

Common Assessment Framework Policy & Guidance

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We will on request produce this policy, or particular parts of it, into other languages and formats, in order that everyone can use and comment upon its content.

Version Control	Reason for revision and summary of changes needed	Date
1.1	Change to statutory assessment process in specialist services.	4 th February 2014
2.0	Addition of SOS context and approach	20 th June 2014
3.0	Adapted to reflect SOS, FNM & new CAF process and paperwork	20 July 2017
4.0	Amended to remove appendices and add as hyperlinks	17 October 2017
5.1	Updated links and associated policies and procedures. Updates to incorporate service changes. Update to incorporate recording system.	19 December 2019

Common Assessment Framework (CAF) Policy

1 Introduction

- 1.1 CAF is the agreed Early Help assessment tool for use in Suffolk. It aims to help early identification of need and promote co-ordinated service provision and can be completed by any agency.
- 1.2 *“Children and families may need support from a wide range of local organisations and agencies. Where a child and family would benefit from co-ordinated support from more than one organisation or agency (e.g. education, health, housing, police) there should be an inter-agency assessment. These early help assessments should be evidence-based, be clear about the action to be taken and services to be provided and identify what help the child and family require to prevent needs escalating to a point where intervention would be needed through a statutory assessment under the Children Act 1989”¹.*
- 1.3 This policy and procedure document sets out the context and the principles for the CAF and provides guidance for all workers and their managers in Suffolk’s Children and Young Peoples Services (CYPS) Directorate and partner organisations. Current procedures, guidance and information have been included as hyperlinks.
- 1.4 Suffolk’s CYPS has implemented Signs of Safety and Wellbeing (SOSWB) across all the teams and services within CYPS. This approach starts by identifying strengths in the family and community which could support the child and build resilience within families and communities.

2 SOSWB Principles

Signs of Safety and Wellbeing is integrated into the CAF assessment tool for use across children’s services, involving the family and professionals, focusing on the 3 core principles

- 2.1 **Working relationships** - Constructive working relationships between professionals and family members, and between professionals themselves, is key to effective practice and improving outcomes.
- 2.2 **Thinking critically, fostering a stance of inquiry** - The single most important factor in minimising errors is to admit that you may be wrong.
- 2.3 **Landing grand aspirations in everyday practice** – Families and frontline practitioners know whether practice works. Record what is effective and share your successes with others.

¹ [Working Together to Safeguard Children - A guide to inter-agency working to safeguard and promote the welfare of children. 2018, pg. 13](#)

3 CAF Principles

- Practitioners should hold in mind “What is life like for this child”
- Build and maintain effective partnerships at strategic and local level to support good outcomes for children and young people.
- Ensure that practitioners have appropriate knowledge and skills to work effectively with children & families.
- Ensure quality assurance systems are in place for all CAF processes.
- Adhere to equality and diversity principles.
- Follows child centred practice.
- Children, young people, and their parents/ carers will always be involved in the CAF process.
- CAF is a ‘whole family’ approach.
- CAF is to help early identification of children and young people’s needs and promote joined up planning to meet those needs.
- The safety and welfare of children/ young people is always central and early help is an opportunity for prevention and protection.
- Early Help supports minimising further intervention, maximising empowerment and building resilient families.
- Establishes a risk and well-being assessment framework that involves the family and professionals following the Signs of Safety and Wellbeing.
- All work in CAF is focussed on achieving the best possible outcomes for the child, young person, and their family, by ‘enabling’ not ‘fixing’.
- CAF is an ongoing assessment and review process.
- Effective working relationships are fundamental both with families and other professionals. All agencies must understand and appreciate the role of others and have a responsibility to work together to achieve good outcomes for children and young people.
- The CAF assessment should be owned by children, young people, and their families.

4 Identification of Need/Early Help

- 4.1** Early help means identifying and intervening early, as soon as possible to recognise emerging problems. Working collaboratively with families and their network to assist them to develop or strengthen resilience, prevent, or reduce the risk of problems occurring or stop them getting worse. Wherever possible, families and professionals should be using the CAF assessment as a tool to identify those children and young people who would benefit from early help and this would prevent escalation of need.
- 4.2** The family members help to complete the assessment and the assessor will take account of their ideas, solutions, and goals throughout the process.

4.3 The child's view must form part of the assessment where possible. For those children who are unable or unwilling to contribute this should be documented and observations of behaviour, relationships and interactions should be objectively reflected on and included.

4.4 The CAF Common Assessment should be used when:

- the child or young person has an unmet need and early intervention will avoid a problem becoming worse.
- You are not sure what the child or young person's needs are.
- You/child/young person/family think that the child or young person has unmet needs that cannot be addressed by you and the family.

4.5 It is not required when you believe that the child/young person might be a Child in Need and/or they are suffering or at risk of significant harm when an immediate referral to children's Social Care is necessary. Guidance is available on the Suffolk Safeguarding Partnerships website Suffolk's Threshold of Need Guidance² and How to make a Referral³

Whenever a child/ young person may be at risk of significant harm, professionals must follow the agency safeguarding procedures and refer immediately to Children's Social Care via Customer First⁴ on 0808 800 4005

While undertaking a CAF assessment, it may become evident that the needs require a specialist Suffolk CYP assessment such as a Social Work assessment or YJS assessment. In this case, the allocated worker should speak to their manager and if necessary consult with their local Social Care Team for advice and threshold discussion following the Transfer of Cases between Social Care and Early Help Teams ('Step Up/Step Down') Policy, see paragraph 12.2.

Further guidance can be found on the Suffolk Safeguarding Partnerships website⁵

5 Information sharing and consent

5.1 "Good information sharing is key to successful collaborative working and arrangements under this section should ensure information is shared for strategic planning purposes and to support effective service delivery." (Children's Act 2004)

5.2 Sharing and storing information must be done lawfully in compliance with the Data Protection Act 1998. However, this should not be a barrier to information sharing. Workers should follow the Information sharing advice for safeguarding practitioners⁶

² [Suffolk's Threshold of Need Guidance - compiled by Suffolk Safeguarding Partnership. 2018](#)

³ [Suffolk Safeguarding Partnership – Guidance on how to make a referral](#)

⁴ [Suffolk County Council - How to make a safeguarding referral - report a concern about a child or young person at risk of harm, abuse or neglect](#)

⁵ [Suffolk Safeguarding Partnership](#)

⁶ [Guidance on information sharing for people who provide safeguarding services to children, young people, parents and carers – Department for Education. 2018.](#)

- 5.3** The CAF is a voluntary process, when a family, child or young person agree to a CAF assessment the Privacy Notice: Children's Services (Suffolk)⁷ needs to be issued and explained.

Practitioners will need to judge if a young person is competent to make decisions and understand the implications of the CAF. If practitioners are unsure about whether a child can provide consent, they should consult the Gillick Guidelines, to decide whether a child is mature enough to make decisions and help us all to balance children's rights and wishes with our responsibility to keep children safe from harm. If you need to decide if a child can consent to contraceptive or sexual health advice and treatment, the Fraser Guidelines apply.

Advice and details authored by NSPCC and the Care Quality Commission can be found at; NSPCC Gillick⁸ and CQC Gillick/Fraser⁹.

If a child can provide consent themselves, it is usually still valuable to involve their family in the CAF process. This should only be done with the permission of the child/young person.

- 5.4** Information should be shared if practitioners are concerned about the following as per guidance in the Privacy Notice above:

- Harm to children/young people.
- A crime being committed.
- A crime being detected.

- 5.5** If a family no longer wants to work within the CAF process; a management decision clearly demonstrating rationale that it is safe to close, including residual risk and likelihood of re-referral should be recorded. This is particularly important if a case is transferred from Child In Need. In these cases, there should be a discussion at the transfer meeting to consider whether the case should be returned to Social Care or risks have been appropriately addressed. Details of this discussion should be recorded on the case management system. The *Early Help Engagement Policy* gives full details of this (see Good Practice Guide).

6 The CAF Assessment

- 6.1** Practitioners and agencies must check with Suffolk Children and Young Peoples Services (CAF Triage) to identify if a CAF assessment already exists for the child/young person or if the child/young person is open to Social Care. The preferred method for contacting the team is by email, using appropriate encryption to caf.admin@suffolk.gov.uk.

- 6.2** A CAF assessment can be completed by anyone. It provides the opportunity for the family and professionals to gain a better initial understanding of the child/young person's strengths and needs, focussing on developing outcomes and solutions.

⁷ [Privacy Notice: Children's Services \(Suffolk\) – An explanation of the categories of information SCC collect, process, hold and share](#)

⁸ [The Gillick competency and Fraser guidelines help people who work with children to balance the need to listen to children's wishes with the responsibility to keep them safe](#)

⁹ [Quality Care Commission - Gillick competency and Fraser guidelines](#)

The Signs of Safety approach has been built into the Suffolk CAF assessment. This is then built on throughout the assessment and subsequent planning process. The CAF includes the Assessment and Privacy Notice and is available on the SCC website¹⁰. The CAF form must be completed and submitted using the secure Suffolk Children and Young People's Portal¹¹.

6.3 Good assessment practice disciplines:

- Use plain language that the family understands
- Focus on specific behaviours that can be/have been seen
- Make clear distinctions between past harm, future danger, and complicating factors
- Make clear distinctions between strengths, and strengths that provide safety for children over time
- Use of deeper questioning to really understand what's working well and what the worries are
- Worries and working well are reflected on and are what helps form the analysis of need.
- Use authority skilfully- giving families choices and finding ways that work for them
- Assessment is an ongoing process and needs to be reviewed.

Please refer to [Learning Resources and Practice Tools](#) and [The Assessment Quality Checklist on the Suffolk Good Practice Guide](#).

7 On CAF Completion

- 7.1** On some occasions, the completion of the assessment may help you and the family identify next steps that you can work on and achieve together. In these cases, there may be no role identified for the Early Help Team and the CAF may be therefore used to plan and monitor support for the family.
- 7.2** For some cases, you may need the help of other professionals, who alongside you and the family can help plan next steps. In these circumstances, you can send your assessment to Suffolk County Council CYP Services for consideration by the CAF triage team.

The triage officers will offer you one of the following:

- Advice and Guidance on how you could support the child and family.
- Signposting to further support services.
- Pass through to Early Help to support your plan.

7.3 Full details and guidance on completing a CAF are available on the SCC website (see 6.2)

7.4 If your assessment is passed through to Early Help, the main route for this additional support would be through a Family's Network Meeting (FNM).

¹⁰ [Common Assessment Framework \(CAF\) referral. SCC website](#)

¹¹ [Children and Young People's Portal](#)

8 Family Network Meetings (FNM)

8.1 Family Network Meetings are a crucial part of practice to ensure that families are central to the planning and next steps, with children/young people at the heart.

The FNM should be held at the earliest opportunity to create, review and/or build on the CAF assessment and plan.

The purpose of the FNM is to get together a network, all the important people, family, friends, community support etc (not just professionals), ensuring that they have a clear understanding of the worries and the family's strengths, empowering the family to work in a collaborative way, set their own agenda and bring together their own resources to make things better for the child/young person's safety and wellbeing

Children/young people and their parents/carers should always be involved in the CAF/FNM process from assessment through to attendance at FNM meetings.

9 Family Network Plan (Early Help)

9.1 A plan:

- Is Child Centred and takes into account the child's experiences and views. This is achieved by spending time with children to seek and understand the things that are going well, things they are worried about and things they want to be different.
- Will have the child / young persons view throughout the plan
- Is a journey and not a product (dynamic)
- Is a plan which the family owns.
- Changes the everyday experiences of the child, so that everybody knows that the child is safe and well when things get difficult.
- Addresses the long-term need for the child to feel safe and well throughout their childhood (permanence).
- Is based on the assessment (CAF).
- Can be created as part of a Family Network Meeting.
- May contain professionals' views and actions that the family don't agree with.
- Identifies a Lead Professional.
- Includes a review date.
- Is realistic, achievable and solution focussed and moving towards enabling families to manage by themselves, with a family network or with universal services.
- Identifies what the family and professionals commit to doing, with timescales (not 'on-going' or 'asap').
- Written using words and pictures when needed for the child or young person or family.
- The plan should evidence enough safety for the child/young person for the case to close or develop a plan that creates interim safety and support, while reviews are organised to strengthen and develop the plan.

10 Reviewing the Plan

- 'Testing out' the plan is continuous.
- Assess the progress in relation to goals
- Success and progress is recognised
- Child is involved
- Plan is adapted, building on progress, and includes outstanding worries as well as any new areas of concern
- Scaling should be used to evaluate progress
- Reviews are part of continued assessment process
- Key Performance Indicators (KPIs):
 - **Gaining the child's voice** - 20 working days/ 4 weeks / 28 calendar days from the CAF episode start date and every 20 working days thereafter.
 - **First FNM** - 6 weeks / 30 working days / 28 calendar days from CAF episode start date.
 - **FNM Review** - every 6 weeks / 30 working days / 28 calendar days thereafter.

Further guidance is available on the [Good Practice Guide](#).

11 The Lead Professional/Worker

All children/young people in the CAF process will have a lead professional who is the main point of contact for the child/young person and family. They are responsible for liaison with the family ensuring that progress and achievement are reviewed regularly, recorded and plans completed. Any practitioner can undertake the role of the lead professional and the role is usually allocated at the first Family Network Meeting.

12 Transfer of cases

12.1 Children/young people who have been assessed and supported by the CAF Framework and whose needs or circumstances have changed may require a service from a specialist Social Care team.

12.2 The Transfer of Cases between Social Care and Early Help Teams ('Step Up/Step Down') policy¹² outlines the Suffolk CYP process. Dialogue about case transfer prior to referral is encouraged with the family, the lead professional and Social Care.

¹² [Transfer of Cases between Social Care and Early Help Teams – Policy v9.2](#)

13 Closing the CAF

13.1 If the CAF closes but there are still remaining worries, make sure the plan is robust and ensure the family, their network and any professionals know what they need to do to ensure the children are safe and well.

13.1.1 The final review meeting should include the child and all key people/professionals.

13.1.2 Opportunity to recognise success and together agree how the family led plan will continue after the CAF has closed.

13.1.3 Preparation has been undertaken with the family and child if the case is transferring between services.

13.1.4 Any ongoing needs or remaining worries and residual risk are recognised and reflected in the plan.

13.1.5 Ensure that feedback is captured – what has been useful for the family, what has made the difference for them?

13.2 A CAF represents an episode in a child/ young person's life during which support is provided to meet additional needs. It is not expected that a CAF episode will continue indefinitely. A point should be reached when the needs have largely been met or where there has been sufficient improvement to allow the child/young person/family to continue without extra support.

13.3 When the decision is made to close the CAF within the Early Help Service a management decision must be recorded clearly detailing the reason, rationale, any residual risk and likelihood of re-referral.

14 Re-open a CAF

14.1 If the child/young person's needs recur or new ones emerge then consideration to reopening the CAF should take place.

14.2 If the CAF was closed within the last 6 months, the assessor/practitioner should contact the previously allocated Team in the first instance to discuss a re-opening request. A request to re-open can then be made, if agreed through the Portal.

14.3 If the CAF has been closed for more than 6 months or there have been substantial changes in the situation a new assessment and consent must be completed. Details and further guidance available on the Suffolk County Council CAF website.

15 Record Keeping

15.1 All services are responsible for maintaining their own record keeping in line with their own policies and procedures

- 15.2** For Suffolk CYPS, CAF and FNM records are electronically stored on a CYP database. The recording policy and guidance¹³ can be found on the [Good Practice Guide](#).
- 15.3** Once a case is allocated it is the responsibility of the lead worker to ensure they keep accurate and up to date records. Records must incorporate the understanding of risk and well-being and reflect the child /young person's voice.
- 15.4** When working with a family with more than one child, consideration needs to be given to the impact on all children. It is not always appropriate to record for all the siblings. When a new baby is born, an assessment should be completed reflecting the needs of the baby and the impact on the wider family and siblings. If required, a new CAF should be completed, or the existing mapping/plan to be updated to include the other sibling. An individual client record should also be created. Refer to *Sibling Recording Guidance* (see Good Practice Guide).

Key Amendments, Updates and Stakeholders

- New CAF process through the Portal
- Amended links to relevant documents instead.
- Simplified some of the wording, removed duplication.
- Amended reference to Working Together to Safeguarding Children July 2018

In consultation with:

- Multi-agency Safeguarding Hub (MASH)
- Suffolk Safeguarding Partnership
- Social Care Services, Suffolk County Council
- Early Help Team, Suffolk County Council

¹³ [Case management guidance](#)