SINGLE ASSESSMENT PROCESS – GUIDANCE

Introduction

The single assessment process replaces the common assessment framework and is compliant with Working Together to Safeguard Children (2013).

The guidance aims to help practitioners to address any queries that they may have in relation to various sections in using the Single Assessment. The aim is not to be so prescriptive that it narrows the practitioner’s assessment to a few key identifiable areas.

There is also recognition that requests for service may be received from individuals working for other agencies and concerned parent/carers requiring specific help which this approach encourages.

It is important that practitioners use their professional judgment during the assessment. This will make greater demands on your evaluative and interpretive skills when assessing children’s, needs, strengths, risk, child abuse and neglect. The assessment will rely upon practitioner knowledge, research, ethical principles, professional practice experience and Social Work theories. (The assessment is supported by effective professional supervision).

If there has been a completed Early Help Assessment (formerly known as CAF), this should be used as an important source of information for the basis of the social care single assessment.

It is only through effective dialogue with children, families and involved professionals, that you can truly understand the child’s experience and journey. This is evidenced through an increase in direct work.

We aim to help families by:

• Encouraging and promoting practitioner analysis to understand family’s within their own, unique context
• Recognising the importance of early and outcome focussed planning in interventions.
• Aiding relationship building in our practice and acknowledging that that relationship can be an agent for change.
• Helping us articulate why we are intervening in children’s lives to children themselves, their families and to other involved professionals
• Promoting sustained improvements to the quality of the lives of children and their families.
• Empowering – engaging the child, young people and/or parents and carers and support them to participate in, take responsibility for their contribution to a collaborative assessment. The voice of the child/young person is listened to and recorded throughout the assessment process
• Creating Development – supporting the child, young people and parent/carer to adopt a self-determining, solution focused approach to the discussion
Creating Accessibility – for all concerned, including the efficient use of time and access to the means needed to undertake the assessment (e.g. equipment, interpreter)

Being Transparent – the purpose of the assessment is clear, the discussion is open and honest and there is no hidden agenda

Ensuring families understand how obtaining their consent to share information with other professionals will enable them to receive effective support

PART A

Sections 1-3 are relevant to all professionals completing the single assessment irrespective of which organisation they are employed by.

The aim of PART A is to gather information relating to the family which will be pre-populated for the use of any subsequent assessment to avoid duplication. It replaces the current 'Request for Support' document. Ensure you obtain consent to share any information and explain how the data you collect will be stored and used to support the family. Where the family appears to be reluctant to give consent or the purpose for completing PART A is to substantiate some initial concern it is still important that you maintain an on-going dialogue and record any concerns accordingly.

*Practitioners are reminded to ensure that all details pre-populated in PART A are true and accurate*

SECTION 1 - Your family household

You will need to ensure you include each family member's details within this section. It is important to capture information on other significant family or friends and ensure details are correct.

*Parental Responsibility – Knowing who has PR for a child is of paramount importance and should be established from the outset."

Record any information relating to the communication needs of the family. This is crucial to ensure the family clearly understand the assessment process and they can contribute to it.

You may wish to undertake a risk assessment detailing any concerns in relation to the assessment – for example domestic abuse, aggressive pets. This information can be shared with other agencies who are working with the family.

You can use this section to explain the family's current situation. – For example separation, divorce, redundancy

SECTION 2 – Reasons and understanding about your assessment
This section is used to obtain information about the individual completing Part A. It is extremely important to outline clearly and succinctly what specific support is being requested, what you feel needs to happen and what could happen if nothing changes. Also remember that you could complete this section because you wish to clarify whether information you have received is hearsay and want to confirm this prior to submitting a formal request.

Ensure the child/young person, and parent/carer understand why you are recording the information and requesting support. Check they are aware of what the process will involve and who will be contacting them...

Social Care Assessment – The professional completing a social care assessment should invite the reader to refer to PART C to avoid duplication.

SECTION 3 – Your Family Support, History and Safety

Services working with your family

This section gathers information about services who are currently working with the family. These services will be asked to contribute to the assessment process. Remember to include GP details in this section.

Also note any significant events which may be a contributory factor to this request for service being made.

Relevant previous assessment

It is important to identify whether there have been any other previous assessments undertaken with the family in order to gain a better understanding of the needs of the children/young people

Your Family’s Safety (Advice)

These questions have been compiled from lessons learned from serious case reviews. If ‘no’ is answered to any of these questions, you must ensure that the relevant advice is given to the family and that this is considered in the risk assessment.

PART B - THE EARLY HELP ASSESSMENT – GUIDANCE

*To commence within 10 working days*

The Early Help Assessment for Children and Young People is one of the elements of integrated frontline service delivery. The Early Help assessment replaces the Common Assessment Framework (CAF).

The Early Help Assessment is a shared assessment for use across all children’s services in Derby City and Derbyshire. It aims to help the early identification of children and young people’s additional needs and promote coordinated service provision to meet them.
The assessment is a family assessment – each child in the family can be captured in one assessment so ensure you include the date this section was completed.

If it becomes evident at any time during the course of the assessment, that a child has been harmed or abused, or is at risk of being harmed and abused you must follow Local Safeguarding procedures [http://www.derbyshirescb.org.uk](http://www.derbyshirescb.org.uk).

**Family Tree**
FI has the functionality to speedily create a family tree/genogram by drawing on details from the person front screen. However, best use of the family tree is to use it as a tool for direct work with the family. The practitioner in conjunction with the key family members will undertake an exercise to draw and understand the family tree (and / or eco-map). This will need to be as detailed as possible. Family networks that span several households will need to be articulated within the wider family tree. See links below for information on Eco maps and genograms.

[http://socialwork.msu.edu/koehler/docs/AboutEcomaps.pdf](http://socialwork.msu.edu/koehler/docs/AboutEcomaps.pdf)


**SECTION 4 – Your family’s profile and story**
The assessment covers three domains:
- Child’s profile and story
- Parents and carers profile and how they look after the children
- Family, home, community and support networks

You should explore areas around the immediate concerns but in order to give a holistic view explore all of a child’s/young person’s circumstances. Wherever possible you should base your findings on evidence not just opinion, although professional judgement is valid. When obtaining the child’s view remember to be creative and consider which approach can best achieve this.

**Child’s profile and story**
This is a family assessment, in this section each child within the family can be commented upon. Consider the child’s, health, physical development, learning and behavioural development, emotional and social development, self-esteem and family & social relationships. Consider issues of disability, identity, race and religion. Is the child a young carer? Ensure you clearly identify which child you are recording both strengths and needs about.

**Parents and Carers profile and how they look after the children.**
This section captures how well parents are able to support their children’s development and respond appropriately to their needs. The assessment is to consider, basic care, guidance and boundaries, emotional warmth and stability whilst ensuring safety.
It is important to identify both strengths and needs of the parent’s ability to look after the children. Consider if either parent has health issues, physical disability or learning needs/disability that may impact on parenting.

If they are a carer of a disabled child they may require a carer’s assessment. Ensure you have considered domestic abuse, parental mental health and substance misuse/dependency and the impact of these on the parent’s ability to parent, and the impact on each child.

**Family, home, community and support networks.**
This section is to consider the impact of wider family and environmental elements on the children’s development and on the ability of the parents to look after the children. The following are to be considered: Family history and relationships, wider family, housing, finances, and useful resources available in the community.

**SECTION 5 – Child, family and practitioner’s views**

**Child/Young Persons views**
Whilst undertaking the assessment the child/young person’s wishes and feelings must be sought and included in this section. Their views on what needs to change and what needs to stay the same must be captured.

**Family Views**
Record the parents/carers views on what needs to change and what needs to stay the same must be captured.

**Practitioner views: This is where you offer your perspective of ‘what needs to stay the same and what needs to change’ – this will help you to begin to formulate an action plan with the family**

The professional completing the assessment will analyses the information collated resulting in a clear understanding of the children and families situation. It is important to recognise the strengths within the family and build on these. Differences of opinion between the family’s views need to be explored, reflected on and taken into account.

**SECTION 6 – Practitioners analysis**

**Practitioner’s Analysis**

At this point you are making a professional judgement, the analysis of the child and family situation is complex, through discussion with your line manager and team this may help you to reflect on what is or might be happening.

Practitioners should refer to practice matters guidance for clarity about what should be included in a good analysis

http://dnet/what_were_doing/caya/practice_matters/default.asp
By answering the key questions asked in this section, you will have developed an analysis that will lead you into what needs to happen next

**SECTION 7 – Identified Actions from Early Help Assessment**

**What Needs to Happen Next?**
Having undertaken the Early Help assessment there will be immediate identified actions to put in place. At this point you will decide whether these actions can be delivered by you without requiring any other agency involvement or whether a Team around the Family (TAF) meeting needs arranging. Please record these actions in this section.
Child/young person and parents/carers are asked to comment on the identified actions from the Early Help assessment

**Lead professional**
The practitioner completing Part B - The Early Help Assessment does not automatically become the lead professional, but is responsible for organising the first TAF when the lead professional is identified.
The Lead professional could be any practitioner working with the child/young person and family. The Lead professional is responsible for coordinating provision and acting as a single point of contact in providing integrated Early Help services. The Lead professional is not accountable for the actions of other practitioners or services within the TAF

**Information sharing**
The assessment aims to support good practice in information sharing about the needs of the families as part of Early Help services. The Early Help Assessment is a voluntary assessment and consent must be given at the start of the process for the assessment.

If an Early Help Assessment is refused and you are concerned about the safety or welfare of a child you should follow Derby/Derbyshire Safeguarding procedures. Lack of consent should not prevent professionals meeting if the child’s welfare needs are evident and the criteria for social care are not met.

Once the assessment has been undertaken the parent/carer or young person will be required to sign the document to ensure they understand how the information will be stored and shared.

**Team Around the Family Meeting (TAF) Guidance**
Please note this is separate document and Frameworki episode
The team around the family (TAF) is a model of multi-agency service provision and should be arranged within six weeks from the commencement of the Early Help Assessment. The TAF will bring together a range of different practitioners from across both Adults and Children's Services along with the family in order to offer appropriate support.
TAF members are jointly responsible for developing and delivering a package of solution focused support to meet identified needs of the family identified through the Early Help Assessment.

TAF members should:
- Be responsible to deliver the actions they have agreed to carry out as part of the action plan
- Support the Lead professional by keeping them informed, attending TAF meetings, and offer guidance and advice
- Contribute to chairing and minute taking of TAF meetings

Should parents / carers not attend the TAF meeting it will continue, the action plan will be reviewed. Parents / carers to be informed of the discussion and given details of the updated action plan.

TAF Paperwork

You will need to complete and action plan in partnership with the child/young person and family. The plan will be a key vehicle through which families, children and young people understand what needs to be changed and how the early help services will work together. The practice principle is the action plan is written for the family and reviewed, by TAF meetings, in a timely manner which is on a 6 weekly basis. The plan should be written clearly in a family friendly language and be clear what needs to be achieved in order to make the necessary changes identified by you and the family.

Plans need to:
- Ensure you have addressed the current reason for involvement
- Ensure actions are achievable
- Ensure actions have timescales
- Encourage what is working well
- Include the families ideas in order to effect what needs to change
- Draw on the key people who need to take action (this may include family and friends)
- Be updated and reviewed
- Be given to the family and professionals involved

At each TAF meeting a review of the previous action plan must be undertaken considering what has worked well and what has not been achieved. If the TAF membership changes then the form on page 6 of the Single Assessment will need completing and passed to a member of Business Services to ensure the appropriate people are invited to the meeting. There is opportunity to record the child/young person and families views throughout the TAF meeting and develop further action plans if deemed necessary. Future action plans should recognise and encourage good practice already identified.
It is important to record on the action plan what might happen if the action plan is not followed.

**Can the assessment be closed?**

**YES**
Should all actions be achieved it can be agreed for the assessment to be closed, with no further TAF meetings taking place. Ensure you inform children/young people and families of any continued support. Families will need to be clear of any continued support. For example, school, voluntary sector services.
A discussion must take place with the practitioner’s line manager prior to the case being close closure.

**NO**
Agree a review date with the TAF members at the meeting

**PART C - THE SOCIAL CARE ASSESSMENT – GUIDANCE**

We want to support Social Workers to practice as confident professionals

The Social Care Single Assessment will be supportively reinforced through our organisation in a number of ways, through practice, group and line manager supervision, quality assurance, the use of research and staff and professional development. Incorporating what we know about the importance of timeliness in our assessments and intervention work, along with a wide range of Social Work knowledge / research, practice skills and professional values. This Social Care Single Assessment encourages effective, timely and purposeful Social Work.

In addition to the aims of helping families as described at the beginning of this document, the social care assessment further aims to help families by:
- Strengthening reflective and reflexive Social Work practice and supervision
- Strengthening the use of research in Social Work practice and analysis

**Supervision and critical reflection**
The role of supervision is crucial in supporting and embedding the Single Assessment. Supervision offers time and space for Social Work practitioners to critically reflect on both practice and planning, and supports how you undertake your assessment. Good supervision will enable the worker what they are not seeing as well as what they are (because of similarities or differences to their own context), it will explore the idea of mutual influence (within a worker’s relationship with a family) and explore the worker’s relationship with risk.
The purpose of a single assessment is to ensure that families do not have to repeat their story therefore when undertaking a social care assessment you need to read and consider the early help assessment and its outcomes to inform your assessment.

SECTION 8 – Reasons and Understanding about your Assessment

If an early help assessment has not been completed you need to ensure that this section is completed and cross-referenced in Part, Section 1.

You need to be clear and provide evidence as to how you know the child and their family can understand this assessment, whilst considering any communication needs.

The Social Worker should outline clearly and succinctly the reason for Social Work involvement. We need to state what we are worried about.

It’s important to gain the perspective and engagement of absent fathers/parents and non-resident parents within your assessment. The assessment will not be complete without this.

Practice Triggers
- Remain curious throughout this process
- Who will you speak to?
- What records do you need to access to review (e.g. back files / chronology)?
- How long will you need to do the work?
- Remember lessons from serious case reviews

SECTION 9 - Assessment Plan

In this section the Social Worker, in conjunction with the family, outlines the planning needed for the case. A timeframe is agreed, and the tools and methods to be used discussed. Consider how you will approach the family, what you will say, how you’ll say it, and how it might be received. Is anything needed to support communication with the child and family e.g. an interpreter?

Practice Trigger
- Ensure the maximum time agreed with your manager first.
- Be aware of any health and safety risks to staff when visiting and make appropriate plans.

Has the child been seen? If not, when will this be done? The practitioner must ensure that the date the child is seen is clearly recorded; If a child has not been seen within 5 days of referral being seen then a clear explanation of the reasons for this is to be recorded mandatorily is this section.
Management Endorsement of Plan and Timescales

At this stage the manager needs to comment on the following within 7 days of referral:

- Does the assessment meet stated timescales?
- Recognition of any shortfalls and comment on how these are to be addressed.
- Any specialist assessments should be considered, including capacity assessment, carer’s assessment, parenting assessment and private fostering.
- How full and robust the assessment is, whether it is inclusive of the views of the wider family and professional network and systems. Are you satisfied that the assessment demonstrates that the child's voice has been represented and understood?

Practice Triggers:
- Is the assessment sufficiently analytical?
- Is the child's voice understood and evidenced?
- Have strengths are risks been fully considered?

SECTION 10 - Child Protection Only

Is a strategy discussion / meeting required?

If there is reason to believe that a child is suffering, or likely to suffer significant harm, Children’s Social Care has a duty to make enquiries to decide what action should be taken to safeguard the child, under s.47 of the Children at 1989. Guidance should be sought from Working Together to Safeguard Children 2013; the child protection procedures are explicit in Triax and can be found using this link [http://www.derbyshirescb.org.uk](http://www.derbyshirescb.org.uk)

A Child Protection investigation needs to have an outcome that concludes whether or not a child is at risk of continuing significant harm. If the child is at risk of continuing significant harm, an Initial Child Protection Conference must be arranged within 15 days of the strategy discussion that agrees a Case Conference is needed.

Practice Trigger
- Managerial direction and oversight is essential in child protection processes.

SECTION 11 - Your Family Background, History and Safety

Cultural Genogram
The Social Worker in conjunction with the key family members will undertake an exercise to draw and understand the family tree (and / or eco-map). This will need to be as detailed as possible. Family networks that span several households will need to be articulated within the wider family tree. This can
be used as a tool to explore (and map) relationships/family scripts/generational patterns/issues etc. within a family. Further information about Eco maps and genograms is available at the links below.

http://socialwork.msu.edu/koehler/docs/AboutEcomaps.pdf

http://www.genopro.com/genogram/symbols/

**Family Timeline / Significant Events and all Professional Involvement**
The Social Worker will document pertinent components of the family chronology that will inform and understanding (and be relevant) to the nature of the referral or assessment. It is important that only pertinent information is included here.

Practice Trigger:
- What is this telling you?
- Who is missing?
- Strong / difficult relationships form part of this discussion
- Stay curious

**Eco-Map**
It is essential as part of building our understanding that eco-maps are completed. The eco map helps us understand the family system and how it relates to their internal and external world. The eco map will describe and articulate the family’s connectivity with the world. This will highlight areas of support and isolation. Further, relationships of stress and strain are illuminated together with areas of strength and support. This is crucial to informing the Social Work plan.

**SECTION 12 - Your profile and story**

**Child’s Profile and Story**
The child’s profile may include background factors pertinent to their on-going well-being and development. It would be relevant to outline any developmental and health concerns that impact on the child. Consider disability issues or if the child is a young carer. With regards to the child’s profile / story it is essential that the child’s narrative or understanding of their situation and life is articulated in this section.

Consider the relevant elements of the assessment framework (health, education, emotional and behavioural development, identity, relationships, presentation and self-care skills) and reflect on how the child relates to these areas and the impact this has had and continues to have on the child’s story; do they add to the child’s resilience or increase their vulnerability? Consider how life looks through the eyes of this child and reflect on whether this is the same story that others have about them (if not, why not). Consider anything relevant from the GGRRAACCEESS (Gender, generational, Race, Religion, Abilities, Age, Culture, Class, Education, Ethnicity, Sexuality, Spirituality) for this child.
Within this section there needs to be evidence of listening to and respecting the child/young person; what their hopes for the future are and what support they feel they need to get there.

In the context of children suffering abuse the narrative will also explore both their experience and understanding of this. With younger children or pre-birth situations it is essential that the Social Worker considered the child’s story / narrative based on presenting issues in the case. Strengths, needs, risks and protective factors should be included.

Practice Triggers:
- Make the child real
- What is important to the child?
- Put yourself in their shoes, how do they see their life?
- What is it like for this child to live in this family?


Your Parent’s / Carer’s Profile and How They Look After You

This section includes the narrative of each birth parent / carer, explored both independently and together where possible.

(For links to systemic questioning and using attachment narratives see resources at the end of this document)

Consider the relevant elements of the assessment framework (basic care, ensuring safety, emotional warmth, stimulation, guidance and boundaries, presentation and stability) and reflect both on their capacity to meet and respond to each child’s current needs and future anticipated needs. Consider what they are doing well and this impact this has on the child(ren). Consider any presenting issues (such as problematic relationships with their partner, mental health, alcohol or drugs) and reflect on if/how this impacts on the child(ren) and this parent’s parenting; within this consider what action/strategy has taken (or tried to take) to minimise the impact on the child(ren) consider the dominant story they hold about themselves as a parent and reflect on whether this is the same story that other (including the children) have about them (if not, why not). Consider anything relevant from the GGRRAACCEESS (Gender, generational, Race, Religion, Abilities, Age, Culture, Class, Education, Ethnicity, Sexuality, and Spirituality) for each parent. Within this section there needs to be evidence of listening to and respecting the views of the parent/carer; what their hopes are for the future and what support they feel they need to get there. Nb. Where there is conflict between the needs/wishes of the child and their parent/carer, decisions should be made in the child’s best interest.
The Social Worker is expected to keep an open and enquiring mind with the family around key events and milestones in the parents or carers lives, and events of significance for them. This will consider how the parents met, their attitudes to having children, family life and more; this process should consider an historical understanding through to the present day. Family networks / systems are complex and can involve several households. In this section, an explanation will be given of the family's particular dynamics e.g. who lives where or who is significant. Consider if either parent has health issues, physical disability or learning needs / disability that may impact on parenting, or if they are the carer of a disabled child; they may require a carer's assessment.

Ensure you have considered domestic abuse, parental mental health and substance misuse / dependency, and the impact of these on the adult's ability to parent and the impact on each child.

Where you Live, Your Family, Your Home and Your Safety

This section needs to stipulate the stories of the child(ren) and their parents/carers in the wider context in which the family is situated. Consider the relevant elements of the Assessment Framework (family history, wider family, employment, income, family social integration, community resources) and reflect on whether the wider context supports or prevents the child’s needs being met; helps or gets in the way of parents/carers capacity to meet/respond to the child’s needs. Consider if there are any key considerations 9eg births, deaths, illness, moves, loss) in this family’s life cycle (past present or future) which are having an impact at this current time (on whom and how). Consider anything relevant from the GGRRAACCEESS (Gender, generational, Race, Religion, Abilities, Age, Culture, Class, Education, Ethnicity, Sexuality, Spirituality) if not considered elsewhere. Consider any family rules or scripts that have become apparent and reflect on their impact.

Consider the family's position in the local community, to maximise any opportunities for support. This is a chance to look at safeguards and risks in the wider family and any associated regular visitors to the house. Explore finances, budgeting and housing.

Practice Triggers:
- See every child's bedroom
- Be interested in who does what around the house
- Be curious, and ask questions
- Include and engage the wider family for yourself

SECTION 13: You and Your Family's Views

Your Views of What Might Help You and Your Family and Your Suggested Solutions
What would the child like to change? What things does the child like? How can you be assured that the child is aware of your role and responsibility?

If child/young person does not want their parents to know this, their comments should be recorded confidentially in case notes.

Practice Triggers:
- Does the child need or want an advocate?
- The child must be seen alone
- Consider any possible influence or duress the child may be under
- Consider any barriers to them telling you what they want to, and acknowledge and address them

http://llk.media.mit.edu/courses/readings/participation-ladder.pdf

Your Parents' and Carers View of What Might Help and their Suggested Solutions
Sharing this report is an interactive task, as the parent or carer is a real part of your assessment. Tier perspective must be valued. The act of sharing the report can lead to a better understanding and collaboration, which can have a positive impact on the outcomes. Parents/carers suggested solutions are more likely to work for them, and produced sustained improvements for their family life.

Practice Triggers:
- Each parent/carer to be seen alone
- Consider any possible duress the individual parent/carer may be experiencing, and if they need assistance or an advocate of their own

SECTION 14: Social Worker’s Views

Social Worker’s Professional Judgement and Risk Analysis
The Social worker needs to draw together their work thus far, and set out how the information gathered in their work with the child, family and professional networks comes together to inform an understanding of the family's current situation and what the implications are for the child/children/young person's future welfare. This is the basis for the current understanding of that child's world.

In this section the social worker will make sense of the reason for the referral as part of their professional understanding. What the child and the family understand to be the worry is explored, and whether it differs from the understanding that others hold. To help make sense of any discrepancies, reflection with manager/team is encouraged.

Think about and reflect on the following (this is not an exhaustive list):
- Who and what has helped you develop your work thus far?
- What counts as evidence for your work thus far?
- What research have you drawn on?
• Have you made sense of the case?
• Have you addressed the current reasons for involvement in context of the history?
• Who and what might be missing at this stage?
• Are you clear on what the family understands to be the worry
• To what extend do the family acknowledge and understand your concerns?
• Have you explored all perspectives – family, professionals and yourself?
• Is the child safe enough?
• Is each child’s needs individually considered clearly within their family and wider context?
• Who have you not spoken to, and why?
• Have you had a dialogue with your manager?

Practice Triggers:
☐ You are the professional expert
☐ Do your truly understand the child’s world?
☐ Show your evidence base
☐ Have you been curious?

What is Analysis?

Practitioner’s Analysis
Practitioners should refer to practice matters guidance for clarity about what should be included in a good analysis
http://dnet/what_were_doing/caya/practice_matters/default.asp

Information + Analysis = Assessment

Analysis is the process by which we come to understand something and its meaning. In Social work this includes understanding it's meaning to the child, to the parents and to the wider family system.

Analysis in Social Work is not an exact science, but we use a range of knowledge and skills, including a relational understanding of families alongside the capacity to think critically and reflectively. A good analysis makes clear the links between information that is gathered and the decisions made about what happens next for the child and their family. The analysis is making sense of the information you have gathered form a number of different sources, including observations. You will use your knowledge obtained from experience plus your knowledge through training and reading, to reflect critically on what you have seen and heard. As a minimum always consider and record: what you and the family are worried about; what is the impact of these risks / behaviours on the child and their family; what is working well to address these worried (strengths); what needs to happen next (to address the risks and build on strengths.
Social Worker's Recommendations/What Needs to Happen Next
Clear recommendations to be made, the next steps should address the needs and risks identified and build upon strengths.

SECTION 15 - Manager’s Decisions

Has the child been seen. If not, when and how will this be done?
Is a strategy discussion / meeting required?
Does the assessment meet stated timescales?

At 15 days:
The manager's decision and supervisory note is required in this section and must be recorded within 15 days of commencement of the assessment. Comments should include whether the child has been seen, progress of the assessment and projected timescales. Comment on actions required at this time.

Oversight at the end of the case - Upon Completion:
The manager should comment on the following:

• Does the assessment meet stated timescales?
• Recognition of any shortfalls and comment on how these are to be addressed.
• Any specialist assessments should be considered, including capacity assessment, carer’s assessment, parenting assessment and private fostering.
• How full and robust the assessment is, whether it is inclusive of the views of the wider family and professional network and systems.
Are you satisfied that the assessment demonstrates that the child's voice has been represented and understood?

Practice Triggers:
☐ Is the assessment sufficiently analytical?
☐ Is the child's voice understood and evidenced?
☐ Have strengths are risks been fully considered?

SECTION 16 - Next Steps Following Assessment

The outcome of your assessment could involve more than one step.

SECTION 17 - Sharing of the Assessment

Face to face sharing of your report is best practice.

SECTION 18 - Action Plan

Think ‘SMARTER’
Specific, Measurable, Attainable, Realistic, Time-bound, Evaluate, Re-Evaluate (Review).
Be Clear – what does a good outcome look like?
How will we know we have achieved a good outcome?
What is the impact on the child if the objective is achieved and if it is not?

USEFUL RESOURCES

Ecomaps
About Ecomaps - http://socialwork.msu.edu/koehler/docs/AboutEcomaps.pdf

Cultural Genograms
Introduction to the Genogram - http://www.genopro.com/genogram/
Genogram examples - http://www.genopro.com/genogram/examples/

http://www.neiu.edu/~circill/F406C.pdf

Ladder of participation
http://llk.media.mit.edu/courses/readings/participation-ladder.pdf

Tools
The three houses tool and the safety House tool -

Systemic

http://www.familytherapy.org/documents/Interventive3.PDF