Early identification, assessment of needs and intervention
The Common Assessment Framework for children and young people
A guide for managers
The Common Assessment Framework for children and young people

A guide for managers
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Foreword

The Common Assessment Framework for children and young people

A guide for managers
On 1 October 2006, the Children’s Workforce Development Council (CWDC) took over responsibility from the Department for Children, Schools and Families (DCSF) (previously the Department for Education and Skills – DfES) for the implementation of the toolkits and guidance which support integrated working.

They cover:

• information sharing
• the Common Assessment Framework (CAF)
• role of the lead professional
• multi-agency working

The policy for integrated working remains with DCSF.

This guidance replaces the Common Assessment Framework for children and young people: managers’ guide originally published by the DfES in 2006 and reprinted in September 2007. It remains non-statutory guidance. The new guidance has been updated and re-titled in order to reflect policy developments and include revisions identified in consultation with practitioners and managers across the children and young people's workforce. It also seeks to link together the processes and tools mentioned above, to show how collectively they provide a package of support to help practitioners and managers implement integrated working in their practice.

Two other relevant publications are: The Team Around the Child (TAC) and the lead professional and Co-ordinating and delivering integrated services for children and young people. These provide guidance for practitioners and managers on the lead professional functions and the TAC.

A further publication Information Sharing: Guidance for Practitioners and Managers is also available providing guidance to help practitioners work together more effectively to meet children and young people’s needs through sharing information legally and professionally.

This publication, Early identification, assessment of needs and intervention, provides guidance for managers on the CAF. A separate guide is available for practitioners.

All guidance materials can be found on the CWDC website www.cwdcouncil.org.uk and on the Every Child Matters website www.dcsf.gov.uk/ecm

Any enquiries relating to this document should be directed to integratedworking@cwdcouncil.org.uk
Foreword

Note on terms used in this guidance

Children and young people with additional needs

Children, young people and their families experience a range of needs at different times in their lives. However, while all children and young people require access to high-quality universal services, some of them also benefit from targeted support to address additional needs which may relate to education, health, social welfare or other areas.

An estimated 20 to 30 per cent of children and young people have additional needs at some point in their lives. This could be for a limited period, or on a longer-term basis. It is this group for whom targeted support within universal settings will be most appropriate.

The needs of children and young people with additional needs will, in many cases, be cross-cutting and might be associated with:

- disruptive or anti-social behaviour
- overt parental conflict or lack of parental support/boundaries
- involvement in, or risk of, offending
- poor attendance or exclusion from school
- experiencing bullying
- special educational needs
- disabilities
- disengagement from education, training or employment post-16
- poor nutrition or inadequate clothing
- ill health
- substance misuse
- anxiety or depression
- experiencing domestic violence
- housing issues
- teenage pregnancy and parenthood (including the risk of pregnancy and early parenthood, as well as actual pregnancies and parenthood among young people)
- young carers who exhibit additional needs which are as a direct result of their caring responsibilities, eg. truancy/lateness, ill health, housing issues

Children and young people with complex needs

Of those children and young people with additional needs, a small proportion has more significant or complex needs which meet the threshold for statutory involvement. These are:

- children and young people who are the subject of a child protection plan
- ‘looked after’ children
- care leavers
- children and young people for whom adoption is the plan
- children and young people with severe and complex special educational needs
- children and young people with complex disabilities or complex health needs
- children and young people diagnosed with significant mental health problems
- young offenders involved with youth justice services (community and custodial)
**Children and young people**
The terms ‘child or young person’ and ‘children or young people’ are used throughout this document to refer to unborn babies, infants, children and young people aged 0 to 19.

The CAF is generally used with children and young people up to the age of 18, but its use can be extended beyond 18 where appropriate to enable the young person to have a smooth transition to adult services. In the case of the Connexions service, the CAF can be used with young people up to the age of 19, and up to the age of 24 where a young person has a learning difficulty or disability.

**Parents and carers**
The terms ‘parent’ or ‘carer’ refer to mothers, fathers, carers and other adults with responsibility for caring for a child or young person. For more information on parental responsibility
GO TO: www.direct.gov.uk/en/Parents/ParentsRights/DG_4002954
Executive summary: the CAF at a glance

Status of this initiative
The CAF for children and young people is one of the elements of integrated frontline service delivery. This is outlined in the statutory guidance supporting section 10 (inter-agency co-operation) and section 11 (safeguarding and promoting the welfare of children) of the Children Act 2004. All local authorities and relevant partners have to take account of this guidance. If they decide to depart from it, they must have clear reasons for doing so.

What is the CAF?
The CAF is a shared assessment and planning framework for use across all children’s services and all local areas in England. It aims to help the early identification of children and young people’s additional needs and promote co-ordinated service provision to meet them.

Who will use the CAF?
Every practitioner in the children and young people’s workforce should understand the government outcomes for all children and young people as set out in Every Child Matters (ECM). They should know about the CAF and how to undertake one. Every manager offering services to children and young people should ensure at least some of their staff are equipped to undertake common assessments.

What does the CAF consist of?
- a pre-assessment checklist to help decide who would benefit from a common assessment
- a process to enable practitioners in the children and young people’s workforce to undertake a common assessment and then act on the result
- a standard form to record the assessment
- a delivery plan and review form

The assessment covers three domains:
- development of the child or young person
- parents and carers
- family and environment

Who is the CAF for?
The CAF is aimed at children and young people with additional needs who have needs that are not being met by their current service provision.

How does the CAF link with other assessments?
The CAF has replaced the assessment aspects of the Connexions Framework for Assessment, Planning, Implementation and Review (APIR). Other assessments such as universal checks and specialist assessments (for children in need; those with special educational needs etc) remain in place. However, the CAF may be appropriate to be used before, after, or in conjunction with these assessments to help understand and articulate the full range of a child or young person’s needs.
How does the CAF operate?
There are four main stages in completing a common assessment: identifying needs early, assessing those needs, delivering integrated services and reviewing progress.

Implementing the CAF
Led by the Director of Children’s Services (DCS), partner agencies will need to work together to:

• plan integrated frontline delivery of the CAF, lead professional and good practice in information sharing
• introduce organisational arrangements to ensure good quality assessments and processes for resolving disputes between practitioners
• ensure all practitioners undertaking common assessments, or receiving assessment information, have had enhanced level criminal records bureau checks
• establish mechanisms for storing and sharing the CAF information securely with other practitioners supporting the child or young person

Training and support
Services locally need to agree which practitioners will be trained to use the CAF and which need some knowledge of it. Operational managers should agree with each of their practitioners:

• what their role should be and any development needs
• who can undertake assessments
• how and when they will access training
• how they will be supported on an ongoing basis in the workplace
A guide for managers

The Common Assessment Framework for children and young people

Background
Background

1.1 This guidance is aimed at strategic and operational managers across the children and young people’s workforce who have responsibility for implementing the CAF for children and young people. In schools and colleges, this guidance is for heads or principals, deputies and other members of the senior management team. It is part of a set of materials for practitioners to help implement the Every Child Matters: Change for Children programme. This set comprises:

The CAF
A framework to help practitioners work with children and families and/or young people to assess children and young people’s needs for earlier and more effective services, develop a common understanding of those needs and how to work together to meet them.

The lead professional
The person responsible for co-ordinating the actions identified in the assessment process; a single point of contact for children and young people with additional needs, supported by more than one practitioner within a TAC.

Information sharing
Helping practitioners work together more effectively to meet children and young people’s needs through sharing information legally and professionally.

1.2 DCSs, working in partnership with local agencies, are responsible for implementing these developments, as part of their Children’s Trust arrangements under section 10 of the Children Act 2004. The statutory guidance accompanying sections 10 and 11 sets out the government’s expectations that the CAF, lead professional and information sharing are key aspects of delivering better services to children and young people. This suite of guidance materials provides information to help those organisations covered by sections 10 and 11 to carry out their planning and implementation duties.
1.3 DCS’s are expected to take the lead in agreeing with their partners how to operate the CAF, introduce a lead professional model of working, and information sharing arrangements as part of the development of Children’s Trusts. Further legislation is expected in 2009 to strengthen the remit of Children’s Trusts and to give them a statutory duty and accountability for children and young people within their area.

1.4 Although integrated working developments and practices do vary from area to area, applying this guidance will lead to greater standardisation and facilitate cross-border working between local areas. In addition, the CAF will help local areas to meet improvements to assessments specified in their Children and Young People’s Plans. The CAF has been developed by the CWDC with support from local area representatives and national partners.

The policy context

1.5 The government is committed to improving outcomes for all children and young people. The policy framework underpinning this includes ECM, Youth Matters (2005), the Children’s Plan (2007), all of which are concerned with improving the lives of children and young people so that they can all achieve the following five outcomes:

- be healthy
- stay safe
- enjoy and achieve
- make a positive contribution
- achieve economic well-being

1.6 In addition, The National Service Framework for Children, Young People and Maternity Services (2004) sets standards in health and social care for improving service delivery. This is particularly around:

- health and well-being
- delivering child-centred services
- safeguarding and promoting welfare
- supporting people who are disabled or who have complex health needs
- promoting mental health and psychological well-being
1.7 In 2007, the government published the Children’s Plan which sets out a series of ambitions for all areas of children’s lives including early years foundation, levels of literacy and numeracy, GCSEs, A levels, child poverty, health and youth offending. The Children’s Plan: One Year On (2008) sets out progress so far and the next steps needed to make its ambitions reality.

1.8 This is reinforced by policy initiatives for schools and families which support the government’s ambition to make England the best country in the world for children and young people to grow up in. Centrally, this includes:

- **21st Century Schools: A World-Class Education for Every Child (2008)** sets out the ambition laid out in the Children’s Plan, that 21st century schools will be hubs for the community, providing access to a range of services for children, young people and families. These might include health, family support, adult learning and leisure activities. This will mean that the entire school system, and individual schools will need to look beyond traditional boundaries, be outward facing and work in close partnership with young people, parents, children’s centres, other schools, colleges, universities and with other children’s services.

- **Think Family: Improving the Life Chances of Families at Risk (2008)** sets out a vision for a local system that improves the life chances of families at risk and helps to break the cycle of disadvantage. The report outlines the key characteristics of a system that ‘thinks family’ at all levels, from governance to the frontline. Following publication, work on families at risk is now being taken forward by the DCSF. The Family Pathfinder programme was launched in May 2008 and will develop a ‘Think Family’ approach championed by the Task Force. 15 local areas will test innovative ways of supporting vulnerable families. The national roll-out of ‘Think Family’ also promotes the use of the CAF with a strong emphasis on section 3 of the assessment (family and environment) so as to bring out the needs of the wider family more thoroughly.
1.9 To successfully achieve these ambitions, the government is committed to the development of a world-class workforce across all Children’s Trusts. To this end, *The 2020 Children and Young People’s Workforce Strategy* (2008) sets out a vision for a reformed and integrated children and young people’s workforce “where people know when and how they need to work together – and have the skills and capacity to do so.” This includes developing:

- a more integrated approach to the development of leaders and managers
- a strategic approach to recruitment
- effective partnership working, as well as partnerships with children, young people and parents/carers
- high-quality and accessible qualifications, training and progression routes
- workforce skills and knowledge to support children and young people who are particularly vulnerable
- a knowledge bank for the children and young people’s workforce to ensure that practice, training and workforce development is firmly evidence based

A conceptual model for meeting children and young people’s needs

1.10 A key part of the development of Children’s Trusts and the reform of children’s services is integrating systems and processes. This is to ensure the needs of children, young people and families are met in a more appropriate and cohesive way. Many local areas have begun to do this by creating a ‘whole systems’ approach where the needs of children, young people and families lie along a continuum, supported by flexible and responsive services which become increasingly targeted and specialist, according to need. Managers report that using a visual model is the most helpful way of communicating to others what they are trying to achieve. Where areas have not yet done so, they may wish to use Figure 1 (opposite) to help them develop their own approach.

1.11 Children, young people and families are supported most effectively when services are planned and delivered in a co-ordinated way to offer integrated support across the continuum of needs and services. A range of processes and tools have been developed to help practitioners deliver more integrated support, including the CAF.
Figure 1: Continuum of needs and services

Note: Diagram is not to scale in representing the proportion of children and young people in each section of the windscreen.

This diagram has been provided by the Department for Children, Schools and Families.
The common service delivery pathway

1.12 The CAF is a shared assessment and planning framework for use across all children’s services and local areas in England. It aims to help the early identification of children and young people’s additional needs and promote co-ordinated service provision to meet those needs.

1.13 The following process chart is a high-level representation of the typical activities that practitioners would be expected to undertake when in contact with a child or young person who appears to have unmet need(s). Different parts of this pathway could involve different practitioners. Note that the sequence of activities here is an example only – the actual process may vary.

To view the full-size chart
GOTO: www.cwdcouncil.org.uk/common-service-delivery-pathway
Figure 2: The common service delivery pathway

This diagram has been provided by the Department for Children, Schools and Families.

### Title
A high-level representation of the typical activities that practitioners would be expected to undertake when in contact with a child or young person who appears to have unmet need(s). Different parts of this pathway could involve different practitioners. Note that the sequence of activities represented here is an example only - the actual sequence can vary and/or be highly iterative.

### Key
- Process step
- Pre-defined process step (details elsewhere)
- Decision
- Start / End

### Supporting tools:
- Info Sharing Guidance
- Contact Point
- CAF
- National eCAF or Case Management System

### Description
This is a high-level representation of typical activities that practitioners would be expected to undertake when in contact with a child or young person who appears to have unmet need(s). Different parts of this pathway could involve different practitioners. Note that the sequence of activities represented here is an example only - the actual sequence can vary and/or be highly iterative.

### Activities
- **Start**
  - Handle input from others (public and non-practitioners)
  - Recognise potential need
- **Recognise potential need**
  - Identify need
  - Speak to colleagues
- **Identify if other practitioners are (or were) involved with the child**
  - Check if common assessment has been recently done
  - Lead professional already appointed?
    - Yes: Share observations with lead professional and agreement next step
    - No: Other practitioner(s) involved with child?
      - Yes: Contact other practitioner(s) to share observations and agree next steps
      - No: Is a common assessment / reassessment required?
        - Yes: Undertake common assessment
        - No: Identify likely support required and involve practitioners as appropriate
- **Identify likely support required and involve practitioners as appropriate**
  - Agree plan of action, FAC and appoint lead professional if appropriate
  - Undertake agreed action(s)
- **Undertake agreed action(s)**
  - Review impact of actions
    - Have needs been met?
      - Yes: Close case
      - No: Have needs or situation changed?
        - Yes: Handle transition back to mainstream service
        - No: Re-view need
- **Re-view need**
  - Child has additional needs?
    - Yes: Identify likely support required and involve practitioners as appropriate
    - No: Agree plan of action, FAC and appoint lead professional if appropriate
- **Agree plan of action, FAC and appoint lead professional if appropriate**
  - Undertake agreed action(s)
- **Undertake agreed action(s)**
  - Review impact of actions
    - Have needs been met?
      - Yes: Close case
      - No: Have needs or situation changed?
        - Yes: Handle transition back to mainstream service
        - No: Re-review need
- **Re-review need**
  - Child requires statutory assessment?
    - Yes: Trigger statutory processes (e.g. Child in Need, SEN)
    - No: Follow guidance for statutory processes
- **Follow guidance for statutory processes**
  - As defined in legislation, e.g., Children Act 1989, Education Act 1996
- **As defined in legislation, e.g., Children Act 1989, Education Act 1996**
  - Child requires statutory processes (e.g. Child in Need, SEN)
  - Follow guidance for statutory processes
- **Follow guidance for statutory processes**
  - This could happen at any stage of the process - supported by CAF and other tools as appropriate
- **Handle transition back to mainstream service**
  - Regular last or online update
  - Update common assessment / case information
  - Extract from case information
  - Update ContactPoint
  - Child / practitioner details
  - Close case
Resources and implementation

1.14 CWDC has provided funding to local areas to support the implementation of integrated working and workforce reform. This is available annually from 2008-2011 and is approximately £20 million across the 152 local areas.

1.15 CWDC has also developed the One Children’s Workforce Framework (OCWF) and Tool to help each Children’s Trust to move towards a reformed workforce. The online tool, which was piloted in 2008, will help local areas understand their children and young people’s workforce better, analyse areas for potential improvement, and thus focus development activity on the areas that are likely to have the greatest positive impact on ECM outcomes. ‘Integrated working practices’ is one of the seven strands of a reformed children and young people’s workforce.

Figure 3: The One Children’s Workforce Framework

You can explore the framework online at
GO TO: http://onechildrensworkforce.cwdcouncil.org.uk
Workload
1.16 Managers are encouraged to take into account the workload implications for practitioners involved in CAF and lead professional work. When embedded across children’s services, these developments should lead to efficiencies by reducing the time spent on finding out who is working with a child or young person, reducing duplication and responding to children and young people’s needs early, before they escalate to a crisis point. However, each service will need to recognise the staff time spent on these activities by individual practitioners.

Training
1.17 Training materials to support the move to integrated working are available. They enable practitioners to work together as part of one children and young people’s workforce to deliver integrated frontline services, using common processes and tools. The materials address the specific requirements of CAF, the lead professional role and integrated working will be monitored as a part of the Comprehensive Area Assessment (CAA) which replaced (from April 2009) the Comprehensive Performance Assessment, children’s services Joint Area Reviews, and Annual Performance Assessment. For the first time, joint working arrangements between local authorities, health, police, fire and rescue and wider organisations will be held collectively accountable for the outcomes they deliver for communities in their area. The CAA will consider how partnerships are listening and responding to local community priorities.

Monitoring
1.18 The outcomes of local authorities’ implementation of CAF, the lead professional role and integrated working will be monitored as a part of the Comprehensive Area Assessment (CAA) which replaced (from April 2009) the Comprehensive Performance Assessment, children’s services Joint Area Reviews, and Annual Performance Assessment. For the first time, joint working arrangements between local authorities, health, police, fire and rescue and wider organisations will be held collectively accountable for the outcomes they deliver for communities in their area. The CAA will consider how partnerships are listening and responding to local community priorities.

Equality and diversity
1.19 Within the CAF, lead professional and integrated working approach, all managers and practitioners (in local authorities and third sector organisations) have a responsibility to ensure that every child and young person is treated equally and fairly, and not discriminated against on any ground, including those that arise from race, ethnicity, religion or belief, gender, age, disability, social class, sexuality or marital status.

1.20 All agencies and organisations should seek to embed equality issues in their policies and practices. This includes:
• identifying equality goals and the action plan to implement them
• consulting appropriate stakeholders
• ensuring that equality issues are addressed in all proposed developments in policy, provision and practice
• working towards a diverse workforce able to meet the shared and specific needs of all children and young people

GO TO: Equality and Human Rights Commission www.equalityhumanrights.com
CAF and integrated working
The Common Assessment Framework for children and young people
A guide for managers
CAF and integrated working

The CAF is one of a number of integrated tools and processes which help practitioners to assess and address the needs of a child or young person. The diagram below describes the journey a practitioner may follow when putting in place early intervention support for a child or young person. For more information, see Annex C of the 2020 Children and Young People’s Workforce Strategy.

GO TO: www.dcsf.gov.uk/everychildmatters/strategy/childrenandyoungpeoplesworkforce/workforcestrategy

2.1 Integrated working focuses on enabling and encouraging the children and young people’s workforce in the public, private and third sectors to work together effectively to deliver frontline services. This requires everyone supporting children and young people to work together effectively to put the child or young person at the centre of everything they do, meet their needs and improve their outcomes as set out in ECM. Universal services do this by providing preventative personalised services for all children and young people in their day-to-day work. In most cases, a child or young person’s needs are addressed at this early stage.

2.2 Integrated working is about building the children and young people’s workforce, with all practitioners and sectors working together, and communicating effectively. It is not a new concept but, since 2006, specific tools and processes have helped embed integration more fully across the workforce.

Figure 4 sets out this process using an early intervention journey diagram.

Stage 1: Providing Preventative Personalised Services

2.3 Integrated working is particularly important when a child or young person has additional needs to those usually met through universal services. Universal services provide preventative personalised services for all children and young people in their day-to-day work. In the majority of cases, a child or young person’s needs are addressed at this early stage. Integrated tools and processes help identify and assess needs early, and put in place support for practitioners working together to tackle those needs as early as possible. Needs can therefore be addressed more quickly.
and effectively because practitioners with a range of expertise and skills from across the children and young people’s workforce provide preventative personalised services.

**Stage 2 and 3: Identifying needs earlier and assessing those needs**

2.4 The CAF is a key tool for integrated working as it is a generic and holistic early assessment of a child or young person’s strengths and needs that is applicable across all children’s services and the whole children and young people’s workforce. The CAF is an assessment of what the family and services can do jointly to address children and young people’s needs.

**Stage 4: Forming the team around the child**

2.5 Where a multi-agency response is required, the TAC brings together practitioners from across different services who work together to co-ordinate and deliver an integrated package of solution-focused1 support to meet the needs identified during the common assessment process. It is important that the child or young person and parents/carers are also included as part of the TAC.

**Stage 5: Co-ordinating and delivering integrated services**

2.6 In these instances, the person who undertakes the common assessment (and identifies the need for multi-agency support) is responsible for convening the first TAC meeting from which a lead professional is agreed. The lead professional acts as the main point of contact for the child or young person and their family, and co-ordinates delivery of integrated services.

**Stage 6: Reviewing progress**

2.7 The common assessment and delivery plan are regularly reviewed by the TAC to monitor progress toward agreed outcomes. The review identifies any unmet or additional needs for the child or young person’s smooth transition between universal, targeted and specialist services. In the case of multi-agency responses, this will involve further multi-agency meetings and liaison between the members of the TAC.

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1 Solution-focused approaches focus on what people want to achieve, as opposed to focusing on their problems.
2.8 Effective integrated working is underpinned by good practice in information sharing and effective communication.

**Information sharing**

2.9 Information sharing is a key part of the government’s goal to deliver better, more efficient public services that are co-ordinated around the needs of children, young people and families. Information sharing is essential to enable early intervention and preventative work, for safeguarding and promoting welfare, and for wider public protection. Information sharing is a vital element in improving outcomes for all.

2.10 The CAF aims to enable and support good practice in information sharing about the needs of children and young people as part of preventative services. In so doing, all sharing (and storing) of information should be done lawfully and comply with the Data Protection Act 1998.

Practitioners are not expected to read the Data Protection Act 1998 as all relevant information is available in *Information Sharing: Guidance for practitioners and managers.*

**GO TO:** www.dcsf.gov.uk/ecm/informationsharing

2.11 IT tools such as ContactPoint and National eCAF2 are being introduced to support more effective information sharing.

**Effective communication**

2.12 ContactPoint is a contact list of those who work with children and young people. It provides a quick way to find out who else is working with the same child or young person, making it easier to deliver more co-ordinated support. It holds basic identifying information about all children and young people in England up to their 18th birthday, and contact details for their parents and for services working with the child or young person.

ContactPoint holds only the following information:

- name, address, gender and date of birth of a child or young person, and an identifying number for all children and young people in England up to their 18th birthday
- name and contact details of parents or carers, educational setting (eg school), primary medical practitioner (eg GP) and practitioners providing other relevant services

There is a facility to indicate if a practitioner is a lead professional for a child or young person.

There is also a facility to indicate if a practitioner has undertaken an assessment under the CAF (the assessment itself will not be accessible from ContactPoint).

ContactPoint will not hold case data or sensitive information.

**GO TO:** www.dcsf.gov.uk/ecm/contactpoint

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2 eCAF is a national system to allow practitioners to electronically create, store and share CAF information securely.
2.14 National eCAF is being developed to support practitioners who use the CAF to assess a child or young person’s additional needs and determine how they will be met. It will be a national system to allow practitioners to electronically create, store and share CAF information securely; enabling them to work together more effectively across geographic and organisational borders when helping a child or young person.

A single national eCAF system will help to promote a consistent working approach between all practitioners, supporting practitioners working in different agencies and locations to deliver a co-ordinated service effectively and efficiently. National eCAF will provide an automatic feed to ContactPoint to show that a common assessment has been started or undertaken for a child or young person.

GO TO: www.dcsf.gov.uk/everychildmatters/strategy/deliveringservices1/caf/ecaf/ecaf

2.15 For those organisations that are required to provide information to ContactPoint (the majority of organisations that will use CAF), there is a statutory duty for practitioners to inform ContactPoint of the existence of a CAF whether it is in paper form, held on a local IT system or is on the National eCAF system.

Initially, and prior to the availability of National eCAF, this might require the practitioner undertaking the CAF to add their contact details directly to ContactPoint. Over time, more local systems will become ContactPoint compliant and will be able to supply this information automatically.

Practitioners are not required to seek consent to supply this information to ContactPoint, but it would be good to inform the child or young person and/or parent/carer that the existence of a CAF will be indicated on ContactPoint. This could be reinforced in local Fair Processing Notices or local leaflets explaining the CAF to children, young people and their families.

GO TO: www.dcsf.gov.uk/ecm/contactpoint
Figure 5: Processes and tools to support children and families

Note: Diagram is not to scale in representing the proportion of children and young people in each section of the windscreen.

This diagram has been provided by the Department for Children, Schools and Families
Multi-agency integrated support
2.16 The CAF, together with the lead professional and good practice in information sharing is crucial in developing multi-agency integrated support. These processes will help change the way that services are delivered, shifting the focus from dealing with the consequences of difficulties in children and young people’s lives to preventing things from going wrong in the first place. This will help more children and young people to achieve the five ECM outcomes.

2.17 Figure 5 (page 25) shows where and how the CAF, the lead professional and information sharing can be introduced to support children, young people and families more effectively.

Which services is CAF aimed at?
2.18 Managers need to have knowledge of the CAF. This is important across all organisations in the statutory and third sectors which offer services to children, young people and their families. The relevant services include health, schools (including independent schools), further education colleges, youth support services/Connexions, childcare, early years, social care, police and youth justice.

2.19 Once the CAF is embedded, it is expected that, where there is a concern about a child or young person, the majority of common assessments will be undertaken or arranged by workers in universal services such as schools, health settings and early years settings; for example, Sure Start Children’s Centres. These practitioners are best equipped to identify children and young people’s needs in their early stages.

2.20 Targeted and specialist services will need to work with universal services to provide support to children and young people with needs identified through common assessment. Over time, the CAF should become the main method for early assessment. This should help focus any Common assessments undertaken in universal services (eg. schools offering access to extended services) will help tackle a broader range of social and behavioural issues acting as a barrier to learning and attainment. Similarly, in health, common assessments will help midwives and health visitors take a broad view of the issues affecting unborn and new born infants, as part of the national Healthy Child Programme. Practitioners working with older children and young people in other settings, such as health drop-ins in schools, further education colleges and youth centres, will be able to identify needs early using the common assessment. The police also have an important role in identifying children and young people with additional needs and arranging common assessments.
subsequent specialist assessment. Where, following a CAF, specialist assessments are necessary, they should build on the common assessment.

2.21 A description of how the CAF is expected to operate in different sectors and partner organisations can be found in Section 6.

2.22 Effective integrated working is underpinned by:

- **Information sharing**: guidance, training and support materials are available to support good practice in information sharing by offering clarity on when and how information can be shared legally and professionally, to achieve improved outcomes. The guidance also explains how organisations can support practitioners and ensure that good practice in information sharing is embedded. GO TO: www.dcsf.gov.uk/ecm/Informationsharing

- **Common Core of Skills and Knowledge for the children and young people’s workforce**: this sets out the knowledge and skills all practitioners (including volunteers) need to work effectively with children, young people and families. GO TO: www.cwdcouncil.org.uk/common-core

- **Championing Children**: a framework that establishes a shared set of skills, knowledge and behaviours for those who are leading and managing integrated children’s services. A resource book to support implementation is also available. GO TO: www.cwdcouncil.org.uk/championing-children

- **Multi-agency working**: there are a number of ways of delivering multi-agency services; an online resource is available for managers and practitioners in a range of settings who are starting to work with families in new ways. GO TO: www.cwdcouncil.org.uk/multi-agency

- **CWDC Share!** has been developed to show how integrated working can really make a difference to the lives of children, young people and families. CWDC Share! highlights emerging practice in the children and young people’s workforce, breaking down the barriers and demonstrating solutions to make implementing of integrated working more achievable. GO TO: www.cwdcouncil.org.uk/cwdc-share
Introduction to the Common Assessment Framework

The Common Assessment Framework for children and young people

A guide for managers
Introduction to the Common Assessment Framework

3.1 The CAF provides a planning and assessment framework which can be used across all children’s services and across all local areas in England. It aims to enable early identification of needs, leading to planned and co-ordinated provision of services.

3.2 The CAF consists of:
- a common process to enable practitioners to undertake a common assessment and then act on the result
- a standard form to help practitioners record and, where appropriate, share their assessments and recommendations for support
- a pre-assessment checklist which practitioners may use to help them decide whether a child or young person would benefit from completing a common assessment

3.3 The CAF process has been designed so that common assessments are:
- an early assessment of a child or young person’s needs that can act as a basis for early intervention, i.e. before problems reach crisis point
- holistic – looking at the broad range of a child or young person’s needs, not just within the remit of any one particular service
- undertaken by (and understandable by) practitioners from across the children and young people’s workforce
- high-quality – undertaken according to good practice standards in working with children, young people and families, and providing an evidence base that is trusted by other services
- practical – leading to the development of an effective plan to meet any identified needs
- co-ordinated and shared between relevant practitioners

3.4 The CAF is aimed at children and young people with additional needs (see page 6 for definition):
- including unborn babies
- generally up to the age of 18, but extended beyond 18 where it is appropriate to enable the young person to have a smooth transition to adult services (e.g. for young people with learning difficulties or disabilities, assessments can be carried out up to the age of 25)
- who have needs that are not being met by their current provision
- who would benefit from an assessment to help a practitioner understand their needs, determine whether other services should be involved in providing support and engage further services
- who are particularly vulnerable (e.g. persistent truants, excluded pupils, those working in the sex industry, victims of crime and young runaways)
3.5 The CAF is not appropriate for:
• the majority of children and young people who are progressing satisfactorily towards the five ECM outcomes within universal services
• situations where an immediate statutory or specialist assessment is needed or is the most appropriate way to determine support required
• a child or young person about whom there is concern that they may be suffering, or may be at risk of suffering, harm. In such instances, Local Safeguarding Children Board (LSCB) procedures should be followed without delay. If you are unsure what to do, contact your local safeguarding lead of children’s social care.

For further advice, see:
• Working Together to Safeguard Children (HM Government, 2006), which provides guidance on how all agencies should work together to promote children’s welfare and safeguard them from harm
• What to do if You’re Worried a Child is Being Abused (HM Government, 2006)

GO TO: www.dcsf.gov.uk/everychildmatters/safeguardingandsocialcare/safeguardingchildren/safeguarding

Who can offer a CAF?

3.6 It is expected that every practitioner in the children and young people’s workforce will:
• understand the outcomes we want for all children and young people; for example, by using the pre-assessment checklist to identify children and young people who need additional support to fulfil their potential
• know about the CAF, and when and how to have a common assessment undertaken, or know how to undertake one
• know that there are mechanisms for finding out if a CAF already exists and if other people are already working with the child or young person
• fully understand the information sharing and consent implications of the CAF process

Authorised practitioners will know how to consult ContactPoint (when available) to find out who else is working with the same child or young person and if a CAF already exists before undertaking an assessment.

3.7 The CAF can be offered by any practitioner across the children and young people’s workforce. This includes practitioners and managers in early years services, for example, Sure Start Children’s Centres; education; health; social, family and community support; youth services; justice and crime prevention; sport and culture. These professionals are identified in the 2020 Children and Young People’s Workforce Strategy (2008) and illustrated in Figure 6 (opposite)

GO TO: www.dcsf.gov.uk/everychildmatters/strategy/childrenandyoungpeoplesworkforce/workforcestrategy
Core Children and Young People’s Workforce:
People who work or volunteer with children, young people and their families, or are responsible for their outcomes all the time.

Wider Children and Young People’s Workforce:
People who work or volunteer with children, young people and/or their families part of the time, or are responsible for their outcomes as part of their jobs.

Figure 6: Children and young people’s workforce

This diagram has been provided by the Department for Children, Schools and Families.
3.8 It will be up to individual services (whether in the public or third sectors) to determine which practitioners will undertake common assessments and provide the necessary training and support for them to do so. Specialist services, such as children's social care teams, which are more likely to be recipients of CAFs, will need to know how to use and build on the information contained in them. A child, young person, parent or carer can request that the CAF process is undertaken. It is possible that a young person, parent or carer may go on to be the lead professional.

3.9 All practitioners undertaking common assessments, or receiving assessment information, need to have enhanced level Criminal Records Bureau (CRB) checks. This applies to both the CAF and National eCAF. Line managers are responsible for ensuring that CRB checks are carried out.

3.10 The offer of the CAF is universal in the sense that every child or young person is entitled to have a common assessment undertaken if they, their parents/carer or a professional working with them think they may have, or believe they have, additional needs. However, having a common assessment undertaken does not guarantee the provision of particular services, and local areas will need to determine where to focus their resources in line with local priorities. Managers also need to ensure that practitioners understand local priorities and the availability of local services, and do not promise services on behalf of other agencies or organisations.

The common assessment and other assessments

3.11 The CAF is a holistic, generic assessment, planning and delivery framework. It provides an early assessment of a child or young person’s needs for additional services. As a generic assessment, it can be used:

- across a wide range of children’s services
- for a wide variety of children and young people’s needs – educational, health, social welfare, behavioural and emotional
- to help identify the provision of support from across children’s services to sustain progress towards all five ECM outcomes

3.12 As a generic assessment, the CAF is distinct from specialist assessments which:

- have a much more specific purpose (for example, assessments under section 17 of the Children Act 1989, where the main purpose is to determine whether a child or young person is a ‘child in need’; whether the child, young person or family requires services; or Onset where the main purpose is to assess the child or young person’s risk of offending)
- are undertaken by staff from a particular service or sector (eg, criminal justice)
- are usually undertaken only by staff of a particular occupational or professional group (eg, social worker)

3 The National eCAF system will allow a practitioner to electronically create, store and share a CAF securely. It will give practitioners from different sectors, who are approved and trained to use the system, appropriate access to key information concerning the assessment.
3.13 There are broadly two types of specialist assessment, each of which interacts with CAF in a different way:

- checks or assessments for specific development characteristics or milestones which apply to all children and young people; for example, the developmental checks undertaken by health professionals as part of the Healthy Child Programme, or progress checks against the national curriculum conducted in schools, such as the Foundation Stage Profile

- additional assessments of children and young people with known issues or where there are specific or acute concerns. Examples include assessments under section 17 of the Children Act 1989, The Special Educational Needs (SEN) Code of Practice, Asset, Onset, drugs screening, and assessments of children and young people with disabilities

3.14 In general, the CAF is not a suitable vehicle for undertaking the assessments referred to above, which require measuring progress towards specific developmental milestones. However, these assessments are an opportunity to consider (perhaps with the CAF pre-assessment checklist) whether the child or young person is on track, or if they have additional unmet needs.

3.15 As a framework for early intervention, the CAF is appropriate for use at an earlier stage than a specialist assessment, ideally enabling most issues to be resolved before they require specialist assessment. The CAF can also identify the need for a specialist assessment to be undertaken.

3.16 A common assessment may have already been undertaken where issues are such that a specialist assessment is required; for example, under section 17 of the Children Act 1989. The common assessment may already have been undertaken by a different agency or service as part of engaging the specialist agency. In these cases, practitioners should work together to make sure that relevant common assessment information feeds into and informs the specialist assessment.

3.17 How far the common assessment meets the requirements of more specialist assessments will need to be considered in each case. This will determine the extent and focus of the specialist assessment. In considering this, it is important to be clear about the statutory responsibilities of each agency and to ensure that lines of accountability are always clear for both the assessment and the subsequent decisions. For example, it is the responsibility of a local authority’s children’s social care services to determine whether a child or young person is a ‘Child in Need’ and it should do so using the guidance in the Framework for the Assessment of Children in Need and their Families (Department of Health et al, 2000). The local authority should work with other agencies in discharging that responsibility to enable practitioners to provide more integrated support and save time (for practitioners and families) at the specialist assessment stage. Where there are concerns that a child is, or may be, suffering significant harm, LSCB procedures should be followed.
3.18 A CAF may highlight the need for a specialist assessment if there are concerns about a child or young person in terms of their vulnerability to abuse, self-harm, risk of harm to others, health, social welfare, behaviour, progress in learning or any other aspect of their well-being.

3.19 A specialist assessment may highlight the need for a CAF if:
• the child or young person’s broader needs are unclear and not being met by the specialist service
• the child or young person has needs that require the services/support of different agencies, and CAF can help to facilitate access to relevant services
• a specialist practitioner is taking the lead professional role

If the child or young person no longer requires the support of a specialist service, completing a CAF may aid the transition back to universal services.
CAF highlights concern about a child or young person’s vulnerability to abuse, self-harm, risk of harm to others, health, social and family relationships, behaviour, progress in learning or any other aspect of their well-being.

Need for holistic CAF assessment

Specialist assessment highlights the need to identify the child or young person’s wider needs; and/or the requirement for services/support from different agencies.

Need for specialist assessment identified

Figure 7: CAF and specialist assessments
The common assessment process

The Common Assessment Framework for children and young people

A guide for managers
4.1 This section of the guidance provides information about the common assessment process to help managers to support practitioners delivering integrated working. The chapter also provides guidance for managers on how the CAF and integrated working process can be embedded more effectively within their organisation.

4.2 The common assessment process illustrated in Figure 8:
- represents best practice – although it is acknowledged that, in some instances, flexibility may be required to meet the specific needs of a child or young person and their circumstances
- is a fluid process that may move forwards and backwards between delivery and review until needs are met – if a fundamental change occurs, reassessment should be considered
- should not put the child or young person, or the practitioner, at risk of harm. If you or the practitioner is concerned about any aspect of the process, you should seek expert advice

**Figure 8: The four-step common assessment process**

- **STEP 1** Identify needs early
  - Identify whether the child/young person may have additional needs, possibly through using the CAF pre-assessment checklist

- **STEP 2** Assess those needs
  - Gather and analyse information on strengths and needs using the CAF

- **STEP 3** Deliver integrated services
  - Determine, plan and deliver interventions to meet identified needs. Form a TAC and agree a lead professional if relevant

- **STEP 4** Review progress
  - Review the action and delivery plan. Identify further actions where necessary and support child/young person’s transitions

Circumstances and needs change

Needs met

Close involvement

Needs not met

Child and family
4.3 If at any time a practitioner is concerned that a child or young person has been harmed or abused, or is at risk of being harmed or abused, you must ensure that they follow LSCB procedures. The practice guidance *What to do if You’re Worried a Child is Being Abused* (HM Government, 2006) sets out the processes to be followed by all practitioners.  

GO TO: www.dcsf.gov.uk/everychildmatters/safeguardingandsocialcare/safeguardingchildren/safeguarding

4.4 The practitioner works with the child or young person through the four stages of the process.

**Step 1: Identifying needs early**  
This involves the practitioner recognising potential unmet needs, possibly using the CAF pre-assessment checklist, and discussing the situation with the child or young person, involving parents or carers unless this is not appropriate. The practitioner may discuss this with you, colleagues, or others – possibly those already involved with the child or young person. It is important that practitioners find out whether a common assessment already exists (eg. by checking ContactPoint). After reviewing the existing information, the practitioner will decide whether to undertake a common assessment with the agreement of the child or young person and/or their family as appropriate.

**Step 2: Assessing those needs**  
This involves the practitioner in a discussion with the child or young person and family, and as appropriate, combining available information from other practitioners to understand the holistic needs of the child or young person. They record this information on the CAF form, ensuring that the consent statement is signed by the child or young person, or parent, in the appropriate place on the final version of the assessment form. At the end of the discussion, the practitioner will have a better understanding of the child or young person’s needs and strengths, and what can be done to help.
Step 3: Delivering integrated services
This involves the practitioner agreeing the actions that their service and/or the family can deliver, and considering what may be needed from other services. This information is recorded on the CAF form. The practitioner ensures that the consent statement for recording the information and for sharing with specified agencies is signed by the child or young person, or parent, in the appropriate place on the final version of the assessment form.

Where a multi-agency response is required, the practitioner convenes a TAC to agree:
- the actions to be taken to meet the needs identified through the CAF – including what the child or young person and family will do
- the person who will act as the lead professional
- how integrated services will be delivered (based on a shared understanding of needs and systematic communication between services)
- the process for monitoring and review. The CAF does not give the practitioner the ability to guarantee a service from another organisation without consulting that organisation. So it is important that you encourage practitioners to have a good knowledge of local services and how they operate

Step 4: Reviewing progress
This involves the practitioner monitoring progress and reviewing the common assessment and delivery plan. In the case of multi-agency responses, it will involve the practitioner in multi-agency meetings and liaison between the TAC.

If a review concludes that needs have been met (other than the need for continuing universal services), the current process will come to an end. If there are still additional needs, there will be further discussion, possibly undertaking a further common assessment, to identify these and discuss how they should be met. The review process also supports the child or young person’s smooth transition across universal, targeted and specialist services.
The three CAF domains
4.5 The CAF has three themes or ‘domains’ (see Table 1 for more detail):
- how well a child or young person is developing, including their health and progress in learning
- how well parents or carers are able to support their child or young person’s development and respond appropriately to any needs
- the impact of wider family and environmental elements on the child or young person’s development and on the capacity of their parents and carers

4.6 These domains have been developed by combining the underlying model of the Framework for the Assessment of Children in Need and their Families with the main elements used in other assessment frameworks, including the Connexions Framework for Assessment, Planning, Implementation and Review (APIR).

Table 1: Elements within the three domains

<table>
<thead>
<tr>
<th>Development of child or young person</th>
<th>Parents and carers</th>
<th>Family and environment</th>
</tr>
</thead>
<tbody>
<tr>
<td>- health – general health, physical development and speech, language and communications development</td>
<td>- basic care, ensuring safety and protection</td>
<td>- family history, functioning and well-being</td>
</tr>
<tr>
<td>- emotional and social development</td>
<td>- emotional warmth and stability</td>
<td>- wider family</td>
</tr>
<tr>
<td>- behavioural development</td>
<td>- guidance, boundaries and stimulation</td>
<td>- housing, employment and financial considerations</td>
</tr>
<tr>
<td>- identify, including self-esteem, self-image and social presentation</td>
<td></td>
<td>- social and community elements and resources, including education</td>
</tr>
<tr>
<td>- family and social relationships</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
4.7 Using the CAF does not mean that each element needs to be assessed to the same level of detail or followed robotically. The important thing is that practitioners consider the possibility of needs and strengths within each element to the extent that it is relevant to the child or young person at the time. You therefore need to support practitioners to develop the skills to ask questions that are relevant to the child or young person’s circumstances, and the presenting concerns.

It will not always be appropriate for practitioners to comment on all areas but they should consider the whole child or young person, not just their own service focus. As with other frameworks, the CAF relies on practitioner judgement and works as a tool to support practice. Practitioners need to understand that the CAF is a framework for assessment, delivery and review. It is not an administrative task.

4.8 The pre-assessment checklist can be used as an aid in deciding whether a common assessment is appropriate. The checklist guides the practitioner through consideration of the five ECM outcomes in relation to the child or young person. If the practitioner has a doubt that the child or young person will achieve positive outcomes, they need to consider whether to undertake a common assessment themselves or discuss with someone else who would be better placed to do so.

4.9 The results of all common assessments should be recorded on the CAF form. A copy should be given to the child or young person and their parent/carer (unless to do so could put the child or young person at risk of harm), who should be encouraged to take it with them when they are in contact with services. Common assessment records should be stored securely in filing systems or as part of case-working systems. The CAF form is designed to help practitioners record and, where appropriate, share their assessments and plans/recommendations for support.

4.10 The delivery plan and review form can be used for both single agency and multi-agency responses. Actions from the CAF action plan may be brought forward into the delivery plan. Where a multi-agency response is required, the practitioner will need to organise a TAC and agree what support and actions each member of the TAC will undertake. It is important that the child or young person and/or their parent/carer are part of the TAC.
Consent

4.11 The CAF is a voluntary assessment process and, as such, a child or young person and/or their parent/carer must give their consent at the start of the process for the assessment to take place in the full knowledge of what will happen to this information (e.g. how it will be stored, who will have access to it). Once the assessment has been undertaken, the child or young person and/or their parent/carer must again give their consent for the information to be stored and shared with other services, preferably through signing the CAF form in the appropriate place on the final version of the assessment.

4.12 In most circumstances (but see paragraphs 4.21 to 4.23 for exceptions), practitioners must only record and share CAF information with the explicit consent of the child, young person or parent/carer. This should not be a significant barrier if the practitioner and child, young person and family are working in partnership. Practitioners should also provide accessible copies of relevant documents to the child or young person and parent/carer as appropriate. In undertaking a common assessment, the practitioner must:

• obtain informed consent for undertaking the CAF and for recording the information
• work with children, young people and parents/carers to agree how information is recorded, used and shared
• obtain informed and 'explicit' consent for sharing the information detailing exactly what the consent is for and in what circumstances it will apply. This can be oral or written; written consent is preferable, e.g. through a signature on the CAF and, if you have ongoing contact, review this consent regularly
• follow agreed local policies for recording and renewing consent
• ensure that any information shared is accurate and up-to-date, necessary for the purpose for which you are sharing it, shared with those people who need to see it and shared securely

4.13 You may also need to consider whose consent should be sought. A child or young person, who has the capacity to understand and make their own decisions, may give (or refuse) consent to sharing. Children aged 12 or over may generally be expected to have sufficient understanding. Younger children may also have sufficient understanding. This is presumed in law for young people aged 16 and older. When assessing a child’s understanding you should explain the issues to the child in a way that is suitable for their age, language and likely understanding. Where applicable, you should use their preferred mode of communication. Even if you assess that the parent or carer should provide consent rather than the child, children should be included in discussions with parents/carers.
about how their information will be used, as far as is possible, as this will help them to gain in understanding. It will also help the parent/carer to understand that there will be a time when they cannot make these decisions for their child. (For more information see Information sharing: Guidance for practitioners and managers).

4.14 Managers should ensure that practitioners consider consent on a case-by-case basis and take into account the maturity of the child or young person. Note: Where a child or young person is deemed capable of giving consent, it is unlikely that parental consent will override the decision made by the child. However, practitioners should always encourage children under 16 to involve their parents/carers as appropriate.

4.15 Where parental consent is required, the consent of one person is sufficient. In situations where family members are in conflict, the practitioner will need to consider carefully whose consent should be sought. If the parents are separated, the consent would normally be sought from the parent with whom the child resides. If a care order is in force, the local authority will share parental responsibility with parent(s) and practitioners should liaise with them about questions of consent.

4.16 If the child or young person and/or their parent or carer refuses consent for the CAF to be undertaken, the practitioner should make a note of this in their personal files for future reference. Where consent is given, care should also be taken to respect the wishes of the child or young person and family regarding any information given to the practitioner that they do not wish to be recorded on the CAF form or shared with other services.

4.17 Information gathered as part of the CAF process is governed by the same rules as any other personal information. Informed consent is required to undertake the CAF and to record the CAF information either on paper forms or in an eCAF system. Information gathered as part of the CAF process (whether stored on an eCAF system or not) should only be shared with the explicit consent of the child, young person or parent/carer unless, in the practitioner’s judgement on the facts of the case, there is sufficient public interest to share without their consent. (See paragraph 4.23).

4.18 If the child or young person, or family, do not consent to recording the information in an eCAF system, nothing can be stored. However, this does not change the position on information sharing as explained above.

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4 The subject of who to ask for consent and the public interest test is covered in the Information Sharing Guidance sections 3.22 onwards and 3.38 onwards respectively (address on next page).
Confidentiality
4.19 Confidential information is:
• personal information of a private and sensitive nature
• information that is not already lawfully in the public domain or readily available from another public source
• information that has been shared in circumstances where the person giving the information could reasonably expect that it would not be shared with others

4.20 Confidential information should only be recorded on the CAF form if the child or young person/parent explicitly agrees to this. If there is particular information that the child, young person or parent does not want recorded on the form or shared with others, the practitioner should record it only in their confidential case records.

Sharing information from the CAF discussion without consent
4.21 During the course of the CAF process (or previous discussion), the practitioner may gather information that they believe they need to share without consent (because consent has been refused or because it would be inappropriate to seek consent (see information sharing guidance – address on the next page – for further details). In this case, the practitioner will need to consider whether the information is confidential (see paragraph above). If the information is not confidential, and the practitioner judges the sharing to be necessary for them to fulfil a legitimate purpose, they may share the information.

Note: This should not be done routinely as a substitute for consent.

4.22 Even where the practitioner does not have consent to share confidential information, they may lawfully share it if this can be justified in the public interest. It is not possible to give guidance to cover every circumstance in which sharing of confidential information without consent will be justified. Practitioners must make a judgement on the facts of the individual case. Where there is a clear risk of significant harm to a child or young person, or serious harm to adults, the public interest test will almost certainly be satisfied.

However, there will be other cases where practitioners will be justified in sharing some confidential information in order to make decisions on sharing further information or taking action. The information shared should be proportionate.
4.23 There are some circumstances where sharing confidential information without consent will normally be justified in the public interest. These are:
- where there is evidence that the child or young person is suffering, or is at risk of suffering, significant harm
- where there is reasonable cause to believe that a child or young person may be suffering, or is at risk of suffering, significant harm
- to prevent significant harm arising to children and young people, or serious harm to adults, including through the prevention, detection and prosecution of serious crime\(^5\)

4.24 In cases where the practitioner decides to share information without consent, they should record the reasons for doing so. Practitioners should always record decisions about information sharing – with or without consent and whether the decision is to share or not to share.

4.25 There is more guidance on these matters in Information Sharing: Guidance for practitioners and managers. If you are unsure, you should seek advice from your line manager or a nominated individual whose role is to support you in these circumstances. If you are working in the NHS, the Caldicott Guardian may be helpful.

GO TO: www.dcsf.gov.uk/ecm/informationsharing

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\(^5\) Serious crime for the purposes of this guidance means any crime which causes, or is likely to cause, significant harm to a child or young person, or serious harm to an adult.
5.1 Effective implementation of the CAF requires leadership and management at all levels.

5.2 The 2020 Children and Young People’s Workforce Strategy (2008) describes how the government will work with partners to ensure that everyone in the workforce receives the support and development they need to achieve its vision that everyone who works with children and young people should be:
- ambitious for every child and young person
- excellent in their practice
- committed to partnership and integrated working
- respected and valued as a professional

GO TO: www.dcsf.gov.uk/everychildmatters/strategy/childrenandyoungpeoplesworkforce/workforcestrategy

5.3 Lessons learnt for effective management of integrated working

- Lead from the front – offer a clear and visible leadership for CAF implementation.
- Provide effective supervision for staff.
  Further guidance on line management supervision in integrated settings and supervising the lead professional is available in the Team Around the Child and the lead professional: a guide for managers and at
  GO TO: www.cwdcouncil.org.uk/providing-effective-supervision

- Establish or provide access to CAF co-ordinators within your local area so that practitioners can get the additional support and guidance they require.
- Encourage and support practitioners to broaden their knowledge of local service provision. Many local areas will have a children’s service index which you may find useful. This will help practitioners to facilitate effective multi-agency working and ensure access to the most relevant service provision.
- Develop a common vision and shared aims for integrated working. These should focus on the benefits for children, young people and families to promote a joined-up approach across professional boundaries.
- Clarify the organisation’s commitment to appropriate information sharing and ensure staff understand information sharing arrangements and procedures (or processes) within your organisation.
- Recognise that the process requires cultural change and that people need to be encouraged and supported to see the benefits and the importance of changing ways of working.
- Develop the skills and confidence of practitioners and managers to undertake their role(s). This may involve considering your own training and development needs as well as the training and development of staff.
Strategic leadership

5.4 The DCS has ultimate responsibility for ensuring co-operation between services, including the operation of common assessment processes. They will need to ensure that appropriate and effective measures are taken to:

• engage Children’s Trust partners including schools; colleges; early years services; health services; social, family and community support; youth services; justice and crime prevention; sport and culture and other partners in the third sector, to agree how the CAF will be implemented in the local area

• enable all partners (statutory and third sector) to consider their current practice and what needs to change to bring about integrated frontline services – including the introduction of a multi-agency TAC approach, lead professional role and good practice in information sharing

• introduce organisational arrangements to ensure that:
  assessments are of good quality there are procedures for ensuring that common assessment information is acted upon there are processes for resolving disputes between practitioners, involving line managers as appropriate there are processes in each partner organisation for ensuring that all practitioners who undertake common assessments, or receive assessment information, have had enhanced level Criminal Records Bureau (CRB) checks there are effective links with adult services to ensure a smooth transition for young people between services

5.5 Strategic managers also need to support CAF implementation by:

• demonstrating commitment to CAF at senior levels within the Children’s Trust

• appointing designated senior managers responsible for driving the cultural change required to implement the CAF within their operational settings (eg. schools/colleges, health settings, targeted youth support6)

• acting as CAF champions

• promoting a strong focus on early identification of needs and strengths

• establishing, or assuring adherence to, local information sharing governance frameworks and ensuring that good practice in information sharing becomes embedded in working practices

• supporting effective local communication of purpose and evidence of impact

• myth busting – eg. completing a CAF does not automatically mean you are the lead professional

• establishing effective arrangements for training and development (including local area change plans containing details of the quantified targets for the number of

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6 Targeted Youth Support (TYS) is a model of multi-agency working for vulnerable young people and those with additional needs aged 13-19. It aims to ensure that a young person’s needs are identified early and met by agencies working together effectively in ways that are shaped by the views and experiences of young people themselves. TYS aims to help vulnerable young people achieve the five ECM outcomes by addressing the risk factors that may result in poor outcomes, and helping to build vulnerable young people’s resilience. **Go to:** [http://www.dcsf.gov.uk/everychildmatters/Youth/targetedyouthtargeted/youthsupport](http://www.dcsf.gov.uk/everychildmatters/Youth/targetedyouthtargeted/youthsupport)
practitioners to be trained, by when and in which settings)

• demonstrating commitment to the Common Core of Skills and Knowledge for children and young people’s workforce

• supporting the development of good practice principles and the sharing of good practice

• establishing area wide performance monitoring of CAFs — to establish quality of assessment, and gather evidence of impact on children and young people’s lives

Case study: recommendations for strategic managers

The North West Region offers seven top recommendations on how to bring services together and implement change.

1. Meet with key stakeholders face-to-face. Work with stakeholders to establish best practice rather than imposing it on them.

2. Training programmes need to be re-engineered to ensure that awareness of the CAF message remains undiluted. This will ensure best practice in delivering training.

3. Training should be practical. This will give practitioners confidence in carrying out a common assessment.

4. Support for practitioners must be in place. Where there is a coherent support structure for practitioners, CAF implementation has soared to high levels of success.

5. Address protocols. As awareness of CAF grows throughout agencies, work needs to be done to streamline protocols and extend them to other agencies.

6. Reach those who cannot attend training; for example, through DVD training tools.

7. Enlist the help of volunteers from different services; for example, to deliver training on CAF protocols and processes.

For further details, see: Sharing the Journey: Integrated Working in Practice – CWDC Share! 2008

GO TO: www.cwdcouncil.org.uk/cwdc-share
Operational management

5.6 In developing an effective local operational system, managers need to ensure that the following structures are in place:
- a clear local (or area) delivery model that is understood by all local workers (e.g. when a CAF is used; what multi-agency panels meet to respond; what happens when a child or young person is in transition between settings or services)
- a designated CAF co-ordinator and/or system of co-ordination
- locality-based CAF delivery/implementation teams (e.g. supporting local training; supporting networks; offering a helpline or workshops/surgeries on common operational challenges; convening multi-agency practitioner groups)
- clear regular processes for practitioners and child, young person and family to review progress of action, and needs/outcomes
- expectations relating to the CAF (e.g. in job descriptions, supervision, training and development)

5.7 Operational managers should agree with each of their practitioners:
- what their role will be in relation to the CAF
- who can undertake common assessments
- what training they will need to understand the CAF and, if appropriate, undertake common assessments
- how and when they will receive appropriate training
- how they will be supported in the workplace

5.8 When initially undertaking CAFs, practitioners may feel that the process takes time and is an additional burden. Managers will need to support staff as they become accustomed to the process through providing effective supervision and helping staff to access other practitioners more experienced in the CAF process. Buddying/mentoring programmes and peer networking opportunities have proved popular in many areas.

5.9 Managers also have key responsibilities to ensure that good practice in information sharing is embedded within and across their organisations, and to support their practitioners in making information sharing decisions when required. For more information, see HM Government Information Sharing: Guidance for practitioners and managers. GO TO: www.dcsf.gov.uk/ecm/informationsharing

Co-ordinating common assessments

5.10 To avoid duplication, managers should also ensure that practitioners are aware of, and understand, the mechanisms for:
- knowing whether a common assessment has already been undertaken for a particular child or young person
- determining whether a previous common assessment is up-to-date and relevant
Case study: Top multi-agency training tips from East Riding

1. **Lose the jargon**: multi-agency training provides an incentive to break down any professional language barriers. It helps everyone realise that they are all working towards the same objectives – better outcomes for children, young people and families.

2. **Give respect**: multi-agency training can help teams to work respectfully with one another.

3. **Joined-up thinking**: multi-agency training has the capacity to promote joined-up thinking that really hits the mark.

**Hints and tips:**
- embrace the opportunities multi-agency training brings to see families from another professional perspective
- seize the opportunity for all teams to take part in finding a common professional language
- go beyond ‘collecting information’ to a clear understanding of ‘analysis of information’

For further details, see: *Sharing the Journey: Integrated Working in Practice – CWDC Share! 2008*  
GO TO: www.cwdcouncil.org.uk/cwdc-share

- determining the relationship between a common assessment and any specialist assessments that may have been completed
- deciding whether a new or revised assessment is appropriate
- knowing which other practitioners have worked/are working with the same child or young person and who to contact/ liaise with
- obtaining consent for information sharing and recording any limits to that consent
- storing and sharing CAF information securely with other practitioners working with the same child or young person, either in local IT systems or National eCAF when available or by other mechanisms

5.11 As ContactPoint is made available, it will support local CAF co-ordination. It will enable authorised practitioners to find out who else is working with the same child or young person, and see if a CAF has been undertaken and, if so, by whom. ContactPoint will also indicate where a lead professional has been appointed.
ContactPoint will not contain any case data or assessment details. It will not provide direct access to the CAF itself.

Training and development
5.12 Managers in each service should agree locally which practitioners:
• need to have knowledge of the CAF and know who to contact to obtain advice or arrange a common assessment
• will need to be trained to undertake common assessments

5.13 Managers should ensure that practitioners needing to undertake common assessments have all the skills and knowledge they need. Undergoing CAF specific training is important but will not cover all the skills necessary to undertake effective assessments.

Practitioners should have the generic skills of assessment and the qualities needed to work with children and young people with additional needs and their families. To undertake an effective CAF, practitioners will need to have the skills and knowledge covered by the Common Core of Skills and Knowledge. Local authorities should put in place arrangements to ensure suitably trained practitioners are undertaking good common assessments. It is good practice to encourage practitioners to undertake CAF assessments as soon as possible following the training. Managers should also put in place mechanisms to offer practitioners training and ongoing advice with issues that they feel ill equipped to tackle.

GO TO: www.cwdcouncil.org.uk/common-core

5.14 CAF training materials are available for use by trainers and practitioners in local areas. These are part of a broader training strategy to help ensure that practitioners are trained in the range of skills needed for integrated working.

GO TO: www.dcsf.gov.uk/everychildmatters/strategy/deliveringservices1/iwtraining/training

5.15 Managers should also consider their own training needs. Championing Children – Skills and knowledge for managers of integrated services is a framework that establishes a shared set of skills, knowledge and behaviours for those who are leading and managing integrated children’s services. It provides a common understanding about the particular abilities required by leaders and managers of these services. Individuals, teams and organisations can use this document as a planning tool to help develop the skills, knowledge and behaviours necessary.

GO TO: www.cwdcouncil.org.uk/championing-children

5.16 Information sharing. Managers need to understand when and how information can be shared legally and professionally in order to support their staff.

Guidance, training and support materials are available to support good practice in information sharing by offering clarity on when and how information can be shared legally and professionally, in order to achieve improved outcomes. The guidance also explains how organisations can support practitioners and ensure that good practice in information sharing is embedded.

GO TO: www.dcsf.gov.uk/ecm/informationsharing
Case study: Culture change in Leicestershire, Leicester City and Rutland

Within the space of two years, a transformation occurred in children’s services. Working in partnership, the three local authorities implemented the roll-out of the CAF and training in integrated working.

The key stages of the journey.

- Look in the mirror: practitioners reviewed the way they traditionally provided their services and identified what needed to change. This included listening carefully to families.
- Set heart-felt ambition: firstly, all providers will offer good-quality information, irrespective of which service a family initially contacts. Secondly, they will know what services are available locally and be able to signpost appropriately.
- Engage in creative joined-up thinking: co-location has been a key strategy to simplify multi-agency communication. However, in some areas of Leicestershire, they do not currently have Children’s Centres or dedicated co-located buildings, but managers are still able to get groups of practitioners to work together using secondary and primary schools as their base.
- Establish decision-making: founded on an understanding that ‘families often know best,’ Leicestershire, Leicester City and Rutland have placed children, young people and families at the heart of their decision-making processes.
- Manage culture change: this is best encapsulated in three positive mindsets:
  1. Identify champions – people who can influence within and across children’s service environments.
  2. Work incrementally – signpost small steps towards the goal of integrated working.
  3. Repeat the message – it is best never to assume that staff have heard important messages first time. Following up with individual meetings is helpful when addressing anxious questions.

Hints and tips:

- recognise that any one service may only hold part of the solution
- promote the concept that all practitioners are a valued part of the transformation in practice that is needed
- have a clear vision of where integrated working is happening within your area

For further details, see:
GO TO: www.cwdcouncil.org.uk/cwdc-share
Operating the CAF across children’s services

The Common Assessment Framework for children and young people

A guide for managers
Health services

6.1 Health service staff are well placed to spot, at an early stage, that a child may have unmet additional needs as they assess children of all ages as part of the Healthy Child Programme. Key stages of early assessment or contact include ante-natal screening, examination after birth, new birth home visit and further regular examinations and immunisations within the first few years.

6.2 As stated in The National Service Framework for Children, Young People and Maternity Services, the CAF can help to reduce time spent on assessments (by providing a holistic view of a child or young person’s needs) and enable health service staff to liaise with other practitioners to provide co-ordinated and prompt intervention.

6.3 It is important that all parties understand there needs to be appropriate sharing of information from the CAF, with consent, in order to involve other services. At the same time, there may be some information (eg. from health assessments) that will remain confidential.

6.4 Not only will the CAF be useful to midwives and health visitors (as part of ante- and post-natal checks), it will also be helpful to school nurses, and those working with children and young people in a range of other health settings.

6.5 The White Paper, Our health, our care, our say: a new direction for community services (Department of Health, 2006), describes better assessment and care planning through common assessment.

6.6 In the community, GPs are well placed to spot potential non-health related problems at an early stage, as will be those working in acute services and hospitals. These practitioners will need to consider who is best placed to undertake common assessments. Although it is not envisaged that the majority of GPs will do assessments, it is important for them to have a level of knowledge of when one is needed.

Schools, colleges and other educational services

6.7 The CAF is particularly suitable for use in schools, both in the public and independent sectors, colleges and other training providers, so that problems can be identified and addressed at an early stage. For example, poor behaviour or attendance, which may be influenced by events beyond the school but nevertheless impact on a child or young person’s education. The CAF can help professionals to establish quickly which other practitioners are working with a child and engage other services earlier and more reliably. This will help problems to be addressed as quickly as possible, so that the child can focus on learning and improve educational outcomes.

6.8 The CAF can help the children and young people’s workforce in schools undertake earlier intervention, building on their existing pastoral activities. Schools may decide to link CAF activity; for example, by using the pre-assessment checklist, with universal assessments such as the Foundation Stage Profile and other assessments for older children, to provide a broader check of a child’s progress. Where it is clear that needs can be entirely met through well-established mechanisms, such as a visit from an education welfare officer.
to a school, a common assessment will not be necessary.

6.9 CAF is designed for use at lower levels of need than statutory Special Educational Needs (SEN) or child protection. Those requiring statutory SEN assessment by definition have complex needs that require in-depth specialist examination. However, there are a number of children who have lower-level (non-educational) needs. For these children, a common assessment may be the best route to targeted and, if necessary, specialist services that they are not already receiving. The CAF would enable the children and young people’s workforce in schools to identify any factors outside school that may be impacting on the child’s learning which would benefit from discussions with other professionals from other services. Where a CAF indicated that the child might require further (specialist) assessment, for example under statutory SEN procedures, the core data from the common assessment can be used to feed into that process.

6.10 It is for individual schools to determine who should undertake common assessments and therefore who will need training. It is likely that there will be a focus of staff already involved in pastoral care; for example, education welfare officers, behaviour and education support teams (BESTs), learning mentors and special educational needs co-ordinators (SENCOs). There will not be a requirement for classroom teachers to undertake common assessments.

6.11 Workers in Sure Start Children’s Centres and schools, especially those offering access to extended services, are ideally placed to take forward the government’s ECM objectives. Many areas have adopted a three-tier approach to training:
- awareness training for all the children and young people’s workforce
- more advanced training for managers and those who may frequently come into contact with the CAF process, and need to know when and how to instigate it
- in-depth training in the process and the skills required for those likely to undertake assessments

This is because schools and Sure Start Children’s Centres are right at the heart of the community. By 2010, there will be a children’s centre for every community and all schools will offer access to extended services, including swift and easy access to targeted and specialist services such as those offered by health professionals. In secondary schools, this may take the form of co-located, or visiting, multi-agency teams who can provide advice on a wide range of issues affecting children, young people and their families, including sexual health issues.

6.12 It makes sense to locate services where children and young people spend much of their time. This makes schools the most likely bases for the co-location of services. Adoption of the CAF by workers in these co-located services will help to develop a culture of multi-agency working and ensure children and young people’s additional needs are identified at an early stage.
6.13 School governors now have a statutory responsibility for the well-being of pupils. Schools are inspected against the five ECM outcomes. School improvement partners have an important role to support and challenge schools including: helping the leadership to evaluate the school's performance; identifying priorities for improvement; and planning effective change. Their role is to build the school's capacity to improve the attainment of pupils and to achieve other key outcomes for pupils that bear on achievement.

**Early years services**

6.14 *The Childcare Act 2006* gives statutory force to key commitments in the government’s *Ten Year Strategy for Childcare, Choice for Parents, the Best Start for Children*. It includes important duties on local authorities to: improve the outcomes of all children under five, and close the gaps between those with the poorest outcomes and the rest, by ensuring early years services are integrated and accessible; and secure sufficient childcare to meet the needs of their communities – in particular, those on low incomes and with disabled children.

6.15 The Act ensured that, from 2008, all young children have access, through the new Early Years Foundation Stage, to an integrated learning and care experience, to enable them to achieve the best outcomes – and that parents/carers have the choice of a consistent, high-quality offer.

6.16 The CAF is appropriate for a wide range of practitioners working in the early years sector including Sure Start Children’s Centres to undertake an early, holistic assessment of a child when they consider the child may have unmet additional needs. The CAF can help staff in all settings consider whether other services should be involved so as to best promote children’s learning and development. It will be necessary for all providers to consider how the use of the CAF will become embedded in their policy and procedures both within and between organisations.

6.17 Local authorities may wish to offer private, voluntary and independent settings with a link person who can provide advice and support in use of the CAF, or to whom practitioners can refer when they consider it would be helpful for a common assessment to be undertaken for a child or young person.

CAF training should be provided for all staff in the early years sector within the wider context of:

- these developments
- *The 2020 Children and Young People’s Workforce Strategy*
- *Next Steps for Early Learning and Childcare*
- the move towards extended services in schools and integrated services in Sure Start Children’s Centres
- proposals for a national training and qualifications framework for early years education, childcare and play work

**Early Support programme**

6.18 The support needs of young disabled children and their families can encompass a wide range of circumstances, services and practitioners. The relationship between the CAF and the Early Support programme will, therefore, be flexible and interactive, developing in different ways in different
circumstances. The CAF and the more detailed Family File in the Early Support Family Pack are mutually supportive. The Family File facilitates better exchange of information about a child and family, and keeps track of multiple contacts, where more than one service is involved. Among other things, it can help when the initial assessment of a child’s situation involves meetings with a range of practitioners working across health and other services.

A common assessment may, for example, be undertaken as a first step, because of concern about a child’s development. The assessment would then develop into a multi-agency assessment of the child’s needs. Subsequently, it would become appropriate for the family to begin using the Early Support Family Pack. As multi-agency involvement with the family increases, the information collected by the common assessment would inform the early support process.

However, it is important for those working with families with young disabled children to recognise that completing a common assessment may not be necessary where a child’s known additional support needs are already being met. An example of this is the case of a child with disabilities discharged from hospital with a range of known specialist support needs in the first weeks or months of life. A co-ordinated approach using the family file should result in a selection of additional services being provided. A common assessment may be needed at a future date to clarify and address additional issues, such as housing and equipment needs associated with caring for the child at home. At this stage, ‘core data’ about the child and family from the early support process would inform the common assessment.

Social care services

Over time, the CAF is likely to become the main basis for inter-agency information sharing and referral for children or young people for whom there are welfare concerns. This will help improve the quality of referrals to social care teams. Practitioners in social care teams will therefore need to be able to discuss, use and build upon common assessments undertaken by a range of practitioners. In undertaking initial assessments under section 17 of the Children Act 1989 for those children or young people who have had a common assessment, practitioners should work together to make sure that relevant common assessment information feeds into the specialist assessment. It is important that children’s social care workers understand and know how to use information, and where appropriate, undertake the CAF.

The CAF does not replace the Framework for the Assessment of Children in Need and Their Families, which is statutory guidance issued under section 7 of the Local Authority Social Services Act 1970.

The structure of the CAF has taken into account the structure of the Integrated Children’s System so that the appropriate exchange of assessment information between these two functions is easier.
6.23 Particular regard may need to be given to joint working between children and adult services when the CAF has been undertaken specifically because of a child or young person’s caring responsibilities. There may also need to be contact with children with disability teams in the case of sibling carers.

GO TO: www.youngcarer.com for details of The Children’s Society Whole Family Pathway which signposts professionals to services which will support the whole family where there are unmet care needs.

Youth support services/Connexions

6.24 The Green Paper *Youth Matters*, sets out a vision and new arrangements for the delivery of youth support services. It is intended that these services should use a new single assessment process as the basis for assessment and support for young people. The CAF has replaced the assessment aspects of the Connexions Framework APIR. It is for individual Connexions partnerships to decide at a local level the exact time frame within which this change takes place. The assessment data held on the Connexions Customer Information System will need to reflect local CAF requirements.

6.25 Given the similarity of the CAF to the APIR assessment, it is expected that APIR-trained Connexions staff will be able to use common assessment after some awareness training. In the longer term, it is envisaged that the APIR assessment elements of the Connexions training for personal advisers will become CAF training.

Youth justice

6.26 The CAF has a significant role to play in the work of youth justice agencies. Youth Offending Teams (YOTs), Youth Inclusion Programmes (YIPs) and Youth Inclusion and Support Panels (YISPs) work on a multi-agency team basis. The CAF can be used to build on Asset/Onset when a young offender (or young person at risk of offending) may have needs that are outside the scope of the YOT or YISP, to determine which other services need to be involved and engage those services.

6.27 The CAF will not replace Asset, which is a statutory assessment specific to offending issues, or Onset which has a specific focus on predicting and identifying offending behaviour and which YIPs and YISPs are required to use. YOTs and preventative services such as YISPs, YIPs and junior YIPs should continue to use Asset/Onset as required by the Youth Justice Board to ensure that assessments and interventions are effective in addressing offending related problems. However, the CAF, which is a holistic assessment tool, should be used to support referrals from these youth justice agencies where the involvement of professionals in other services is required.

6.28 The assessments should be linked to avoid unnecessary duplication of information between the common assessment and the Asset and Onset assessment tools. Asset is fully electronic, and the National eCAF should help to facilitate appropriate sharing of assessment information.
Drug and alcohol services

6.29 Drug action teams (DATs) have developed local screening tools to help identify the risk of substance misuse. Many areas are establishing links between these tools and the CAF to support further assessment where a substance misuse issue has been identified. Training for practitioners needs to take into account the links between these assessments.

6.30 Each area is required to provide young people’s substance misuse services. It is important that there are robust protocols in place covering care pathways and referral procedures for both adult and young people’s substance misuse services, jointly owned by the DAT/Community Safety Partnership and Children’s Trust.

6.31 Staff in adult drug and alcohol services also have a key role in the identification of children or young people with unmet needs. Action should be taken locally to equip these staff with an awareness of CAF procedures and to which practitioners and services they should refer, to take forward an assessment.

Third sector organisations

6.32 Third sector organisations play a vital role in improving the life chances of children and young people. The third sector workforce is diverse and encompasses practitioners from a variety of professional and non-professional backgrounds, part-time and volunteer workers, many of whom may well have good knowledge of, and relationships with, the child or young person and their family. As such, it will be appropriate for these workers to have an awareness of the CAF and knowledge of who to contact within their organisation if they think a common assessment might be needed. Local areas will need to ensure that third sector organisations are engaged in multi-agency training appropriately.

Police, National Offender Management Service and Immigration Service

6.33 Police officers often are the first to have contact with families in very vulnerable situations. They therefore have a crucial role in the early identification of children and young people with additional unmet needs. It is important that there is a good level of CAF awareness among police officers who should be given clear guidance on how to raise concerns about a child or young person and how a common assessment is undertaken.

6.34 The Association of Chief Police Officers (ACPO) has agreed that:
• some police officers need to be trained to undertake common assessments. These officers will primarily be in multi-agency settings; for example, those seconded to YOTs, school beat officers, and family liaison/domestic violence liaison officers
• there should be general CAF awareness training, which may include how to use the CAF checklist, to be incorporated into initial training for all police beat officers over time. This will enable police officers to consider whether it is appropriate to make a referral to a colleague or another service to undertake a common assessment
• the majority of officers will not undertake common assessments themselves; they should, however, always consider CAF when in contact with children and know who would undertake a common assessment if required
6.35 National Offender Management Service staff will, generally, not be expected to undertake common assessments, as YOTs will have undertaken one prior to a young person being placed in custody. However, an awareness of the CAF would enable staff to consider a referral to a relevant practitioner where there may be a need for a common assessment to be undertaken. CAF awareness training has been included in the Juvenile Awareness Staff Programme (JASP) for those National Offender Management Service staff who have contact with young people.

6.36 Some National Offender Management Service staff will be expected to undertake and/or contribute to common assessments, where they play a significant role in contributing to the work of multi-agency teams; for example, probation officers seconded to YOTs; domestic violence safety workers; and those providing services to victims of serious, violent or sexual offences (potentially the offence could be against a child or young person). All staff should have a general awareness of the CAF so that they are aware of who should undertake a common assessment when one is appropriate.

6.37 The Immigration Service is considering whether their operational managers should receive CAF training, particularly in areas where immigration is a major local issue or where the local authority wants the CAF to be used as the means of referral. Generally, it is not envisaged that Immigration Service staff would undertake common assessments because most officers have little contact with children or young people. However, approximately ten per cent of immigration staff receive special training to interview children or young people, and these individuals will need CAF awareness training. This will help them, where necessary, in making referrals/contact with other organisations and professionals.

6.38 If a child or young person being assessed is not a British citizen, and may not have the right to remain indefinitely in the UK, the Home Office’s Immigration and Nationality Directorate can be contacted for further information on the child or young person’s immigration status where it is considered such information would be helpful to that assessment. It may be easiest to do this via the local authority social services or children’s services.

Other organisations providing support and services to children, young people and families

6.39 Practitioners working in other organisations providing support and services to children, young people and families (e.g. housing and homelessness services) will be well placed to use the CAF, particularly if working in multi-agency teams, and should be trained accordingly.

6.40 It will also be a priority for local authorities to ensure that those who are working with children and young people in other organisations are aware of substance misuse issues when using the CAF. Practitioners using the CAF should refer young people with substance misuse needs for further assessment or put them in contact with appropriate services.
Annex and Resources

The Common Assessment Framework for children and young people

A guide for managers
### Annex A: Every Child Matters outcomes and aims

| Be healthy | • physically healthy  
|           | • mentally and emotionally healthy  
|           | • sexually healthy  
|           | • healthy lifestyles  
|           | • choose not to take illegal drugs  
| Stay safe | • safe from maltreatment, neglect, violence and sexual exploitation  
|           | • safe from accidental injury and death  
|           | • safe from bullying and discrimination  
|           | • safe from crime and anti-social behaviour in and out of school  
|           | • have security, stability and are cared for  
| Enjoy and achieve | • ready for school  
|           | • attend and enjoy school  
|           | • achieve stretching national educational standards at primary school  
|           | • achieve personal and social development, and enjoy recreation  
|           | • achieve stretching national educational standards at secondary school  
| Make a positive contribution | • engage in decision-making and support the community and environment  
|           | • engage in law-abiding and positive behaviour in and out of school  
|           | • develop positive relationships and choose not to bully and discriminate  
|           | • develop self-confidence and successfully deal with significant life changes and challenges  
|           | • develop enterprising behaviour  
| Achieve economic well-being | • engage in further education, employment or training on leaving school  
|           | • ready for employment  
|           | • live in decent homes and sustainable communities  
|           | • access to transport and material goods  
|           | • live in households free from low income  

**Resources**

**Common Assessment Framework**
Early identification, assessment of needs and intervention: the Common Assessment Framework for children and young people – a guide for practitioners
www.cwdcouncil.org.uk/caf

The Common Assessment Framework and schools: fact sheet
www.dcsf.gov.uk/everychildmatters/strategy/deliveringservices1/caf/cafframework

Non-statutory guidance for children’s services and housing services in using the Common Assessment Framework when dealing with young people who are homeless or at risk of being made homeless.
www.dcsf.gov.uk/everychildmatters/strategy/deliveringservices1/caf/cafframework

**Lead professional**
The Team Around the Child and lead professional: Co-ordinating and delivering integrated services for children and young people – a guide for practitioners
www.cwdcouncil.org.uk/lead-professional

The Team Around the Child and lead professional: Co-ordinating and delivering integrated services for children and young people – a guide for managers
www.cwdcouncil.org.uk/lead-professional

**Integrated services**
Championing Children: a framework for those who are leading and managing integrated children’s services
www.cwdcouncil.org.uk/championingchildren

Making It Happen: booklet supporting the implementation of effective frontline integrated working practice
www.dcsf.gov.uk/ecm/resources-and-practice/IG00130

**Information sharing**
Information Sharing: Guidance for practitioners and managers and other supporting documents
www.dcsf.gov.uk/ecm/informationsharing

ContactPoint:
www.dcsf.gov.uk/ecm/contactpoint

National eCAF:
www.dcsf.gov.uk/everychildmatters/strategy/deliveringservices1/caf/ecaf/ecaf

**Training**
National core training materials are available at www.dcsf.gov.uk/everychildmatters/strategy/deliveringservices1/iwtraining/training

**Families**
Think Family: an initiative to improve support for the most disadvantaged families and prevent problems passing down from excluded parents to their children
www.dcsf.gov.uk/everychildmatters/strategy/parents/workingwithparentscarersandfamilies
Health

Healthy lives, brighter futures: the strategy for children and young people’s health
www.dh.gov.uk/en/
Publicationsandstatistics/Publications/
PublicationsPolicyAndGuidance/
DH_094400

Care Co-ordination Network UK: promotes and supports care co-ordination and key working services for disabled children and their families.
www.ccnuk.org.uk

Children in Need

Integrated Children’s System: framework for working with Children in Need and their families
www.dcsf.gov.uk/everychildmatters/
safeguardingandsocialcare/
integratedchildrenssystem/ics

Organisations

Council for Disabled Children (CDC): provides a national forum for the discussion and development of a wide range of policy and practice issues relating to service provision and support for disabled children and young people and those with special educational needs.
www.ncb.org.uk/cdc
The Children’s Workforce Development Council leads change so thousands of professionals and volunteers across England can do the best job they possibly can.

We want England’s children and young people’s workforce to be respected by peers and professionals and valued for the positive difference it makes to children, young people and their families.

We advise and work in partnership with lots of different organisations and people who want the lives of all children and young people to be healthy, happy and fulfilling.

You can download this document online at:
www.cwdcouncil.org.uk
www.dcsf.gov.uk/everychildmatters/strategy/deliveringservices1/caf/cafframework

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