

LANCASHIRE COMMON ASSESSMENT FRAMEWORK (CAF)



Date assessment started:	
Date assessment completed:	
Version no:	

PART 1 (Complete once per Family)

Details of child (ren) and/or young people being assessed:

Surname	Forename	Alias	DOB/EDD	*Gender	CAF URN	*Ethnicity code	*Religion Code	Present at assessment (Y/N)	School/Nursery/ Further Education

*relates to guidance notes at the back of the assessment form

Please note asylum status below* (please see guidance at the back of the assessment form)

Has the family come to the UK under a refugee resettlement programme, such as the Syrian Resettlement Programme, the Gateway Protection Programme or the Vulnerable Children Resettlement Scheme?:

YES NO

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	

Details of parents/carers:

Name		Relationship	
Gender		DOB	

Ethnicity*		Address	
PR (parental responsibility)		Postcode	

Name		Relationship	
Gender		DOB	
Ethnicity*		Address	
PR (parental responsibility)		Postcode	

Other household members – include any other persons related or not related that currently reside in the home:

Surname	Forename	Alias	DOB	Gender	Previous CAF? (Y/N)	Relationships to child(ren) being assessed

Other significant family members – Please include information that relates to absent Fathers/Mothers:

Surname	Forename	Alias	DOB	Gender	Address	Relationships to child(ren) being assessed

Details of the person undertaking the assessment:

Name		Role		Tel	
Agency		Email			

Name and details of lead professional:

Name		Role		Tel	
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Agency		Email	
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Reason for CAF assessment:

Clearly outline here the main presenting concerns and unmet needs for the child/parents/family and any previous involvements or work that has been undertaken to address these.

Lancashire's Targeted Criteria:

Please tick if the family is experiencing** any of the following:		
Parents or children involved in crime or anti social behaviour <input type="checkbox"/>	Children who have not been attending school regularly <input type="checkbox"/>	Children who need help (CiN, CP, Early Help) <input type="checkbox"/>
Adults out of work or at risk of financial exclusion or young people at risk of worklessness <input type="checkbox"/>	Families affected by domestic violence and abuse <input type="checkbox"/>	Parents or children with a range of health problems <input type="checkbox"/>

**If 2 or more of the criteria are identified, this must be reflected in the Action Plan.

Key agencies working with this family/household:

GP Details:	GP Name:		Surgery/Practice and Address	
	Email:		Telephone:	

Service	Name	Role	Email/Tel	Contributed to assessment (Y/N)	Which family member?

PART 2.1 - Child (Complete one per child/young person being assessed)

CAF assessment summary:

Consider each of the elements and comment on each that is appropriate for this family. Wherever possible base comments on observations, evidence, not just opinion, and indicate what your evidence is. Wherever possible the voice of the child should be integral to the assessment. If there are any major differences of view, these should be recorded.

Child/young person’s developmental needs: (please ensure you consider each child individually)

You should consider each child individually within your summary.

Name of Child or Young Person being assessed:			
CAF URN:		Date of Birth:	
NHS Number (if known)			
Please summarise the strengths and outline any needs that are already being met.			

Please see guidance notes for information on Underlying Risk Factors and High Risk Indicators

	Unmet Need	Underlying Risk Factors	High Risk Indicators
Health General health, physical development, speech & Language, GP, dentist, engaged with health services			
Education Nursery, school & attendance, participation, progress & achievement in learning			
Emotional and behavioural development Routines/boundaries, positive behaviour			
Identity			

Identity, self-esteem, self-image			
Family and social relationships Building stable relationships with family, peers and wider community; helping others; friendships.			
Social presentation Child's appearance, social behaviour and personal habits			
Self-care skills and independence Personal hygiene			

PART 2.2 - Parents and Family (Complete once per family)

CAF assessment summary:

Consider each of the elements and comment on each that is appropriate for this family. Wherever possible base comments on observations, evidence, not just opinion, and indicate what your evidence is. Wherever possible the voice of the child should be integral to the assessment. If there are any major differences of view, these should be recorded.

Parenting capacity (please ensure you consider each parent individually)

You should consider each parent/carer individually within your summary. Wherever possible base your comments on evidence/observations not just opinion.

Please summarise the strengths and outline any needs that are already being met.

Please see guidance notes for information on Underlying Risk Factors and High Risk Indicators

	Unmet Need	Underlying Risk Factors	High Risk Indicators
Issues affecting parent/carers capacity to respond appropriately to child/young person's needs: consider basic care, ensuring safety, emotional warmth, stimulation, provision of guidance and boundaries and stability			
Are there any attributes of the parents/carers capacity's which effect			

their ability to respond appropriately to the child/young person's needs			
Should a referral be made to adult services? If yes include as an action in the initial plan			

Family and environmental factors:

Consider the relationships within the family/between siblings/parents and their children and other significant adults.

Please summarise the strengths and outline any needs that are already being met:

Please see guidance notes for information on Underlying Risk Factors and High Risk Indicators

	Unmet Need	Underlying Risk Factors	High Risk Indicators
<p>Family history and functioning Illness, bereavement, violence (MARAC), parental substance misuse, criminality, anti-social behaviour; culture, size and composition of household; absent parents, relationship breakdown; physical disability and mental health; abusive behaviour How do parents describe their relationship with each other? How do parents describe their relationship with their children? How do children describe their relationship with their parents? How do children describe their relationship with their siblings?</p>			
<p>Wider family Formal and informal support networks from extended family and others; wider caring and employment roles and</p>			

responsibilities			
Housing, Employment, Income Water/heating/sanitation facilities, sleeping arrangements; reason for homelessness; work and shifts; employment; income/benefits; effects of hardship; financial difficulties.			
Family social integration, Community resources Day care; places of worship; transport; shops; leisure facilities; crime, unemployment, anti-social behaviour in area; peer groups, social networks and relationships			

PART 3 - Analysis and Action Plan (Complete once per family)

Analysis of needs and risk

What is your analysis? Consider all strengths, unmet and complex needs; risk of harm to self or others.

Please take into account High Risk Indicators and Underlying Risk Factors identified within the body of the assessment (above) and how these impact on the child (ren) individually and the family.

Suggested outcomes:

- Progress to TAF meeting
- CAF closure **(Please ensure a CAF closure form is submitted to caf@lancashire.gov.uk)**

Reason

Action Plan - The offer of Early Help this child (ren) or young person requires, (please ensure you reference the Lancashire Targeted Criteria, if identified, in the assessment):

Issue	Action	By whom	By when	Desired outcome	How will know when the outcome has been achieved?

Highlight how the voice of the child or young person has been taken into account during the course of this assessment:

(This question is mandatory and must be answered)

If the child/young person is of appropriate age/ability to contribute to their CAF assessment 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 assessment:

(This question is mandatory and must be answered)

Date of the first TAF meeting:		Venue:	
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Consent: (Please see guidance to further explain information sharing with the family)

We need to collect the information in this assessment form so that we can understand what help you may need. If we cannot cover all your needs we may share some of the information with other organisations so that they can help us to provide the services you need.

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

All personal information will be processed and stored in compliance with the Data Protection Act.

I understand the information that is recorded on this form and that it will be stored and used for the purpose of providing services to (please tick):

- Me
- This Infant, Child or Young Person for whom I am a parent
- This Infant, Child or Young Person for whom I am a carer

I have had the reasons for information sharing and information storage explained to me and I understand those	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I agree to the sharing of information, as explained and outlined in the statement above.	<input type="checkbox"/> Yes	<input type="checkbox"/> No

I understand this consent is for the duration of the CAF and TAF process. I understand I can withdraw consent at any time.	<input type="checkbox"/> Yes
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Parent(s)/carer(s) signature:

Signature		Name		Date	
Signature		Name		Date	
<input type="checkbox"/> Signed Copy Held on file (please tick to confirm)? It is the responsibility of the organisation completing the assessment to ensure a signed copy of this form is held on file for audit and inspection purposes					

Assessor's Signature:

Signature		Name		Date	
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Please provide your line managers details below for audit purposes (this is mandatory and must be completed):

Name		Role		Agency	
Tel		Email			

Date copy CAF assessment shared with child/young person/parent/carer:	
Date copy CAF assessment emailed to CAF admin:	

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

Additional guidance notes:

The Lancashire CAF

The Lancashire CAF is set out in 3 parts.

- Part 1 is the demographic section and collates details about the family. This section should be completed once per family.
- Part 2.1 assesses the individual child or young person. This section will need to be completed for each individual child or young person who requires an assessment.
- Part 2.2 assesses parental capacity and family environment. This section should be completed once per family.
- Part 3 is the analysis and action plan. This section should be completed once per family.

Submitting a CAF/TAF

Safe information exchange and data protection is important to us

Please send your completed assessment to caf@lancashire.gov.uk if you wish to encrypt your email and are unsure about this process please contact 01772 535636 or caf@lancashire.gov.uk for advice.

CAF Registration refers to the date in which the URN is generated and sent to you.

Please ensure that CAF and subsequent TAF documentation is submitted in a timely manner to caf@lancashire.gov.uk

Gender: *chart as referred to on page 1 of the CAF assessment
Please use code MX if the person identifies as gender neutral.

Ethnicity Codes: *chart as referred to on page 1 of the CAF assessment

1. White British	5. Any other White background	9. Indian	13. White & Black Caribbean	17. Chinese
2. White Irish	6. Caribbean	10. Pakistani	14. White & Black African	18. Any other ethnic group
3. Traveller of Irish Heritage	7. African	11. Bangladeshi	15. White & Asian	19. Not given
4. Gypsy/Roma	8. Any other black background	12. Any other Asian background	16. Any other mixed background	

Religion Codes: *chart as referred to on page 1 of the CAF assessment

1. Baha'i	3. Christian	5. Jewish	7. None	9. Other spiritual belief
2. Buddhist	4. Hindu	6. Muslim	8. Other religious belief	10. Prefer not to say

Asylum status:

Please indicate your asylum or refugee status, if applicable:

1. Asylum Seeker	3. Refugee Status	5. Humanitarian Protection
2. Discretionary Leave to Return	4. Refused Asylum Seeker	6. N/A

Lancashire Children's Services Risk Management Model

Please refer to the Risk Sensible Toolkit to assist you in your action planning

<p>Underlying Risk Factors Those elements that are often present in risk situations but which do not, of themselves, constitute a risk:</p> <ul style="list-style-type: none"> • Poverty • Poor housing • Lack of support network/isolation • Experiences of poor parenting • Low educational attainment • Physical/learning disability (adult/child) • Mental health difficulties (adult/child) • Drug and alcohol use/misuse • Victimisation from abuse/neglect • Discorded/discordant relationships • Previous history of offending 	<p>High Risk Indicators Those elements which, by their presence, do constitute a risk:</p> <ul style="list-style-type: none"> • Previous involvement in child physical and sexual abuse and or neglect • History of being significantly harmed through neglect as a child • Seriousness of abuse (and impact on the child) • Age of the child (particularly if less than three years old) • Incidence of abuse (how much abuse over how long a period of time) • Record of previous violent offending (against both children and adults)
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<ul style="list-style-type: none"> • Rejecting/antagonistic to professional support • Behavioural/emotional difficulties in parent • Behavioural/emotional difficulties in child • Young, inexperienced parent • Physical ill health (adult/child) • Unresolved loss or grief 	<ul style="list-style-type: none"> • Older child removed or relinquished • Unexplained bruising (particularly in pre mobile children) • Uncontrolled mental health difficulties (including periods of hospitalisation) • Personality disorders • Chaotic drug/alcohol misuse • Denial /failure to accept responsibility for abuse or neglect • Unwillingness / inability to put the child's needs first and take protective action • Cognitive distortions about the use of violence and appropriate sexual behaviour • Inability to keep self safe • Unrealistic, age inappropriate expectations of the child
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Information Sharing/Consent Guidance

The Wellbeing, Prevention and Early Help Service may be required to share your information with appropriate partner agencies delivering services locally in order to deliver a full service to you and your family. All personal information will be processed and stored in compliance with the Data Protection Act.

Agencies that we may need to share your personal information with are listed below:

Adults' Social Care	Children's Services	Department for Communities and Local Government	Children's Social Care
Department for Work and Pensions (incl. Job Centre Plus)	Education	Fire and Rescue Service	Voluntary, Community and Faith Sector Organisations
Housing	Police	Public Health	Health Agencies
Youth Offending Teams	Other – please state		

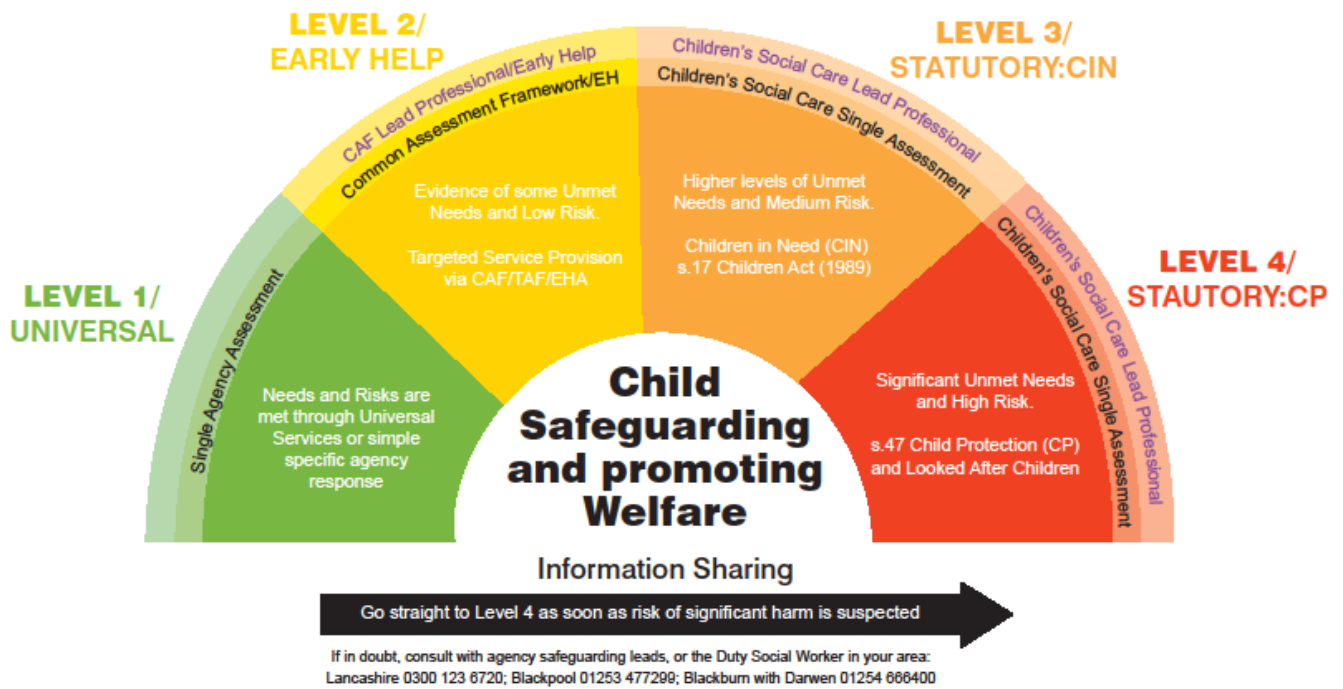
The agencies listed above may also share a limited amount of your personal information with other agencies in the list to ensure the most appropriate services are identified to support you and your family.

- Your information will not be shared with organisations that you instruct us not to share with (unless the law requires us to share or there is a risk of harm). Please highlight any agencies for which you do not consent to information sharing.
- Your consent to share personal information is entirely voluntary and you may withdraw your consent at any time.
- You are entitled to know what information we hold about you. If you find that any of your information is wrong, tell us so that we can correct it.

- We may also use your personal information to enable us to evaluate the effectiveness of the service offered to you. Any of your information used to undertake this monitoring and evaluation will be fully anonymised.

It is the responsibility of the organisation carrying out the assessment to ensure that a signed copy of the assessment is held on file for audit and inspection purposes.

Pan - Lancashire Continuum of Need



July 2017