



## LANCASHIRE TEAM AROUND THE FAMILY (TAF) PLAN

*Indicates Mandatory fields which must be completed	
Date of TAF meeting*	
Is this the first TAF meeting?*	
Date URN Received (CAF Registration)*?	
Is this the 1 <sup>st</sup> CAF the family have had?	
How many TAF meetings have taken place since the CAF was registered*?	
Has the CAF been open 6 months*? (Please consider length of time CAF has been open, as assessment will require an update approaching 12 months).	

Details of children and/or young people:

Surname	Forename	Alias	DOB/ EDD	*Gender (M/F/ Mx)	CAF URN	Present at meeting? (*see Voice of the Child)

Child/young person's address (es): (Please state which child the address relates to if they live at different addresses)

Address		Name of child(ren)	
Postcode		Tel	

Address		Name of child(ren)	
Postcode		Tel	

Family/household members:

Name	Relationship to child/young person	Invited to TAF? Y/N	Attended meeting? Y/N	Contributed to plan? Y/N	Contact number

Key agencies working with this family/household:

Name	Organisation name	Invited to TAF? Y/N	Attended meeting? Y/N	Contributed to plan? Y/N	Contact number

Summary: Please provide an overview of new or additional information shared in the TAF meeting.

Action Plan: for those outcomes where support is needed, please detail agreed actions. Please ensure you keep the same action plan throughout the entire TAF process. PLEASE DO NOT DELETE ACTIONS ONCE THEY HAVE BEEN COMPLETED OR START A NEW SMART PLAN AT EACH MEETING. The actions should be outlined below as they are agreed, once the action is complete please do not remove from the plan just RAG rate it 'green' to show that the action has been completed. This will allow the family, practitioners involved (especially those new to the family) and the central team to view progress over a significant period of time. New actions should be added at the bottom of the plan as and when required. Top Tip: Always use your last TAF plan as the template for your next. 'Save As' your last TAF plan with the date of your new meeting; all you have to do then is update the attendance, write up your summary, RAG the actions, update the voice of the child and family and set a new date. The RAG process is outlined below for your reference:

Red	Action not started/No progress made
Amber	Some progress made/work still to do/On track to complete
Green	Completed - no further action required.

If you have identified any of Lancashire's targeted criteria, please ensure this is referenced within the action plan

Issue	Action	By whom	By when	Desired outcome	How will know when the outcome has been achieved?	Date action set	Date action completed	RAG
1	Brief summary of progress made since last TAF meeting:							
2	Brief summary of progress made since last TAF meeting:							
3	Brief summary of progress made since last TAF meeting:							
4	Brief summary of progress made since last TAF meeting:							

Issue	Action	By whom	By when	Desired outcome	How will know when the outcome has been achieved?	Date action set	Date action completed	RAG
5								
	Brief summary of progress made since last TAF meeting:							
6								
	Brief summary of progress made since last TAF meeting							
7								
	Brief summary of progress made since last TAF meeting:							
8								
	Brief summary of progress made since last TAF meeting:							
9								
	Brief summary of progress made since last TAF meeting:							
10								
	Brief summary of progress made since last TAF meeting:							

Highlight how the voice of the child has been taken into account during the course of this plan:  
(This question is mandatory and must be answered)

If the child/young person is of appropriate age/ability to contribute to their TAF plan then provision must be made to ensure their thoughts, wishes, like and dislikes are considered and evidenced. Alternatively If the child is unable to contribute (due to age or circumstance) please give reason why and provide a clear picture of the child from your observations focusing on likes, dislikes, preferences, relationships.

Highlight how the voice of the parent(s)/carers (including absent parent and fathers) has been taken into account during the course of this plan:

(This question is mandatory and must be answered)

#### Home visits

It is recommended that home visits are undertaken by a professional from the TAF. This does not necessarily have to be the lead professional. Home visits should be undertaken in each TAF Review period. This should be recorded on the professional's standard recording tool or on the TAF reporting tool template. If it is felt a visit is not necessary the reason must be evidenced within the TAF Plan.

Has a home visit been carried out during this TAF review period?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If no please evidence the reason	
If yes, date of visit:	

#### Details of lead professional:

Name		Role		Tel	
Agency		Email			
Address					
Is there a new Lead Professional*?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Name			
	If Yes, please provide details	Role			
Tel		Email			

Address	
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\*If the Lead Professional has changed, please inform [caf@lancashire.gov.uk](mailto:caf@lancashire.gov.uk)

**Important message for lead professionals**

Please ensure that you share the information in this TAF form with the child (ren)/young person/parent(s) and/or carer(s). Copies of the TAF form should be made available for the consenting parties to view. Consent for the TAF meeting to take place (and the information gathered & documented on the official TAF documentation) has been gained on the original CAF form. The details of information sharing/storage have been discussed with the consenting person at the point of the CAF assessment being completed. Any discrepancies in opinion should be clearly recorded on the TAF form.

Signature of the lead professional (plan completed by)

Signed		Name		Date	
<input type="checkbox"/> Signed copy held on file (tick to confirm)					

Please provide your line managers detail below for audit purposes:

Name		Role		Agency	
Tel		Email			

**Meetings**

Was this the final TAF meeting*?	Yes <input type="checkbox"/> If yes, please email <a href="mailto:caf@lancashire.gov.uk">caf@lancashire.gov.uk</a> No <input type="checkbox"/> If no, please provide the date and venue of the next TAF meeting below	
Date*		Venue*
Date copy of TAF plan given to child/young person/parent/carer*		
Date copy TAF plan emailed to CAF admin* <a href="mailto:caf@lancashire.gov.uk">caf@lancashire.gov.uk</a>		
Please ensure that a copy is sent to all professionals involved in delivering the action plan		

\*indicates mandatory fields which must be completed

Exceptional circumstances: concerns about significant harm to infant, child or young person:

If at any time during the course of this CAF assessment you feel that an infant, child or young person is suffering or is at risk of significant harm or abuse, you must follow your local safeguarding children board (LSCB) procedures and your own organisation's safeguarding children procedures. See the guidance 'Working together to safeguard children' published by Department of Education. If in doubt, consult with the agency safeguarding leads or Duty Social Worker on 0300 123 6720

Safe information exchange and data protection is important to us

Please send your completed plan to [caf@lancashire.gov.uk](mailto:caf@lancashire.gov.uk) . If you wish to encrypt your email and are unsure about this process please contact 01772 535636 or email [caf@lancashire.gov.uk](mailto:caf@lancashire.gov.uk) for advice