

# common assessment framework for children and young people

frequently asked questions



**The Children's Workforce Development Council's vision is to build a world-class workforce for children, young people and families.**

CWDC exists to improve the lives of children, young people, their families and carers by ensuring that all people working with them have the best possible training, qualifications, support and advice. It also helps children and young people's organisations and services to work together better so that the child is at the center of all services.

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## Project summary

### Q: What is the Common Assessment Framework (CAF)?

**A:** The CAF is a shared assessment tool for use across all children's services and all local areas in England. It aims to help early identification of need and promote co-ordinated service provision.

### Q: What does the Common Assessment Framework consist of?

- A:**
1. A simple **pre-assessment checklist** to help practitioners decide who would benefit from a common assessment.
  2. A three-step **process (prepare, discuss, deliver) for undertaking a common assessment**, to help practitioners gather and understand information about the needs and strengths of the child, based on discussions with the child, their family and other practitioners as appropriate.
  3. A **standard form** to help practitioners record, and, where appropriate, share with others, the findings from the assessment in terms that are helpful in working with the family to find a response to unmet needs.

### Q: Why do we need common assessments?

- A:** There are four important reasons:
- To give all practitioners working with children and young people a holistic tool for identifying a child's needs before they reach crisis point and a shared language for discussing and addressing them.
  - To ensure important needs are not overlooked and reduce the scale of assessments that some children and young people undergo.
  - To provide a common structure to record information and facilitate information sharing between practitioners.
  - To provide evidence to facilitate requests to involve other agencies, reducing unnecessary referrals and enabling specialist services to focus their resources where they are most needed.

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**Q: What will the common assessment involve?**

**A:** The assessment process encourages practitioners to consider the needs of the child or young person in three key areas ('domains'):

**Development of child, baby or young person**

- Health:
  - general health
  - physical development
  - speech, language and communications development
- Emotional and social development
- Behavioural development
- Identity, including self-esteem, self-image and social presentation
- Family and social relationships
- Self-care skills and independence
- Learning
  - understanding, reasoning and problem solving
  - participation in learning, education and employment
  - progress and achievement in learning
  - aspirations

**Parents and carers**

- Basic care, ensuring safety and protection
- Emotional warmth and stability
- Guidance, boundaries and stimulation

**Family and environmental factors**

- Family history, functioning and well-being
- Wider family
- Housing, employment and financial considerations
- Social & community factors and resources, including education

The CAF has 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.

**Q:** Which children and young people is CAF for?

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

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

**Q:** Who will carry out the assessment?

**A:** It is expected that the majority of common assessments will be undertaken or arranged by practitioners in universal services such as early years settings (for example children's centres), schools and health settings. These services are best equipped to identify possible needs in their early stages. Common assessments, particularly in the context of extended schools, will help schools tackle, along with other services, 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 child health promotion programme; practitioners will apply these principles to older children and young people in other settings, such as health drop-ins in schools and further education colleges. The police will also have an important role in identifying children with additional needs and arranging for common assessments.

However all practitioners working with children and young people should have an awareness of the CAF and either know how to complete a common assessment themselves or know how to arrange to have one carried out. Everyone working with children should be aware of the sorts of situations that indicate the need for a common assessment.

**Q:** Will all practitioners need to be assessors?

**A:** All services should train at least some of their staff in completing common assessments. Assessors would have the specific skills and knowledge to complete a common assessment and some knowledge of local services and thresholds for access.

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**Q:** When should a common assessment be carried out?

**A:** A common assessment can be done at any time – on unborn babies, new babies, and children or young people. It is designed for use when:

- There is concern about how well a child (or unborn baby) or young person is progressing (this includes particularly vulnerable children and young people such as persistent truants and young runaways)
- Their needs are unclear, or broader than a service can address on its own
- A common assessment would help identify the needs, and provide a basis for getting other services involved

The pre-assessment checklist can be used to help identify if a common assessment should be completed.

The decision about whether to do an assessment should be made jointly with the child and or parent. Children should always be encouraged to discuss the assessment with their parents. If the child is old enough and competent to understand, they may make their own decision.

**Q:** Should a CAF be completed if it is believed a child is at risk of harm?

**A:** No, if a child is at risk of harm then the Local Safeguarding Children Board (LSCB) procedures should be followed immediately.

**Q:** Will the CAF add a layer of bureaucracy?

**A:** No. The CAF should reduce bureaucracy. Subject to consent from the child, young person or parent, the reduction will come from a practitioner building on information that has already been gathered, rather than collecting it from scratch.

**Q:** Is it the intention of Government that all CAF forms should be exactly the same across the UK or would it be possible to make some local adjustments?

**A:** The development of the CAF form involved relevant government departments as well as practitioners, local authority managers and other stakeholders and has been cleared by Ministers. It is preferred that no changes are made to the form although the addition of the local logo is permissible.

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**Q:** What is the process that should be followed to carry out a common assessment?

**A: Step 1: Preparation**

This involves recognising potential needs and then discussing the situation with the child, involving parents or carers unless this is not appropriate. The practitioner may talk to their manager, colleagues, or others – possibly those already involved with the child. It is important to find out whether a common assessment already exists. After reviewing the existing information a practitioner decides whether to undertake a common assessment with the agreement of the child and or family as appropriate.

**Step 2: Discussion**

This involves completing the assessment with the child and family, making use of information already gathered from the child, family or other practitioners, and completing a consent statement. At the end of the discussion the practitioner should understand better the child's strengths, needs, and what can be done to help.

**Step 3: Delivery**

This involves agreeing actions that the practitioner's service or the family can deliver, and considering what may be needed from other services. According to local practice, decisions may be made through meetings with other practitioners and the family, and the appointment of one practitioner as lead professional where integrated support is required.

**Note:** the CAF does not give a practitioner the ability to guarantee a service from another organisation without consulting that organisation.

**Q:** Will the CAF produce records of unnecessary information about children and their parents?

**A:** The CAF is about trying to understand a child's needs in a holistic way, rather than through lots of different assessments that are not linked. This is in order to provide them with a quality service. It is not about information gathering for its own sake. Common assessment, in line with established good practice for assessment, will operate with the full knowledge and involvement of the child or young person or their parent or carer.

**Q:** Are the CAF leaflets mandatory and prescriptive? Is this official guidance?

**A:** The use of the leaflets is not mandatory or prescriptive and they do not represent official guidance. They have been developed in response to local authority requests to have a standard way to explain to children and young people, and parents and carers, what the Common Assessment Framework is, when it might be used and how it will help children, young people and families. They also seek to explain the role of the lead professional. It is anticipated that they will be used by frontline staff that are carrying out a CAF to explain the process.

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**Q:** Will the CAF have to be implemented in all schools by law by a certain date?

**A:** Section 10 of the Children Act 2004 places a duty on local authorities and their partners to co-operate to improve the well-being of children and young people, defined by reference to the 5 ECM outcomes. Schools are not named specifically under section 10, but are expected to work with local authorities to implement the Act and are now inspected against the 5 ECM outcomes as part of the new Ofsted inspection framework.

Through the extended schools strategy there is the opportunity for schools to develop closer working relationships with social care and health partners in particular and provide access to a range of services to children, young people and families. Schools are expected to ensure that staff are familiar with the CAF, which will improve schools' own ability to tackle less serious issues, and promote better quality referrals and a more effective response. They should also be familiar with protocols and procedures for sharing data.

The CAF is a framework to help practitioners assess children's additional needs for services earlier and more effectively, develop a common understanding of those needs and agree a common process for working together to meet those needs.

**Q:** What are the benefits of a CAF?

**A:** Potential benefits include:

- Quicker service provision to children and families - as a result of more appropriate referrals to specialist services
- Better service provision to children, young people and families - due to the CAF looking at the whole child rather than the needs of the child from the perspective of one particular agency
- Less repetition and duplication for children, young people and families - due to the CAF information being shared, with consent, between practitioners
- Better understanding and more effective communication amongst practitioners - due to the promotion of a common language around the CAF
- Timesaving for practitioners - who will be able to build on existing CAF information rather than collecting it themselves from scratch

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## Links with other work

### Q: What is the CAF's relationship with specialist assessments?

A: CAF will replace the assessment aspects of the *Connexions Framework for Assessment, Planning and Review*. Other assessments such as universal checks and targeted assessments (for children in need; those with special educational needs etc.) will remain in place.

However, the CAF may be appropriate to be used before, or in conjunction with a specialist assessment to help understand and articulate the full range of a child's needs. It can help ensure that the referral to a specialist service is relevant and can build up a comprehensive picture of needs, rather than a series of partial snapshots.

### Q: What is the relationship between the CAF, the lead professional and information sharing?

A: The CAF, the lead professional and information sharing are all essential for the effective provision of integrated services to children and families;

- The **CAF** provides a process for identifying needs and bringing services together to meet those needs more swiftly and effectively
- Where a range of needs are identified that require an integrated response, the **lead professional** co-ordinates these actions and acts as a single point of contact for the child and family
- Effective **information sharing** then helps practitioners work together to deliver a coherent and relevant service to the child and family

### Q: Where does the ContactPoint fit into this picture?

A: ContactPoint will provide a tool to help practitioners identify which other practitioners are working with the child. Like CAF, it is a tool to improve integrated working between agencies.

In developing the requirements for ContactPoint, the processes involved with administering a CAF are being closely examined. It is expected that ContactPoint will record that a CAF has been completed, when it was completed and who it was completed by.

### Q: Will information from the common assessment be held on ContactPoint?

A: No, the detail of assessments will not be held on ContactPoint. It is expected that practitioners will be able to find out if a common assessment exists. They will then need to contact the other practitioner(s) and, with the consent of the child, young person or family, access the CAF if appropriate.

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**Q:** Why not postpone CAF until ContactPoint is in place?

**A:** The CAF and ContactPoint are developing on different timescales. The CAF can offer immediate benefits to children and families and the DCSF believes it would be counter-productive to delay any introduction of the CAF to fit in with the ContactPoint timetable development.

**Q:** What are the plans for the e-enablement for CAF (e-CAF)?

**A:** An electronic template of the CAF form and pre-assessment checklist are downloadable from <http://www.everychildmatters.gov.uk/resources-and-practice/TP00004/>. These templates enable “simple” IT support for CAF – for example storing the form securely within Case Management systems and sharing by physical transfer (e.g CD, memory stick) or by secure email.

However consultation with Local Authorities and practitioners has made it clear that there is more to CAF than just the form. In order for e-enablement to be truly effective it must support the whole multi-agency process – from preparation, to discussion, and following through to delivery.

Based on these consultations an eCAF Document Set has now been published, which is also downloadable from <http://www.everychildmatters.gov.uk/delivering-services/caf/e-caf/>

It contains an overview of the consultation’s findings and numerous detailed documents – including business process maps, a data model, and a Requirements Catalogue and defines national standards for an eCAF system. Part of the eCAF Document Set is the XML Schema. XML is a widely accepted format for data exchange, and this schema therefore allows eCAF information to be shared between all compliant systems.

As the next step in this process of trialling and consultation the DCSF will be working with a selection of Local Authorities to develop exemplar eCAF systems that meet the national eCAF standards and processes. The DCSF aim is to learn from this so that they can determine how to implement a national consistent approach for the IT enablement of CAF.

In the medium term they will also be supporting local areas by rolling out ContactPoint by the end of 2008. This will enable practitioners to identify whether a child has a CAF and will provide contact details for the practitioner who has most recently completed the CAF. Prior to roll-out of the index, local areas will need to consider interim arrangements for enabling practitioners to check if a CAF already exists for a child and if so whom to contact about it. A number of areas have already made progress in doing this.

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## CAF Operation

**Q: What support will be provided – resources, money, IT equipment?**

**A:** There was additional funding available for local authorities in 2007-08 (£63m) to support the implementation of *Every Child Matters*, including the implementation of CAF. This was part of the new Children's Services grant, introduced from April 2006 (£152m in 2006-07; £193m in 2007-08).

**Q: Has any consideration been given to recording centrally if a family refuses to consent to a CAF?**

**A:** A central principle of CAF is that it is consent-based. Therefore, it would be inappropriate to keep records regarding a refusal. If a practitioner has concerns regarding child protection, they should follow the existing Local Safeguarding Board procedures.

**Q: What are the requirements of local authorities to implement and use the CAF? Is it statutory? What is the legal requirement? By when?**

**A:** Section 10 of the Children Act 2004 places a duty on local authorities and their partners to co-operate in order to improve the well being of children in that area.

The associated statutory guidance describes the essential features of children's trusts that will enable this co-operation, including integrated processes, which in turn, include a Common Assessment Framework (CAF). This emphasises the need for CAF to be introduced as part of a number of measures within the context of children's trust arrangements. The guidance goes on to explain the intention for one national CAF so that when children move between local areas or services their assessments are easily transferable, and when practitioners move, their skills in using CAF should also be transferable. All local areas should implement CAF by the end of March 08.

The status of the statutory guidance is that all local authorities and relevant partners must have regard to it – in exercising functions under Section 10 of the Children Act 2004, they have to take account of the guidance and, if they decide to depart from it, they must have clear reasons for doing so.

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**Q:** How will information be kept confidential?

**A:** Common assessment information should normally be held and shared only with the informed consent of the child or young person, or their parent or carer. The exception would be if the information gathered led to a concern that the child (or other children) was suffering from or at risk of significant harm.

## CAF training

**Q:** Are there any tools available designed for the purpose of measuring the quality of the information contained within a CAF form, or is this something that should be developed locally?

**A:** Guidance is available on what makes a well-completed CAF form, which was drawn up by the areas trailing the CAF in 2005-6. It can be found in The Common Assessment Framework for children and young people: Supporting tools document, on the Every Child Matters website. [www.everychildmatters.gov.uk/resources-and-practice/IG00146](http://www.everychildmatters.gov.uk/resources-and-practice/IG00146)

### What Makes a Well Completed Form?

#### Quantity of information

- Sets the scene well – comments made on all 3 domains
- Something in every box but OK to only complete information known
- Enough detail but not too much
- Not too many gaps left
- Compromise between enough and fit for purpose
- Well-ordered
- Issues weighted appropriately
- Information sources are clear and comments attributed and clearly explained, for example, the comment “Mum says (this also indicated involvement)”
- Jargon and sector-specific acronyms avoided
- Well-presented: bullet points
- Frequency or duration qualified, rather than terms such as ‘often’ or ‘sometimes’

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## Approach

- Whole family engaged; this helps trust
- Purpose made clear
- Evidence – informed by fact and opinion
- Non-judgemental
- A one-off: snapshot in time
- Owned by the author (= “data controller”)
- Observations linked to analysis
- Child involved throughout (not just at the end)
- Comments made specific e.g. who said what
- Focus is on impact on the child, not others
- Positives included; strengths before needs
- Detail included if necessary and relevant (explain why something is relevant now)
- Child’s views given enough prominence
- Comments indicate that it has been discussed with child
- ‘Not known’ distinguished from ‘not relevant’
- Analysis shown
- Conclusions are strong and clear; well pitched and achievable

## Action Planning

- Clear plan of action with dates and who is responsible for what
- Action plan tailored to next stage of the process
- Actions prioritised

**Timings included, where actions are to be taken within a reasonable time**

**Q: How do you cope with CAF forms where twin siblings are involved?**

**A:** A CAF form should focus on one child. If there are concerns about more than one child in a family, it will be appropriate to complete separate forms for each.

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**Q:** Can a parent or carer initiate a CAF?

**A:** If a parent or carer would like to initiate a CAF, they should discuss this with someone currently providing a service to them. This may be a health visitor, a doctor, or someone else.

Local services are responsible for determining how they use CAF, and there is no entitlement to receive one on demand. If, after talking to a practitioner, the individual wanted to discuss further what is happening locally, they would need to contact their local authority's children's services department.

**Q:** How does the CAF fit with the Common Core of Skills and Knowledge?

**A:** The Common Core sets out the skills and knowledge required for everyone working with children. It specifies the skills and knowledge required for successful information sharing, and the need to know about the CAF and where appropriate complete one.

**Q:** What training will practitioners have?

**A:** DCSF has provided training packages for CAF trainers and CAF practitioners for use at local level. It is for local authorities and their partner agencies to determine whether and how to adapt the training packages for use in locally provided training.

CWDC will provide opportunities to share emerging practice; further information can be found at [www.cwdcouncil.org.uk](http://www.cwdcouncil.org.uk)

The Children's Workforce Development Council (CWDC) are working with the DCSF to plan to embed the CAF into relevant national occupational standards and qualifications.

**Q:** Will CAF training be mandatory?

**A:** Local authorities should put in place arrangements to ensure practitioners undertaking common assessments are suitably skilled and trained in order to complete assessments that are fit for purpose. They should also put in place mechanisms to enable practitioners to undertake relevant training, seek advice and get support with issues that they feel ill equipped to tackle.

Managers should ensure that practitioners needing to undertake common assessments undergo specific CAF training. Practitioners should also have the generic skills of assessment and the qualities and attributes needed to work with vulnerable families. In order to undertake an effective CAF, practitioners will need to have the skills and knowledge covered by the Common Core of Skills and Knowledge for the Children's Workforce before undertaking assessments.

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