LSCB procedures. They must advise the CAF database that the CAF has been closed and is incomplete.

Outcome of CAF – Referral to Another Agency

Where the needs identified or actions agreed on the CAF form require a referral to another agency, the practitioner should use established referral systems to do this (see Service Directory for details) or could complete CAF2 Referral letter to accompany CAF to send with the CAF form to the agency or practitioner – a secure method of transfer for the forms should be agreed.

The CAF author should ensure they are kept informed of the progress of the referral because, although there is a single agency/ practitioner working with the child/ young person, they are effectively acting as the Lead Professional until such time as another Lead Professional has been agreed for that child/ young person. Therefore they should co-ordinate the delivery of the actions agreed to ensure the child/ young person receives an effective service and their needs are met.

Where the recipient of the CAF2 thinks it is an inappropriate referral, they should contact the CAF author as soon as possible, and within 10 working days of receipt of the referral, to notify them that the referral will not be accepted and the reasons why. This decision and the reasons why should be recorded in the CAF author's recording systems. The child/ young person/ parent must be kept informed about progress of referrals.

Outcome of CAF – Team Around the Child Meeting

Where the needs identified or actions agreed on the CAF form require a multi-agency response, the CAF author should call a 'Team Around the Child' meeting, *CAF3a Letter to call a Team Around the Child meeting after assessment* can be used to do this. A list of the other practitioners being invited to the meeting should be sent with the letter. *CAF3c Letter to Child/ Parent/ Young Person* can be used to invite the child/ parent/ young person to the meeting. The meeting should be held within 4 weeks or 20 working days of the completion of the CAF form and the identified need for a meeting, which should allow time for practitioners and the child/ young person/ parent to co-ordinate dates.

Where the recipient of the CAF3a cannot attend or does not think it is appropriate for them to attend the meeting, they should contact the CAF author as soon as possible (and at least 5 working days before the meeting) to inform them of their non-attendance and reasons for the non-attendance.

Team Around the Child Meeting

At the 'Team around the Child' meeting:

- If the meeting has been arranged to complete the CAF, the practitioners will complete the CAF form with the child/ young person/ parent. The practitioners should consider the question 'How will you know when things have improved?' carefully, as this will guide them as to when to close the CAF. The actions agreed should be 'SMART' (i.e. Specific, Measurable, Achievable, Realistic, Timebound) and the child/ young person/ parent must agree the content and sign the form to give informed consent to continue.
- Otherwise the information in the CAF should be discussed and expanded as appropriate. If it is the first meeting after completing the CAF, the CAF author will chair the meeting until a Lead Professional is decided; otherwise the designated Lead Professional should usually chair the meeting and record outcomes etc.
- The previous actions agreed between the CAF author or Lead Professional and the child/ young person/ parent will need to be reviewed, *CAF4 Review document* can be used to do this – e.g. since these actions may have included calling the meeting, etc.
- As a group, practitioners and the child/ young person/ parent will want to discuss and agree a new action plan and can use *CAF5 Action Plan document* to record this. The actions agreed should be 'SMART' (i.e. Specific, Measurable, Achievable, Realistic, Timebound). The child/ young person/ parent must sign the CAF5 to give informed consent to continue the process and they must receive copies of review and action plan documents.
- The group needs to decide who the Lead Professional is – if there is already a Lead Professional allocated, will this person continue to be Lead Professional or should it be reallocated. In certain circumstances this will be a particular practitioner, for example where there is a statutory involvement or intervention; however there are a number of criteria that could suggest the most appropriate practitioner (see *The Lead Professional: Practitioners' Guide*) and the child/ young person/ parent should also have an input into the decision.
- Where the Lead Professional cannot be agreed on, e.g. it isn't clear who the most appropriate worker is, a practitioner cannot or does not want or feel equipped to take on the role etc, the matter will need to be referred through Governance arrangements – in the first instance to local agency managers or Senior Management, through to the FACT Leadership group (see *The Lead Professional in Practice* training module) Practitioners must ensure this does not interfere unduly with the delivery of agreed support to the child/ young person.
- Where the needs identified or actions agreed on the CAF form require a referral to another agency, the Lead Professional should use established referral systems to do this (see *Service*

Directory for details) or could complete *CAF2 Referral letter to accompany CAF* to send with the *CAF form* to the agency or practitioner – a secure method of transfer for the forms must be agreed. The Lead Professional should ensure they are kept informed of the progress of the referral as they must co-ordinate the delivery of the actions agreed, until such time as another Lead Professional has been agreed, to ensure the child/ young person receives an effective service and their needs are met.

- Where the recipient of the *CAF2* thinks it is an inappropriate referral, they should contact the Lead Professional as soon as possible, and within 10 working days of receipt of the referral, to notify them that the referral will not be accepted and the reasons why. This decision and the reasons why should be recorded in the Lead Professional's recording systems. The child/ young person/ parent must be kept informed about progress of referrals.
- The Lead Professional should agree follow up arrangements with the practitioners involved with the child/ young person for example, they will phone or e-mail after a certain time period to check progress against agreed actions etc.
- The Lead Professional should agree a review date for the actions agreed, and to assess whether a further action plan is required. They should also follow up progress of specialist assessments or referrals. They must ensure the child/ young person/ parent remains informed of progress against the actions agreed. This review should be within 3 months or 12 weeks of the Team Around the Child meeting.

If at anytime during this assessment, the practitioners become concerned that the child/ young person is at risk of significant harm (i.e. there are level 3 issues arising, see Threshold document), then they must stop the CAF process and follow the LSCB procedures. They must advise the CAF database that the CAF has been closed and is incomplete.

3. Delivery

Implementing Actions Agreed:

Each agency or practitioner will endeavour to implement or follow up the actions they have agreed, within the timeframes agreed. Where there are any problems with carrying out the actions in the agreed timescale the practitioner should keep the proper person/ people informed as appropriate – that is, the Lead Professional, in the case of a multi-agency group; or the line manager in the case of a single agency or if it is the Lead Professional experiencing difficulties – the Lead Professional must ensure the child/ young person/ parent remains informed about what is happening.

The Lead Professional and/ or their line manager may need to refer problems of delivery through the Governance arrangements – in the first instance to their own Senior Management ultimately through to FACT Leadership group. For example where an agreed service is not being delivered, where there are gaps in provision or where services are under pressure and cannot meet demand, and the needs of the child/ young person are not being met.

Review

At the agreed point of review, the Lead Professional (or practitioner, if it is a single agency/ level 1 need) should assess whether the agreed actions have been carried out, have the child/ young person's additional needs been met, i.e. the criteria identified in the section 'How will you know when things have improved?' have been achieved. This review may be carried out between practitioner and child/ young person/ parent as part of monitoring progress against the action plan (especially where the need is at level 1 and there is single agency involvement) or in a further Team Around the Child Meeting, *CAF4a Letter to call a review meeting* can be used to initiate this. *CAF3c Letter to Child/ Parent/ Young Person* can be used to invite the child/ parent/ young person to the meeting. They should record the outcomes of the review on *CAF4 Review document*, and a copy of *CAF4* must be given to the child/ young person/ parent. However agencies may have developed their own forms for action planning and review and may prefer to use these in delivering their services. Further actions will be dependant on the outcomes decided at this review.

Outcome of Review - Additional Needs Met:

Where the child/ young person's additional needs have been met, i.e. the criteria in the 'How will you know when things have improved?' have been achieved and they only now require Universal Services available to all children and young people (see Thresholds document) then the CAF can be closed. The Lead Professional should ensure the child/ young person/ parent knows of and can access the appropriate universal services (see *Service Directory*). They should contact the CAF database to notify them to close the CAF as it has been completed.

Outcome of Review - Ongoing Additional Needs:

Where the child/ young person has ongoing additional needs related to the original CAF form, the Lead Professional or Team Around the Child may need to review the information in the CAF form, in particular the section on Analysis of Needs and Strengths. They should discuss and agree a new action plan (which must be SMART - Specific, Measurable, Achievable, Realistic, Timebound) with the child/ young person/ parent, *CAF5 Action Plan document* can be used for this. The child/ young person/ parent must sign this form to give informed consent, and must receive a copy of the completed form. The practitioner/ group may need to review the Lead Professional role, as the new actions agreed may suggest that a different practitioner would be better placed to take on the role. This should be discussed with the child/ young person/ parent and agreed at the meeting. The group then go back to step 3 **Delivery**.

Outcome of Review - Needs have Changed Significantly:

Where the additional needs of the child/ young person have been met from the original Common Assessment, i.e. the criteria in the 'How will you know when things have improved?' have been achieved but there are further additional needs identified (and these needs are still at level 1 or 2 (see Thresholds document)) the CAF should be closed and the database notified that the CAF is complete. The practitioner/ group should then initiate a new CAF form to assess the new set of additional needs. They will then go back to step 2 **Discussion**.

Outcome of Review – Needs now identified at Level 3:

Where it is becoming apparent that the needs of the child/ young person are crossing into level 3 (see Thresholds document) and a specialist referral, intervention or assessment will be needed, then the practitioner/ group should make appropriate referrals. The Lead Professional should use established referral systems to do this or may use *CAF2 Referral Letter to Accompany CAF*, attaching the CAF documents as supporting evidence. The CAF may be closed at this point and the database should be informed that the CAF is closed and incomplete. However if there are ongoing issues at level 2 or the child/ young person may need support whilst awaiting the specialist assessment e.g. a medical waiting list, then the group should agree actions to support the child/ young person/ parent in the interim, *CAF5 Action Plan document* can be used to do this. The child/ young person/ parent must sign this form to give informed consent, and must receive a copy of the completed form. The Lead Professional may continue to support the child/ young person into or through the specialist assessment/ services or ensure a handover to a more appropriate practitioner who is taking on the Lead Professional role.

If at anytime during this assessment, the practitioner becomes concerned that the child/ young person is at risk of significant harm (i.e. there are level 3 issues arising, see Threshold document), then they must stop the CAF process and follow the LSCB procedures. They must advise the CAF database that the CAF has been closed and is incomplete.

Using the CAF Following Level 3 Involvement (see flowchart)

Where a child/ young person has had some form of Level 3 involvement with an agency, but their needs are improving and their needs are likely to reduce to Level 2 or below (see Thresholds document) the CAF may be used to ensure on-going support is in place. The child/ young person/ parent must be consulted about whether they want this process to take place. Depending on the nature of the Level 3 involvement, they may not be keen to have ongoing intervention from practitioners, so the benefits of engaging with the CAF process should be explored with them in a supportive way, for example making it clear that they will be involved and be asked for consent throughout the process.

Where consent is not given then the usual support arrangements following the Level 3 involvement should be put in place.

Where the child/ young person/ parent agrees to participate in the CAF process then practitioners should refer to step 1 **Preparation - Consent Seeking and Accessing the CAF Database**, as they must get *CAF1* signed to give consent to record details on the CAF database. The steps in the Process for Completing a CAF should then be followed, bearing in mind these additional points (see below)

- Another agency/ practitioner may have identified additional needs and initiated a CAF without realising the Level 3 involvement was happening (since the Level 3 intervention is not recorded on the CAF database). The CAF database administrator will be able to advise who the CAF author/ Lead Professional is so the current CAF process can be supported appropriately.
- There is likely to be a great deal of information about the child/ young person following a Level 3 intervention, however much of it will be inappropriate to share at a lower level of need. The CAF is a means of providing only the information deemed appropriate for sharing, relevant to the outstanding needs of the child/ young person and the child/ young person must be involved in deciding what information they want to share on the CAF form.
- The practitioner involved in the Level 3 intervention is likely to be carrying out a Lead Professional role. The CAF process should be started before the Level 3 involvement ceases completely, so that there is seamless support across the transition from Level 3 and an effective handover between practitioners and possibly Lead Professionals, as and when appropriate.



Practitioner's Name and Agency/ Contact Details

The Common Assessment Framework (CAF) has been designed to support children and young people who need some extra help. It is a way of assessing your needs to be able to decide what help is needed and who could provide services to help.

The Common Assessment Framework cannot be completed without your informed consent. This means that you give your permission for your personal information to be shared with certain people and that you understand:-

- Why this information will be shared
- Who it will be shared with
- What it will be used for
- How the information will be stored, and that it will be stored confidentially

The reason you may need to give consent to share your personal information is so that agencies and services understand your situation, what help you need and can decide how to help and support you. The CAF will only be shared with the people who need to see it.

In order to record that a CAF has been completed – so people working with you don't need to ask you for the same information again – your basic details will be recorded on a central computer database which records that a CAF has been done, by whom and who else is working with you to provide support.

You have the right to choose who can share your personal information and whether it is recorded on the central database, so we need to seek your consent to do this in order to put the support in place that you need. You have the right to withdraw your consent at anytime by completing a CAF1b Consent Withdrawal form. You should be involved in completing the CAF and any actions agreed at all times; you will have to sign the CAF to give consent after the assessment and you will get a copy of the CAF to keep.

If you want to see the information held about you on the CAF database at any time, please refer to the Data Protection link on the Northumberland County Council website, e-mail ITsecurity@northumberland.gov.uk or contact Chris Heane on (01670) 533309.

I understand and give my permission for my/ my child's personal details to be held on the central CAF database
I consent to a CAF being started

YES/ NO

Signature:..... Date:.....

Nature of relationship to child: I am the Child / Young Person / Parent / Carer (delete as applicable)



**Common Assessment Framework Database and Process
Consent Withdrawn/ Withheld Form
Data Protection Act 1988**

In accordance with the above act this document will require your signature.

Name of Child/ Young Person:

Date of Birth:

Address:

Postcode:

Name of Parent/ Carer
(if applicable)

I am the child or parent/ carer of the child named above.

I withdraw or withhold my consent and do not agree to information that is currently held, or that may be gained about me being recorded on the CAF database or shared with other practitioners. I understand this means a CAF cannot be started (or continued) to assess my/ my child's needs.

However I understand that information will have to be shared with or without my consent if the law says it must or if someone is at risk of significant harm.

I understand that I can change my mind about withholding/ withdrawing my consent at any time and can complete the CAF1 form ('Consent form to store information on the CAF database and initiate a CAF') to initiate the assessment process.

I understand that I will receive acknowledgement (CAF1c) of receipt of this Consent Withdrawn/Withheld Form within 10 working days of you receiving this form.

Signature: **Date:**

**Nature of relationship to child: I am the Child/ Young Person/ Parent/ Carer
(delete as applicable)**



To: Child/ Parent/ Young Person

Practitioner's Name and Agency/ Contact Details

Date:

Dear

This letter acknowledges receipt of the form CAF1b – 'Withdrawing/ Withholding your Consent to Store Information on the CAF Database and to Sharing your Information'.

Your information will have to be shared with or without your consent if the law says it must or if someone is at risk of significant harm.

As stated, you can change your mind at any time by completing CAF1 to give consent to the CAF process being initiated.

In order to do this, you can contact this organisation again at the address above. Or you could also talk to any other practitioner working with children and young people to request that a Common Assessment be started.

Yours sincerely,



Referral to: Practitioner's Name and Agency/ Contact Details:

Referring Practitioner's (LP's) Name and Agency/ Contact Details:

Date:
CAF reference:

Dear
I would like to refer
Name & D.O.B:
Address:

to your service.

The reason I am referring them is

Please find attached a copy of the CAF form that has been completed to provide you with further information in support of this referral. The child/ parent/ young person is aware of this referral and I am the Lead Professional working with them. Please don't hesitate to contact me if you wish to discuss the referral or require further information. I will contact you for information to support the planned review on (date)

Please acknowledge receipt of this letter. Thank you

Yours sincerely,

ENC: CAF form

CAF3a Letter to call Team Around the Child Meeting after assessment



To: Practitioner's Name and Agency/ Contact Details:

From: Practitioner's Name and Agency/ Contact Details:

Date:
CAF reference:

Dear

A Common Assessment (CAF form) has been completed for

Name & D.O.B:

Address:

This assessment has identified a need for additional services to be provided by 2 or more agencies/ practitioners.

You are invited to a 'Team Around the Child' meeting to discuss a co-ordinated action plan to support this child/ family. We will need to decide who the Lead Professional should be at this meeting.

Can you attend the meeting on:

Date and Time:

Venue:

Please acknowledge receipt of this letter and confirm your attendance.

Thank you

Yours sincerely,

ENC: List of people invited to meeting

CAF3b Letter to call Team Around the Child Meeting before assessment



To: Practitioner's Name and Agency/ Contact Details:

From: Practitioner's Name and Agency/ Contact Details:

Date:
CAF reference:

Dear

The need for a Common Assessment (CAF form) has been identified for

Name & D.O.B:

Address:

A number of practitioners have relevant information or will need to be involved in assessing their needs and providing support, including your agency/ organisation. You are invited to a 'Team Around the Child' meeting to complete the CAF form and discuss a co-ordinated action plan to support the child/ family. We will need to decide who the Lead Professional should be at this meeting.

Can you attend the meeting on:

Date and time:

Venue:

Please acknowledge receipt of this letter and confirm your attendance.

Thank you

Yours sincerely,

ENC: List of people invited to meeting

CAF3c Letter to invite parent/ young person to meeting



To: Child/ Parent/ Young Person

From: Practitioner's Name and Agency/ Contact Details

Date:

Dear

I am arranging a meeting to talk about the CAF with people from other agencies and organisations. At this meeting we will talk about the needs identified and decide on an action plan to support you. We will also identify a Lead Professional who will be responsible for keeping you up to date with what is happening.

We are arranging the meeting on

Date & time:

Venue:

Please let me know if you can attend this meeting and if you require any help with transport.

Yours sincerely,



To: Practitioner's Name and Agency/ Contact Details:

From: Practitioner's Name and Agency/ Contact Details:

Date:
CAF reference:

Dear
You attended a 'Team Around the Child' meeting for
Name & D.O.B:
Address:

on (date and time of previous meeting)

We are meeting to review the action plan, identify any outstanding additional needs and agree a new action plan if necessary; we may also need to review who the Lead Professional is.

Can you attend a meeting on:
Date and time:
Venue:

Please acknowledge receipt of this letter and confirm your attendance.

Thank you

Yours sincerely,

ENC: List of people invited to meeting



Review of Actions Agreed for:

Name of Child/ Young Person:

Date of Birth:

Date of previous action plan/ CAF:

CAF Reference:

Previous Actions Agreed	Progress against agreed action – complete or ongoing needs?	By Whom	Predicted end/ review date

Are all additional needs met so CAF can be closed? (Contact CAF database to advise) **YES/ NO**

Does a new Action Plan need to be agreed? (CAF5 may be used) **YES/ NO**



Action Plan for:

Name of Child/ Young Person:

Date of Birth:

CAF Reference:

Additional needs identified	Actions agreed to meet needs	By Whom	Predicted end/ review date

Agreed review date:

Signature of Child/ Young Person or Representative: