**Practice Note for all SCT Practitioners, Managers and Staff;**

**Applying the Practice Framework and Model whilst undertaking Assessments with children, young people and families.**

Completing assessments with families helps us to build a picture of their children’s circumstances and experiences. This means we can develop a better understanding of the help and support that might be required depending on the needs and risks that have been identified. Undertaking assessments are part of the processes we follow when we work with children, young people and their families. Robust management oversight, supervision, home visits, intervention and direct work informed by a good understanding of the family, culture, identity and community and partnership working are important and strengthen our assessments. At the same time, applying the Practice and Framework helps to strengthen our engagement with families, reflect on the quality of our intervention and improve the quality of the analysis and decision making.

The purpose of this practice note is to illustrate why and how we apply our Practice Framework and Model whilst undertaking single assessments. The headings used within the ‘my world triangle’ are used to illustrate how the different parts of the Practice Framework and Model can be applied. This approach can be used for all our assessments with children, young people and their families such as, Pathway Needs and Early Help Assessments. Next, the note provides good practice points, how to evidence this work and further reading. Throughout, reference will also be made to other notes that explore areas of practice in more detail.

**Why use our Practice Framework and Model when undertaking assessments?**

Using our Practice Framework and Model improves the quality and the consistency of our assessments by understanding the family’s experience from their perspective. It helps us think about those things like children and young people’s participation that will result in robust assessments. It means that when working with families, using our ‘heart of practice’ that we explore their strengths, the risks and unmet needs whilst using relationship-based and trauma informed approaches. In doing so, it also helps us to think about the way we work with our families in a way which can make a difference to their lives.

**Applying the 3 x Basics**

Applying the **3 x basics** means that we have referenced the **Process maps** to help us think about what to do, when to do it and who does what when completing the assessment. It helps with the timeliness and ensures all the maps are linked to the child’s journey.

Next the **Practice Guidance** should be read in conjunction with the process maps. Practice guidance helps us to think about how and why we are completing them and includes and references relevant national legislation and government guidance in addition to SCT policies and procedures. The Practice Guidance also includes our ‘Practice Notes’ that are a quick guide to best practice for practitioners and managers as well as ‘Best Practice Examples’. Finally, **our Practice Standards** tell us how well the assessment needs to be completed. These all work together to provide a good foundation for any type of assessment.

**Applying the 3 x Principles of the Practice Framework**

Using the **3 x overarching principles** of **the Practice Framework** as part of every assessment means that we always think about, **the Child’s Journey (Principle 1)**, through our service, any other Local Authorities and where they will go next. The picture of the child’s journey can be used as a direct work tool with the family to talk about which part of the service we are currently working with them in. It also helps to show where we will go should things improve and the steps that might need to be taken if we have any worries to keep their children safe. The map of the Child’s journey links to the yellow heart which shows our aim to achieve the goal of permanence within a safe, loving and caring family (Practce Note on The Child’s Journey).

Focusing on this as part of our assessments means considering the reasons for our current and previous involvement with the family and what needs to happen next. This helps us to understand how long professionals have been intervening in the child’s life and any impact. Reflecting on our involvement with the child, siblings and the family supports us to be clearer about the timescales for change whilst considering any contingencies and where we are hoping to get to by ‘starting with the end in mind’.

In relation to **Children/Young People’s participation (Principle 2)** ensuring that individual children/Young People are involved and kept informed at every stage of the assessment process is important. Understanding children and young people’s wishes and feelings, using their words in their assessment keeps them involved, informed and evidences that we are investing time in understanding their lived experience. Children have a right to be consulted in all decisions made about them. When we do all of this and evidence how their views and experience influence their assessment we are capturing their **‘voice’** (see section ‘how I grow and develop’). **The** **Knowledge and Skills Statements** **(KSS) (Principle 3)** are a set of national standards that help and support our practice particularly in relation to assessments. By using the KSS’s they will act as guidance to help and inform our assessment and support our critical thinking and analysis and the impact of the concerns on children, young people and young adults (see Practice Notes on Child and Young People’ Participation and the Knowledge and Skills Statements).

Using our **3 Hearts of practice** means that as part of our intervention, we use **signs of safety** as our **strengths-based approach** working with families whilst undertaking assessments**.** Using **relationship-based practice** to build, maintain and sustain trusting relationships and carefully consider our relationships with children, Young people, their families and their network based on a good understanding of their culture, identity and traditions. Adopting a **trauma informed practice** to consider the root causes of concern and the impact and effect on children/young people/young adults, to consider how this can be informed by our approach and form a key part of our intervention (see Practice note the 3 Hearts of Practice).

**Management oversight and Supervision**

Robust management oversight and supervision at the point of allocation and at key points of the assessment process (day 10, 25 and 35 and at sign off) is important. It makes sure that when completing the assessment that the right intervention is happening at the right time and standard to achieve the best outcomes for children, young people and adults. Reading the Management oversight at the point of allocation provides practitioners with an understanding of the purpose for undertaking the single assessment, things that need to be considered as part of our intervention with the family, key actions and the timescales that need to be achieved. Management oversight throughout particularly at day 10 and as part of supervision provide spaces to critically reflect and undertake an appreciative enquiry where hypotheses are generated, tested with the necessary support, and challenge provided to inform case direction based on a good understanding of the family. It also provides the support to get the balance right between the assessment process and quality intervention with families (see Practice note on Management Oversight and Supervision).

**Developing an Impact chronolog**y is one of the first things that we need to do as part of undertaking an assessment. Impact chronologies help us to understand the family history and are linked to our trauma informed practice. They can be used to support our understanding and analysis of the themes, patterns, timeline and the impact on the child’s life in the context of the family history and are improved when discussed with the family (see Practice note Impact Chronology). Understanding this history means that we consider any previous involvement with the child, older siblings and parents as well and collectively what this means in terms of our current involvement and the child’s timescales for change.

**Life history work** with the child, young people and their family is a way in which using their words we can explore what is happening now and what has happened. Exploring the family’s life history as part of our intervention is a powerful piece of direct work which can help and support relationship building, reflecting with them how their history some of which might be difficult and identified adverse experiences as a child and adult which might impact on their current circumstances. Undertaking this as a piece of direct work enables us to be creative using paper, felt tip pens and crayons to understand their experience. This work also supports our understanding of the impact chronologies as this work can provide us with more information about what was happening for the family at the point in time.

**Genogram/cultural genogram**: Sitting down with families to draw a three-generational genogram as part of a direct work session help us to understand their network and the stronger and weaker relationships within the family. This work forms part of our relationship-based practice and once created means that work such as, **a cultural genogram** can be developed. Using Social Ggrraaacceeesss within cultural genograms helps us to explore these relationships in more detail enabling us to understand their culture, identity, family traditions and community (see Practice Notes on Genogram and Cultural Genogram). As part of these interventions, it helps us to understand our own relationships with the family and how to work towards making these enabling and meaningful to improve the quality of the assessment.

Exploring with the family at the earliest point possible whether as a practitioner we need to hold a family meeting or consider a Family Group Conference means that we are supporting them to look at using/strengthening their own resources. This might positively influence the intervention particularly if more support is needed, the risks were to increase, or other permanence options need to be considered. Thinking about how we are supporting the family and their network to develop and sustain any safety/plan when our involvement ceases is an important part of the assessment process. (Practice Note Genograms and Cultural Genograms).

**Applying the 3 x Intervention Aids**

The **three Intervention Aids** help us to think at every stage of our assessment whether we can ‘**light the child’s lightbulb’** with an equal amount of the process (cable) and intervention (energy). Whilst undertaking the assessment we are getting this balance right whilst addressing any possible barriers such as a lack of triangulation of the information relating to the family and issues relating to the engagement of the family. Using the ‘**building blocks’** helps to think about the stages of our relationship, how we develop it and what might impact the quality of these relationships. Specific work needs to be linked to these stages such as having difficult or sensitive conversations as part of maintaining and sustaining the relationship. Finally, thinking about **our ‘scales’** means that for every bit of process we follow that an equal amount of intervention has been provided and we are doing the assessment ‘with’ instead of ‘to’ the family (see Practice note the 3 Intervention Aids).

The next part of the practice note illustrates some of the ways that using the practice framework and model can be used to inform the other parts of the single assessment relating to how the child grows and develops, what they need from parents/carers and their wider world.

**How I grow and develop:**

Developing a good understanding of the child’s voice means using the capturing their wishes, feelings, what life is like for them on a day to day basis and ensuring that they are meaningfully involved throughout the assessment process. This involves using a relationship-based approach to support them to understand our role, why we are involved and their views. Reflecting upon and using the 4 x I’s which includes ensuring that we involve, inform invest and ensure that they influence their assessment enables us to develop a better understanding of their experience and is more likely to achieve effective participation (see Practice Note Children and Young People’s Participation). Ensuring that as practitioners we reflect on how we will develop our relationships with them based upon understanding what their identity means to them in the context of their family and network is important. Understanding how their age, stage of development, experiences, culture, traditions, preferred method of communication, additional needs and attachment relationships strengthens their participation and our understanding of how they think we can support them. For Unborn children) we are their voice and need to think about the care they require to have their needs met and be safe.

Developing a holistic picture of the child or young person through their eyes, their parents, carers, other significant people in their lives and professionals provides us with an understanding of their development and experience. Engaging children and spending time with them during visits using play, drawing, painting as part of our direct work sessions enables a better understanding of their lived experience. This also involves seeing, observing, talking and engaging with the child or young person in their environment and with their family and carers to understand the quality of their attachments and relationships. For older children creative methods of engagement based on their interests, apps, games, talents and hobbies can be a way to spend time with them to develop a picture of their abilities, personalities, aspirations, as well any worries.

**What I need from people that look after me:**

When undertaking assessments, we need to show how we have supported parents and carers to understand why we are involved, our worries, their strengths and their rights within the process. Spending time with parents and carers helps us to understand their perspective and identity to develop a better understanding of their experiences by building our relationship them. Using direct work tools as part of our intervention such as cultural genograms, life history work when we visit parents and carers face to face or undertake virtual session helps us to develop a good understanding of their family, culture, traditions, identity and community. This is much more likely to enable us to explore with them the resources as well as the risks in the family and their networks. In some circumstances this might also enable us to consider the impact of experiences that might not be as ‘visible’ or might be linked to the child or young person’s wider world e.g. exploitation).

Engaging fathers and significant father figures such as step fathers is a crucial part of any assessment. Understanding their role in the child and young person’s life enables us to understand their positive contribution in the context of the worries. Work with fathers and step-fathers as part of our relationship-based approach enables us to understand how they contribute to the care of the child, their identity and the quality of the relationships (see Practice Note on Engaging Fathers). Other significant people that care for the child and young person such as family and friends that play a role in their lives also need to be considered.

In instances of parental mental ill health, substance misuse, domestic violence and parental learning difficulty, approaching the assessment as a shared activity between parents, carers children’s social workers and other professionals such as adult practitioners (when involved) is important. This enables us to draw upon parent’s views, and people in the child’s wider world to develop a better picture of the care provided whilst using a relational and trauma informed approach. Use of assessment tools such as the ‘Graded Care Profile 2’ for Neglect, ‘Domestic Abuse Risk Assessment Children’ for domestic abuse and ‘BADST Tool’ for alcohol and substance misuse, helps us to identity the nature and severity of the risks that they might be exposed to in order to develop a robust evidence-based assessment, analysis and understand the impact on the child/young person. These are all available on Tri-x and on LCS and training is available for each of the Tools through SCT Training.

Speaking to parents and carers about how we need to develop our understanding of their experience by accessing relevant information from their network as appropriate such as other family members, partner agencies such as General Practitioners, Education, Health, previous Social Workers in other authorities and in some instances the Police is important. It helps them to understand that their perspective is important whilst also ensuring that we ‘triangulate’ their information from with we have obtained from their children, family/network.

Effective partnership working with key agencies, as part of the assessment process in line with Working Together 2018 and Children Act 2004, including School, Midwives, Health Visitors/specialist health professionals and the Police helps to develop a good understanding of all the professionals who are/have been involved with the family. Where increased risks are identified, this might need to be achieved by convening a Strategy Discussion or s47 Enquiry, resulting in a multi-agency risk assessment to be undertaken to inform decisions about the child’s safety and welfare. Information that has emerged from these processes need to be discussed with the family and inform the assessment.

As part of our relationship-based practice with parents and carers taking time to build, maintain and sustain relationships also enables ‘difficult conversations’ to take place based on the information that they have shared or that has emerged as part of the assessment. This enables their views to inform the assessment, decision making and plan.

**My wider world:**

Developing genograms and cultural genograms with children, young people, young adults and their families supports a better understanding of their wider world and relationships that are important to them. This includes family members such as grandparents, aunts and uncles as well as step-parents and other connected people such as friends or professionals that provide support to the family. Cultural genograms can be used when assessing people in the wider world to determine their ability to provide support and safety for the child and young person as well as understand potential risks in the wider network.

Using Social Ggrraaacceeesss supports us to work with families to understand issues in their wider world that might impact on the care provided to their children. The exploration of this wider world enables us to discuss with them connections between, the child, young person, their parents/carers and things happening in their wider world. For example, socio-economic factors such as poverty, housing, health, discrimination and Covid-19. It enables us to explore the connections with places of importance to them such as where they were born, and the communities they have been part of or currently live which might continue to be an influencing factor.

**Analysis**

By bringing together all the information we have gathered with families, their network and partner agencies as part of the assessment process and the intervention strengthens the analysis, decision making and plan. Using Signs of Safety as the framework to support the analysis by considering the 7 domains as part of the case mapping. This involves mapping what is working well (or existing strengths), harm, danger statements, complicating factors, existing safety, safety goals and next steps as applicable.

Understanding the seriousness of the risks and any harm already suffered, the impact on the child and young person and the prognosis on their future helps us to understand what threshold is applicable to the child’s circumstances, and the type of plan or statutory intervention might be required (if needed). The analysis needs to evidence the application of the Practice Framework and model and professional judgement by research, tools and theory. This provides children, young people, their family and network with a rationale about the next steps particularly when protective action needs to be taken.

At any stage of the process, should the need for support be identified this should be put in place and should not wait until the assessment reaches a conclusion. This support needs to be based on work completed with the family to be clear about what service is needed and why, and how this intervention will help to shape and make an impact on the children/young people and young adults’ lives. Reflecting upon how you will be working with the family in your own right as a lead professional as an ‘agent change’ to make a difference for families. Creating danger statements and safety goals with families that are clear and jargon free supports children/young people and young adults and their families to understand what we are worried about, the likely impact on the child if nothing changes and what we need to see to know their child is safe to close the case. In other circumstances, although there might be no further support required, it involves working with the family to discuss their own plan and think about what they might do in the future if further issues emerge.

As our children and families are unique, it means that their experiences, resources, culture, family traditions, customs shaping the assessments completed with them will be different. Working with children and families using the Practice Framework and Model consistently supports us to reflect upon this and it means that the work that we do is more carefully shaped by interventions developed with the family. In doing so, it strengthens the quality of their assessment and the subsequent plan for support in order secure better outcomes for children and young people.

**Good Practice points**

* When undertaking assessments, applying the Practice Framework and Model will result on a holistic view of children and families’ circumstances to be developed.
* Families need to be supported to understand the reasons for our involvement and provided with information about their rights in the assessment process. This also needs to include how they can raise issues with us and also complain if they are unhappy with the quality of the service provided.
* Use the child, young person, parent and carers own words captured over several visits within the assessment and use it to inform your analysis which should be discussed with them so that they can challenge it if they don’t agree.
* In Sandwell, children or young person should have an updated assessment once every 6 months or at the point there are significant developments.
* When assessments have been completed, these need to be written using the words of children and families and shared in a format and language that enables them to understand what is happening and the rationale for the decisions being made. This makes the process of the assessment and the plan that has been developed with them transparent.

**How can I evidence this work on the child’s file when undertaking assessments?**

* Direct work sessions undertaken as part of assessment such as genograms, cultural genograms, life story work completed with the child, young person, parents, carers and their network should be uploaded onto documents with a linked case note providing an analysis of the session. This also needs to be referenced as part of the assessment.
* An updated impact chronology with an analysis of the patterns, themes included in the assessment will also evidence an understanding of the child’s lived experiences, any trauma that may impact on their lives and what this might mean in terms of our current involvement.

**Further information and reading**

* Practice notes and Animations relating to the different parts of the Practice Framework and Model including The Child’s Journey, Children and Young People’s Participation, the 3 basics Relationship based and Trauma Informed approaches can be located on the Practice Framework and Model learning Hub.
* Practice notes relating to the next stage of the process plans, updating plans and reviews are available on the Practice Framework and Model Learning Hub.
* The Practice Framework and Model Booklet, Information relating to the Child’s Journey, Participation and KSS and practice learning workshops on the Learning and Development Pages
* Subscribe/use to CC inform’, ‘Research in Practice’ to access up to date practice learning research and articles.

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