



**Team around
the family (TAF)**

West Cheshire Team Around the Family (TAF) Guidance

To be read in conjunction with the Local Safeguarding Children's Board (LSCB) Children in Need (CIN) Procedures

"In developing local and shared arrangements to identify and record the early help needed by children, young people and families, it is the provision of an early help offer, where their needs do not meet the threshold for Children's Social Care services, which will continue to matter and make the most difference to them".

A child-centred system - Professor Eileen Munro

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Context

Team Around the Family (TAF) aims to focus on interventions primarily at the partnership plus level of the continuum of need, reducing the demand on statutory social care services and delivering a more effective early help service to children and their families.

This practice guidance will assist in the process of embedding the TAF and support the awareness of thresholds; good escalation to and de-escalation from Child in Need or Child Protection plans; encourage outcome focused action plans; reduce duplicate assessments and facilitate the development of a single point of access and referral using the TAF approach.

A key component of TAF is ensuring that the voice of the child is heard and that their journey can be captured in line with Ofsted inspection frameworks for safeguarding services and for children's centres.

A copy of all the relevant TAF documentation that practitioners may need is available at: <http://ies-news.info/2016/11/29/new-home-for-taf-information/>
There is reference made to submitting TAF log forms throughout these procedures. The online TAF log forms can be found at the above web address. For practitioners using Liquid Logic eTAF, TAF log forms do not apply and they should follow eTAF user guidelines.

Please note that documentation is updated regularly. Therefore any forms used should be sourced from the link above and practitioners should not save forms for their use as these may become out of date.

1. Introduction

This practice guidance is to be used in conjunction with the Local Safeguarding Childrens Board (LSCB) Children in Need (CIN) procedures. It has been developed to help all those who work with children and their families to focus on and identify additional needs and vulnerabilities in children and the actions required to meet those needs. It underpins West Cheshire continuum of need (CoN) and response

and supports the use of a common language:

<http://cheshirewestlscb.org.uk/professionals/continuum-of-need/>

The document is based on recognised good practice and influenced by research and local experience. The procedures reflect the guidance issued in Working Together to Safeguard Children 2015. It is also underpinned by national and local guidance which includes:

- Children in Need (CIN) procedures (LSCB)
- Framework for the Assessment of Children in Need and their Families (2000)
- The Laming Report
- Ofsted Report: The Voice of the Child: Learning lessons from serious case reviews, April 2011
- The Munro Review (2010/2011)

Once the assessment information is recorded on a Team Around the Family form it then becomes a suitable tool to share with other practitioners with the consent of parent/child. This will prevent the need for children, young people and/or families to repeat their information or undergo repetitive assessments and will reduce duplicate help and/or conflicting advice being given to the family. These assessments form part of the process that sits within the continuum of need (CoN) and as such are aligned with the single assessment processes within Children's Social Care (CSC).

The TAF framework encourages practitioners to look at the needs of the whole family as a unit but you should also be aware of the Fraser guidelines (see link below) which have been widely used to help assess whether a child has the maturity to make their own decisions and to understand the implications of those decisions.

<http://www.nspcc.org.uk/preventing-abuse/child-protection-system/legal-definition-child-rights-law/gillick-competency-fraser-guidelines/>

2. The role of TAF in early help

Providing early help is more effective in promoting the welfare of children than reacting later. Early help means providing support as soon as a problem emerges, at any point in a child's life, to avoid families reaching crisis. This can impact on positive outcomes for children.

TAF is everybody's business. TAF offers professionals a consent based framework to empower and enable families to address their own issues and meet their children's needs with support from services.

It is important to remember that the welfare of the child is paramount and it is critical that their voice is heard.

3. When practitioners should complete a TAF assessment

When it is identified that a family has two or more additional needs a TAF assessment should be completed. This will ensure that a holistic assessment is completed which supports multi agency working through a clear plan and coordinated approach. When initiating a TAF it is important to check if any other assessments are in place – practitioners should not repeat/duplicate assessments unnecessarily.

4. Consent and information sharing

A TAF assessment aims to enable and support better information sharing about the needs of children. It is important that all practitioners share information lawfully.

Verbal consent should be obtained prior to a contact being made to the Integrated Access and Referral Team (i-ART). Signed consent should be secured at the earliest opportunity and a TAF assessment must not be started without written consent.

Practitioners will complete the consent form with child/parent(s) at the very beginning of the assessment process available at:

<http://ies-news.info/wp-content/uploads/2016/12/TAF-consent-form.docx>

Further information about consent is available in the [Young People and Consent Gillick Competency Guidance Notes](#).

Assessments must be undertaken with children and parents and the information recorded must be agreed in partnership with them. It is also necessary to work with children and parents to agree how information is recorded, used and who it can be shared with. For example, a decision may be made not to share information with an alleged abusive parent, where to share such information may increase the risk to the child and/or the non-abusive parent. National guidance says that we should work separately with each parent where domestic abuse prevents the abused parent from being able to speak freely and without fear of retribution.

Where domestic abuse has been disclosed the practitioner should complete a RIC (Domestic Abuse Stalking and Harassment Risk Indicator Checklist) with the abused parent and where the criteria is met, forward the RIC to the Domestic Abuse Family Safety Unit. Support for the abused parent in dealing with domestic abuse can improve that person's ability to parent and thereby support the improved wellbeing of the child. Further information about domestic abuse is available at:

<https://www.cheshirewestandchester.gov.uk/residents/crime-prevention/domestic-abuse/domestic-abuse.aspx>

TAF is a consent based model and a family may choose not to engage or withdraw their consent at any time. A professional judgement needs to be made through an assessment of risk to establish whether the children are currently at risk of significant harm or without intervention the needs of the child(ren) will escalate to that level. If risk assessment suggests this is the case the lead professional should follow their own agency's safeguarding procedures.

5. Lead professional

The lead professional is a single point of contact for the family and coordinates the delivery of actions through the review procedure. This professional is not responsible or accountable for the actions of other practitioners or their services. Each practitioner may be given a task and is accountable to their home agency for their delivery of the task. The lead professional role includes:

- communicating with the child/young person and parent(s)/carer(s) and being their main contact
- organising, chairing and documenting all review meetings including updating the TAF action plan ([using the meeting and planning forms](#))

- coordinate the activity in the action plan, for example referrals and requests for services to other agencies
- distribute copies of documents to practitioners involved keeping all activity (TAF assessments, reviews and closures) logged on the [online TAF log form](#)

6. Completing a TAF assessment

An assessment is more than just filling in the TAF assessment form. It is a process of engagement with the child, young person and their family, and with other practitioners, to assess the additional needs of a child or young person. It gives a holistic view that considers strengths as well as needs. It is important that assessments enable us to capture the journey of the child.

The TAF assessment framework has been designed to help practitioners assess needs at an early stage and then work with families, alongside other practitioners and agencies, to meet those needs. This is especially critical in cases of suspected neglect.

It is recognised that families respond better when they receive support in a timely way. It is therefore essential that practitioners avoid drift in the assessment period.

A TAF assessment should take no longer than four working weeks to be completed.

7. Next steps after completing the TAF assessment

There are two likely outcomes once all the relevant information has been gathered:

There are no worries/concerns or support can be met by a single agency (therefore no further action in terms of TAF is needed but practitioners must):

- note this on the assessment form
- Complete and submit a TAF log form to record that the assessment has been completed and no further action is required as the families unmet needs can be supported by universal agencies or a single additional agency. The log form will ask you to attach a copy of the assessment.
- Once an assessment is closed on the TAF log form, it needs to be kept on file in line with the practitioner's service/agency's record keeping policy.
- Practitioner retains original assessment form and gives the family a copy of it.

Support requires a multi-agency intervention (and therefore an integrated response is required)

- A TAF meeting is arranged, including the child or young person and parents.
- A TAF log form is completed and submitted at the point the

assessment is completed. The author of the assessment invites all identified services to the TAF meeting and sends a copy of the assessment to them so that any preparatory work can be undertaken prior to the TAF meeting.

8. TAF meetings

A TAF meeting is an effective method of multi-agency working and is a good opportunity for all the practitioners, along with the parent(s)/carer(s) and child/young person to discuss strengths, needs, issues, options for resolutions, plans for support and services and progress with these, similar to CIN meetings.

The author of the assessment will coordinate and chair the initial TAF meeting. The initial meeting should be arranged within 10 working days of the completion of the assessment. It is imperative that the child, young person and/or their parent is at the meeting. A key task of the chair of the meeting is to ensure that all those present, including the family, have an opportunity to contribute to the discussion, formulate and review the service plan.

A meeting and planning form will then need to be completed to include all discussion from the meeting and a robust S.M.A.R.T plan of support. A TAF log form is completed and submitted following the initial meeting, this will ask you to attach the meeting and planning form.

Dates of future review meetings will be agreed to ensure that the plan does not drift. Timescales for review meetings should represent the needs of the child(ren) but should not be any more than 12 weeks apart, good practice being at the six to eight week mark. The regularity of review timescales should be agreed within the first TAF meeting. Some plans may require review on a more frequent basis depending on the complexity of the case. It is important that children and families are not involved in intervention longer than necessary and the focus is kept on how actions are achieving desired outcomes to avoid any drift. A final summary must be included in the closure of a TAF. This must include information about the reasons for closing the process and any ongoing actions for the family or practitioners in universal services. It is the responsibility of the lead professional to retain a copy of the assessment and action plan for the appropriate length of time according to the policy of their individual service. It is also their responsibility to log the closure of the TAF on the TAF log form.

If the family/young person is planning a move out of the area, then every possible effort should be made to agree a new lead professional from an appropriate agency in the new area and a copy of the TAF should be sent to that person. If the move is sudden or unplanned, the closure process must still be followed.

If a family are escalated to Children's Social Care, the TAF should only close once a single assessment has been completed and the Children's Social Care are going to offer further intervention. Whilst the single assessment is being

completed, agencies should continue to offer support as per the TAF plan, however being mindful of any changes in circumstances.

9. i-ART and Integrated Early Support

I-ART is a multi-agency team who act as a single point of contact for practitioners who are concerned about a child or family with multiple and complex needs or safeguarding concerns including adults who are a victim or perpetrator of domestic abuse and require additional support. Please follow the link below for further information:

<https://www.cheshirewestandchester.gov.uk/residents/health-and-social-care/children-and-young-people/report-a-concern-about-a-child/making-a-referral.aspx>

10. TAF step down flow chart

A family may require ongoing support through TAF following involvement with Children's Social Care. The following flow chart has been developed to inform professionals of the step down process.

The social worker will have had agreement from their manager to start the process.
If Early Help & Prevention (EHP) are to lead or be part of the TAF a discussion to take place between Children's social care and EHP manager.
If partner agency to lead TAF, social worker will reach agreement with the family and the lead professional to clarify who will lead and progress the TAF.

Social worker to invite lead professional to attend a joint visit to engage the family and parents/carers and sign TAF consent.

If stepping down from single assessment:

Social Worker to identify and agree the lead professional and gain signed Taf consent.
Social worker to share single assessment with agreed Taf actions.

Taf initial (or review meeting if Taf exists prior to social care assessment) to be held within 10 working days of handover. If partner agency to lead and is a new Taf, Taf Advisor will open Taf log form. If EHP to lead follow the 'transfer to liquid logic' process.


Lead person to log TAF opened/reviewed on online system (when documentation

If stepping down from Child in Need plan:

Social worker to hold final CIN/first TAF meeting where lead person will be confirmed and signed Taf consent gained. (If not previously sought) Social worker will complete minutes of the meeting, distribute and close their involvement. If partner agency to lead and is a new Taf, Taf Advisor will open Taf log form. If EHP to lead the eTAF process is to be followed.

Taf Advisor will open the TAF log form as soon as possible with the open date as the date of handover.

Taf Advisor to complete Taf step down process.



TAF process to continue with family until all needs of the child/young person are met or needs can be managed by a single agency. TAF reviews to be held at maximum of 12 week intervals.

11. Resolution and escalation

There will always be differences of professional opinion and disagreements can arise at any stage and between any of the agencies involved. However, practitioners and agencies have a responsibility to challenge when it is believed that other agencies are failing to recognise child maltreatment and/or their response leaves children at risk of significant harm. The Resolution and Escalation Policy can be found at <http://cheshirewestlscb.org.uk/policy-and-practice/escalation-and-resolution-policy/>

This policy is to help LSCB agencies and practitioners resolve differences of opinion about decision making in relation to vulnerable children. The policy includes timescales for the stages of escalation, clarity about who to raise your concerns with at each stage, and forms for escalating cases.

12. Quality assurance

To ensure that TAF activity is robust, of a high standard, needs led, outcome focused and based on consent, management oversight is critical.

If a plan continues after six months the lead professional should discuss the family with their line manager and their line manager should record their management oversight so that decision making is clearly evidenced and auditable. This discussion should consider the following:

- should the plan end (complete risk assessment and consider whether it is appropriate to escalate to Children's Social Care or close the TAF and monitor)
- should the plan continue
- should it change because needs have changed (consider revisiting the TAF assessment or altering the interventions)
- requesting a consultation with i-ART (see section 9)

If a plan continues over 12 months, a TAF audit will be conducted by a CWaC

TAF advisor in partnership with the lead professional. They will consider if the plan is still appropriate and will highlight any next steps.

When reviewing the TAF process, the agencies involved with the family may decide that the TAF is not progressing appropriately/actions are not making an impact or the TAF is drifting. At this point the lead professional can contact their TAF Advisor for advice and support.

The lead professional's agency should ensure that they have a robust quality assurance process in place. A quality assurance tool can be found at:
<http://ies-news.info/wp-content/uploads/2016/12/Quality-Audit-Form.docx>