



**DARLINGTON**  
Borough Council

## **ASSESSMENTS**

# **POLICY AND PRACTICE GUIDANCE**

| <b>VERSION</b> | <b>AUTHOR</b>   | <b>DATE</b>    | <b>REVIEW DATE</b> |
|----------------|-----------------|----------------|--------------------|
| Version 1      | Joanne Stoddart | September 2019 | September 2021     |

## **1. BACKGROUND**

This guidance has been developed to support Team Managers, Senior/Advanced Practitioners and Social Workers in carrying out an assessment of a child or young person and their family.

The single (child and family) assessment is the assessment tool for all assessments on Liquid Logic. This tool has been developed in line with the Signs of Safety practice framework.

Please refer to **APPENDIX 1 and 2** for guidance regarding when to update single (child and family) assessments for Children in Need, Children in Need of Protection and Looked After Children. Please also refer to Darlington's Social Work Practice Standards for Excellence.

## **2. ASSESSMENT DETAILS**

### **2.1 Assessment plan and timeframe for the assessment to be carried out**

The Social Work Team Manager or Senior/Advanced Practitioner where delegated by the Social Work Team Manager, will meet with the allocated Social Worker at the start of the assessment to ensure direction is provided regarding its purpose.

#### **Manager direction**

The Team Manager or delegated Senior/Advanced Practitioner will generate the assessment form and provide their manager's rationale for undertaking this assessment and outline any key areas that need to be explored. The Team Manager or delegated Senior/Advanced Practitioner will directly type into the assessment form in the manager direction box.

Once this is complete, the Team Manager or delegated Senior/Advanced Practitioner will reassign the assessment to the allocated Social Worker.

This initial allocation discussion will focus on the following:

- What is the reason for the referral - the assessment must address any concerns identified.
- What are the objectives of the assessment, what are we seeking to achieve for the child and their family, and what is the legal framework the assessment is being completed.
- If consent has been overridden, the reasons why and how this is or has been addressed.
- Who needs to be seen, where and how often:

- This must include seeing the child alone or a Social Work observation if assessing very young children, the date of the first visit to the family must be agreed within the initial allocation discussion.
- This must include seeing all relevant family members.
- This must include speaking with the father of the child whether in the family home or absent.
- The direct work that will need to be undertaken with the child to inform the assessment. Identify how many sessions this may take.
- Consider whether any additional expert involvement may be required.
- What assessment tools are required, if appropriate, and how they will inform the assessment? For example, if neglect is the predominant issue, the Graded Care Profile should be used.
- Consider any additional needs of any family members.
- If there is no chronology in place, one must be started.
- Timescale for completion of the assessment – this must not exceed 45 working days, and a timescale must be set based on the information received at the outset. The timescale can be revisited if it is evident the assessment requires further information.

## **Assessment Plan**

The Social Worker must develop an assessment plan prior to them beginning the assessment. This must be completed within 10 working days of the allocation of this assessment. This assessment plan must be shared with the child/young person and their parents/carers. The Team Manager or delegated Senior/Advanced Practitioner must check this has been completed at the 10 day checkpoint and add a case note on Liquid Logic to evidence this check has been completed.

The Social Worker must identify:

- What type of contacts are to be made with who and how. For example, a direct work session with child X.
- Purpose of contact. For example, to gather child X's views on his mother's alcohol use and how this impacts on him.
- Planned date for assessment session.
- Outcome. For example, the actual date this direct work took place, whether it was achieved or if not achieved why not.

## **2.2 The assessment template**

### **a) The child/young person's involvement in the assessment**

This section is aimed at ensuring the child is visible in the assessment and that their views have informed the assessment, and planning if required as an outcome. The Social Worker must demonstrate how the child or young person was involved in the assessment and how this informed the assessment. This field is mandatory.

**b) Purpose for undertaking this assessment**

This section should be completed prior to the beginning of the assessment. It should include a statement about what is to be assessed and why, and identify any particular issues to explore further, including key issues to be addressed or causes for concern. This should clearly tell the family why there is social work involvement and be written in plain and simple language. This is not a repeat of the manager's direction that will have already been provided.

**c) Background information**

This section should provide a summary of:

The history that is known about the child and their family:

- Using the chronology identify themes and patterns including previous episodes of Early Help, Child in Need, Child Protection, Letter Before Proceedings and being accommodated into Local Authority care. This information will inform the assessment as it progresses.

**d) Child/young person's developmental needs**

Assessing Social Workers must be mindful of the impact any of the areas below have had, are having, or are likely to have on the child or young person.

This section should provide detail regarding the child/young person's:

Physical health and self-care skills such as:

- Whether the child's development is age appropriate.
- Whether the child's growth is appropriate.
- Whether the child's health care needs are being met by the parent/carer (including immunisations, health conditions, dental and eye care).
- Whether the young person has any sexual health needs that are unaddressed.

Education such as:

- Current education placement and historical education provision.
- Attendance.
- Whether the child is home schooled.
- Relationships within school.
- The parent/carers' relationship with school.
- Achievements.
- Progress being made at school.
- The nursery, school or college's view of the child/young person.

Culture, religion, identity and social presentation such as:

- The culture the child/young person associates with.

- The religion the child/young person associates with and whether practising or not.
- The child's first language.
- The child/young person's identity including their understanding of their place in their family and community or their sexual identity if relevant.
- Whether the child/young person is dressed appropriately for their age, hygiene, the level of support from parents/carers to develop suitable self-care and independence skills.
- The child/young person's view of themselves and their abilities.

Emotional and behavioural development such as:

- Reactions and responses to change and stress, motivations, self-control, personality.
- Resilience factors such as hobbies, interests, skills, trusted adults and/or peers.

Family and social relationships such as:

- The child/young person's attachments (to who and their nature)
- Loss of significant figures through bereavement, divorce, peer relationships, friends.
- Understanding of their own family, how does the child fit into the family, how do others describe them.
- Their view of day to day life.
- Emotional warmth and interaction between parents, family members and significant others.
- Parent/carers' views of the child/young person.

**e) Parenting Capacity**

This section should provide detail on the parent/s or carer's parenting abilities. This should focus on the strengths of the parents and family members and reflect what is working well in this family. It should also reflect the parents' views of their wishes and feelings in relation to the assessment that is ongoing including the parent's own opinion of how they are parenting. The Social Worker should also be reflecting on the parent/carer's capacity to change when undertaking an assessment.

Basic care

- Are the parents/carers able to meet the child's basic needs for example, food, clothing, bedding, stimulation?

Stability

- Are the parents able to provide the child/young person with stable relationships, consistent relationships with family members, education placements and environment? What is the impact on the child/young person if they are not experiencing stability in any or all of these areas?

#### Emotional warmth and stimulation

- Are the parents able to offer a positive and supportive home life?
- Are the parents able to support and encourage the child/young person to develop appropriately?
- What impact is parental presentation or behaviours having on the child?

#### Ensuring safety, guidance and boundaries

- Are the parents ensuring their children are safe within the home, outside of the home and when leaving them in the care of other people?
- Are the parents putting in place appropriate guidance and boundaries for the age of the child?

### **f) Family and Environmental Factors**

This section should provide detail on the:

#### Family history, functioning and wider family:

- An overview of each parent/carer's own history, childhood and experience of being parented.
- A summary of the parent/carer's current and historic education, work/training.
- Their health and any patterns in the family such as illness and disability.
- Where each parent fits into the family including any significant figures for them.
- The impact of diversity issues for the parent and on their parenting.
- The parent/carer's current and historical relationships including how long they were or have been in a relationship for, their strengths in their current relationship and also any conflict within this relationship.
- Whether the parents have any involvement with drugs or alcohol.
- Whether there is any known offending behaviour in relation to the parents/carers including known anti-social behaviour.
- Whether there is evidence of domestic abuse, what are each involved person's views and understanding of the violence/abuse and control factors?
- Information about the parent/carer's siblings, own parents, extended family, friendships and relationships with neighbours.
- Views of any previous involvement with children's social care or other professionals.

### Views of the wider family

This section must be used to ensure that all family members, including absent parents and everyone who holds parental responsibility for the child including a Special Guardian or a person who has a Child Arrangement Order in relation to the residence of the child, must be gained and evidenced in this section. If an individual who holds parental responsibility is not able to be located, this section must evidence the efforts that have been made to make contact with that individual, and also the impact not being able to gain their views may have on the outcome of the assessment.

### Housing:

- What is the condition of the home (both inside and outside)?
- What are the arrangements for the home (owner occupied, rented, living with another person in their family)?
- What is the children's bedroom like?
- Are there pets in the home (how does the pet present)?
- Are there individuals in the home that you do not know (explore who they are)?

### Employment and income:

- Explore the parent/carer's situation (are they in employment, if not are they in receipt of benefits).
- Does the income being declared marry up with the home conditions?
- Is the parent/carer in debt, if yes, how are they managing this (do they have sufficient for their children's basic needs)?

### Family's social integration and community resources:

- Who does the parent view as part of the family's support network?
- Does the parent access community resources or do they present as isolated?

## **g) Analysis**

This is the assessing Social Worker's analysis of the information gathered in the assessment process. This section is laid out using the Signs of Safety practice framework to enable the author to focus on relevant issues. Do not repeat issues that have already been discussed – the analysis must do exactly that, ANALYSE THE INFORMATION GATHERED by evaluating it.

**h) What are we worried about** – using the information gathered and your analysis of this, describe what worries you as the assessing Social Worker have for the child in this family – this can be presented in a list or short paragraphs but it is critical that you

focus on why you are worried, do not simply provide a statement. You must think about the impact that your worry may or does have on the child and describe this.

**i) What is working well** – as above but focus on the strengths in this family. Again you as the assessing Social Worker must think about the positive impact on the child where something is assessed as working well and describe this.

**j) Complicating factors** – as the assessing Social Worker, is there any information that you have gathered that will impact on this family for example, the family may be on the verge of eviction, you will need to think about the impact that an issue such as this may have on the family if this were to happen. Or a positive neighbour who has been a support to the family is about to move away from the area, again think about what impact this may have on this family if this support were to be available no longer.

**k) Social Worker's analysis of the situation** – this is the assessing Social Worker's opportunity to gather all the information together and provide a view. This is not a repeat of the previous areas, it must be a professional view of the family situation. Research should be used to inform the analysis but this must be jargon free and should be readily understandable for a child and parent to understand.

**l) Danger statement** – based on what has already happened in this family or to this child, what are you as the assessing Social Worker worried will happen if nothing changes. This a professional judgement based on the information that has been gathered during the assessment process.

**m) Scale** – as the assessing Social Worker it is expected that you will reach a number using the Signs of Safety scaling criteria based on your assessment of the family situation. This is based on zero meaning reoccurrence of similar or worse abuse/harm is certain and 10 meaning there are sufficient safety measures in place for the child, therefore the case can be closed or stepped-down.

It is important for the assessing Social Worker to ask and note the child/young person's view of their situation and for them to offer a number using the scale. It is also important that each parent is also asked to individually scale their situation. The assessment template offers a further section for any other relevant or important family members to offer a number using the scale, and also for other professionals involved in the assessment.



The use of the scaling criteria is important at this stage as it will offer a baseline if the outcome of the assessment is for involvement of statutory services. Without a baseline at this stage it will be difficult to evidence improvements being made or equally deterioration in the family situation.

**n) Safety goal** – as the assessing Social Worker you will need to provide a view regarding what you would expect to see to be willing to either close the case or for worries for and about this child or young person to be significantly reduced.

**o) What needs to happen** – this section will require the assessing Social Worker to outline the next steps needed to achieve the safety goal. What interventions are you proposing to effect change within the child's situation?

**p) Contingency plan** – as the assessing Social Worker you will need to outline what the Local Authority would need to do should the worries about the child/young person grow or the safety goal is not achieved.

**q) Comments and views** – it is important that as the assessing Social Worker the child/young person's comments and views regarding this assessment, the scaling they have offered and the safety goal, are gathered and recorded in this section. This is also the same for family comments.

**r) Decisions and further actions** – the assessing Social Worker is required to determine the next step for this child/young person based on the outcome of their assessment. The reason why this next step has been identified needs to be included with an analysis as to why this is appropriate. Consideration should be given to determining if a Family Group Conference may be appropriate.

**s) Management comments on the quality and outcome of the assessment**

This section must be completed by the assessing Social Worker's Team Manager or delegated Senior/Advanced Practitioner. An explanation as to why the outcome of the assessment is agreed must be provided by the Team Manager or delegated Senior/Advanced Practitioner.

In addition, comments on the quality of the assessment must also be provided. As this will be read by a parent or carer of the child, the wording must not focus on the number of times an assessment had to be amended as a case note should be used to evidence this. For example, this section should instead focus on areas such as:

- Whether the assessment needs to be strengthened in relation to the child's voice or another area and needs to be considered in future work with the child and family.
- Whether any area was not sufficiently apparent and needs to be considered in future work with the child and family.
- Whether a father's view was not sufficiently explored and that this would need to be explored in future work with the family.
- Whether direct work with the child was sufficiently used to inform the assessment.

**t) The timeliness of the completion of the assessment**

This section must be completed by the assessing Social Worker's Team Manager or delegated Senior/Advanced Practitioner. If the assessment was not completed within agreed timescales, an explanation must be provided.

The Team Manager or delegated Senior/Advanced Practitioner must check at day 10 of the assessment that the assessment plan has been developed and the Social Worker has shared it with the child/young person and their parent/carer. The Team Manager or delegated Senior/Advanced Practitioner must provide evidence of this being completed via a management decision case note.

The Team Manager or delegated Senior/Advanced Practitioner must check progress of the assessment at day 25.

The Social Worker must ensure the assessment is with the Team Manager or delegated Senior/Advanced Practitioner by the date agreed at the allocation meeting, or by no later than 40 working days.

**u) Factors identified at the end of the assessment**

The assessing Social Worker must complete this section as these fields are required for the Department of Education returns.

## APPENDIX 1

### GUIDANCE

#### **THE UPDATING OF SINGLE (CHILDREN AND FAMILIES) ASSESSMENTS FOR CHILDREN SUBJECT TO CHILD IN NEED AND CHILD PROTECTION PLANS.**

***This guidance is to be used by Social Workers and Managers to determine when a single (children and families) assessment requires updating for children who are subject to CIN and CP plans.***

All children subject to Child in Need or Child Protection will have an up to date plan which is specific to their individual needs and is regularly reviewed and updated in line with Child in Need/Child Protection procedures. Alongside the plan an up to date single (children and families) assessment is required which reflects the current circumstances and needs of the child/children. Each individual child is required to have their own assessment specific to their individual needs.

The single assessment should be updated as follows -

- Annually as a minimum to ensure the single assessment reflects the current circumstances of the child.
- If there is a significant change in circumstances, for example new safeguarding concerns or a decision to rehabilitate the child home following a period of being Looked After.

In order to update a single (children and families) assessment, Social Workers must create a new single (children and families) assessment and use the copy forward function in order to allow updated information to be reflected including the current Social Worker and Team Manager.

Updated single assessments must be completed within a maximum of 45 working days, however will be reviewed by the manager at the usual checkpoints.

The updated single assessment must be quality assured by an Advanced Practitioner or Team Manager prior to it being authorised by the Team Manager.

## APPENDIX 2

### GUIDANCE

#### THE UPDATING OF SINGLE ASSESSMENTS (CHILDREN & FAMILIES ASSESSMENTS) FOR LOOKED AFTER CHILDREN

***This guidance is to be used by Social Workers and Managers to determine when a single (Children & Families) assessment requires updating for children who are in care.***

All children in care have a Care Plan which must be kept up to date. However, alongside the Care Plan, children in care need to have single (Children & Families) assessments that are updated when significant changes are being proposed or have already occurred.

The following occasions are when single (Children & Families) assessments should be updated:

- If there is a plan to return the child to their home
- If there has been a disruption of a long-term placement
- If there is a proposal to formally match the child with long-term foster-carers
- If a child's family member puts themselves forward as a potential carer
- If there is a proposed major change to the child's contact arrangements
- During the child's first year at secondary school – the single assessment to be updated during the second school term of the first year
- If there is a major change to the child's school or placement
- If there are no changes to the child's life which has triggered an updated single assessment as listed above, the single assessment must be updated every 2 years as a minimum until the child reaches 15 ½ years or when the first Pathway Plan is completed, whichever is sooner

In order to update a single (Children & Families) assessment, Social Workers must create a new single (Children & Families) assessment and use the copy forward function in order to allow updated information to be reflected including the current Social Worker and Team Manager.

Updated single assessments must be completed within 25 days of the decision being made to update it.

The updated single assessment must be quality assured by an Advanced Practitioner or Team Manager prior to it being authorised.

