



LSCB Policy and Procedures
Supplementary Guidance
Protocol for multi- agency assessment of child in
need, child protection and looked after children

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1. Introduction

This multi-agency protocol sets out the way in which all agencies operating within North Lincolnshire will work together to Safeguard Children in respect of conducting assessments on children who may require support once a referral has been made into Children's Social Care.

This protocol takes account of the statutory guidance contained within Working Together to Safeguarding Children 2015.

Professionals should consider the [Helping Children and Families \(Threshold Document 2016/20\)](#) to assist them in determining whether to make a referral to children's social work services.

For professionals making a referral [Assessing Need and Providing Help](#) of the LSCB multi-agency procedures outline how a referral should be made to children's social work services, at Church Square House and contact can be made via 01724 296500/ 01724 2965555 (extended Hours).

A qualified social worker will seek to clarify with the referrer the nature of the concerns and how and why they have arisen. Within 1 working day of a referral being received a decision will be made about the type of response that is required.

This will include determining whether:

- The child requires immediate protection and urgent action is required
- The child is in need and should be assessed under section 17 of the Children Act 1989
- There is reasonable cause to suspect that the child is suffering or likely to suffer significant harm and whether enquiries must be made and the child assessed under section 47 of the Children Act 1989
- Any services are required by the child and family and what type of services and
- Any further specialist assessment is required in order to help the local authority decide what further action to take.

2. Focus on the child

The definition of child/young person used within this protocol encompasses children and young people up to their 18th birthday; it also includes unborn babies. Children should be seen and listened to and included throughout the assessment process. Their ways of communicating should be understood within the context of their family and community as well as their development stage. All assessments, decisions and service provision should regularly review the impact of the assessment process and the services provided for the child and their family so that the best outcomes for the child can be achieved. Assessments and services should be based on sound professional judgement and a clear analysis of the child's needs and the support and changes that are required to improve the circumstances and outcomes for the child.

Children should be actively involved in all parts of the assessment process. They should be empowered to participate and collaborate based upon their age and developmental stage. Consideration should be made to their diverse needs, identity and unique circumstances. Direct

work with the child and family should include observations of the relationships and interactions between the child and parent/ care givers.

National research and inspection findings point to a tendency for assessments to be defined by the parameters of an assessment procedure or format. Once a form has been completed, appropriate information gathered and the criteria for service eligibility ascertained then the assessment has been done. By contrast the assessment is a skilled, knowledgeable and analytical task. Analysis should occur through the whole assessment process-it influences whether assessments are carried out in the first place, and the decisions, however small, about how to go about them, who to involve and what information to gather. Assessment means to appraise, measure, estimate or give consideration to a situation- whilst analysis means to examine, study and break down into understandable elements.

Assessment is not an episode or event but is a process that begins from the first contact with a family. The importance of building rapport, sustaining effective relationships, being clear about professional goals and respecting the goals of the child and family is fundamental to engagement.

Parents value respect, honesty and the provision of appropriate services at the time they most need them. All assessments undertaken by Children's Services should be planned and coordinated by a qualified social worker and the purpose and outcome of the assessment should be transparent, understood and agreed by all participants. Good engagement through forming effective relationships with children and their families, promoting resilience, independence and developing their own resources prevents promoting a cycle of service dependency.

Good communication and listening skills, as well as a thorough consideration of risk and protective factors are important for evoking change and promoting better outcomes for children. The identification and evaluation of risk and protective factors in relation to the child should always underpin our work and remain at the forefront of our practice. The North Lincolnshire Risk Analysis Form (the RAF) has been established to help practitioners work through risk and protective factors using sound analysis and judgement. All assessments should take account of the child's views, wishes and feelings through discussion with the child alone or via alternative communication methods. Always consider how the circumstances and experiences are seen by the child through their eyes and what a day in their life is like.

3. Timelines and Planning for an assessment

The timeliness of an assessment is a critical element of the quality of that assessment and the outcomes for the child. The speed with which an assessment is carried out should be determined by the needs of the individual child and the nature and level of any risk of harm faced by the child. Assessments completed after a child's case has been referred into Children's Social Work Services will require professional judgments and decisions to be made by the social worker in discussion with their manager on each individual case.

A decision regarding the type of action to be taken should be made within **one working day** of the referral. Where children require immediate protection or removal from parental care this should happen as soon as possible after the referral has been received.

All assessments should be completed within a maximum time scale of **45 days** from the date of referral. Clear justification should be made for any assessments that fall outside of this time. The reasons for this should be clearly recorded by the social worker that carried out the assessment.

As noted above, the provision or commissioning of services to support the child and their family should not be delayed by the conclusion of an assessment. Assessments may need to be quick in some cases to ensure there is no delay in providing the appropriate service.

Where neglect is a factor it should be noted that outcomes could improve while services are involved and rapidly decline once the support ends. Professionals should avoid being over optimistic. Good, regular communication between the practitioners and managers involved is recommended to ensure there is a joint understanding of the changing needs of the child. This is particularly important where parental mental ill health or problematic substance misuse is a factor. In these cases, joint home visits, assessments and reflective supervision between children and adult services are recommended. Assessment, analysis, judgment and decision making should be supported by reflective supervision and/or management oversight.

The social worker is responsible for clearly informing children and families of how the assessment will be carried out and when they can expect a decision on next steps.

Assessments should be carried out in partnership with families clearly stating what they should expect from the social worker and any other professionals involved.

Planning should identify the different elements of the assessment including who should be involved. Planning meetings should be held to clarify roles and timescales as well as support and services to be provided during the assessment. All relevant agencies need to be a part of the process.

4. What to consider when planning an assessment

- What family members will be included and how will they be involved?
- Who will be seen, when, where, in what order?
- What support/ services are to be provided during the assessment?
- Any specific communication needs and how will these be met?
- Consideration of diversity, particularly relating to black and minority ethnic children and their families, disabled children and their families, children who are young carers and children involved in the criminal justice system?
- Information collection methods, tools/ questionnaires?
- Consideration of direct work and communication skills?
- Collation of sources of knowledge about the child and family from other professionals?
- How will the consent of family members be obtained?
- How will information be recorded?
- How will information be analysed?
- When will the outcomes be discussed and service planning take place?

5. The assessment process can be summarised as;

- Preparation and information gathering
- Analysing and judging information
- Decision making and intervention planning
- Intervention, service delivery and /or additional specialist assessment
- Evaluating and reviewing progress.

Assessment should be a dynamic process that responds to the changing needs or identified risks faced by the child. The impact of services to the child and family will be monitored and reviewed and where services may be delivered to a parent or carer the assessment should always keep the child at the centre and be alert to the impact of care or services are having on the child. The assessment framework (see below) is intended to provide a systematic way of analysing, understanding and recording what is happening to children and young people- both within their families and in the wider context of the community in which they live-in order to make professional judgements about them. These judgements should be challenged by managers to clarify whether the child is in need or suffering significant harm.

6. Parameters of an assessment;

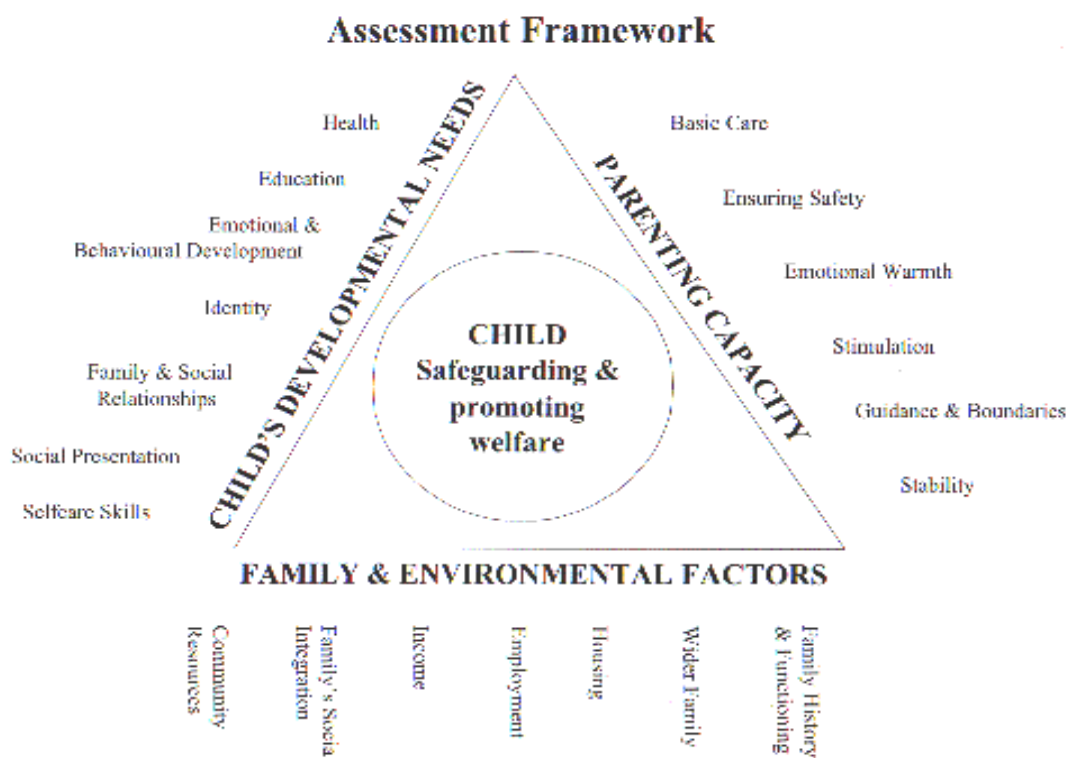
Assessments must be:

- Informed by child development
- child centred, and evidence that decisions are made in the best interest of the child(ren)
- focused on action and outcomes for children
- partnership and collaboration with children and their families is evident in the assessment
- holistic and address the needs of a child within the context of their family, environment and community
- ensure equality of opportunity
- involve and ensure the input of children and their families is evident and informs the information
- identifies and builds on strengths as well as highlighting concerns and difficulties
- Strengths based solution focused
- Grounded in identifying the risk and protective factors
- Grounded in evidence based knowledge, theory and practice

Assessments should be built upon evidence, analysis, judgement and be focused on outcomes. Research has shown that by taking a systematic approach to assessment using the framework outlined below is the best way to deliver a comprehensive, evidence based approach to assessment for all children.

The knowledge, experience and skills of the assessing worker are important factors in effective assessments along with reflective supervision. Developing ones experience in terms of formal knowledge, practice wisdom, emotional wisdom, reasoning skills and values is essential and will form a key part of training and professional development in children’s services.

7. The Assessment Framework;



The interaction between the three domains and the way they influence each other must be carefully analysed in order to gain a complete picture of a child’s unmet needs and how to identify the best response to them.

Partnership and collaboration

8. Involving Children

Assessments for some children - including young carers, children with special educational needs (who may require Education, Health and Care Plans), unborn children where there are concerns, asylum seeking children, children in hospital, disabled children, children with specific communication needs, children considered at risk of gang activity and children who are in the

youth justice system - will require particular care. Where a child has other assessments it is important that these are coordinated into a single assessment so that the child does not become lost between the different agencies involved and their different procedures.

Children have said that they need

- **Vigilance:** to have adults notice when things are troubling them
- **Understanding and action:** to understand what is happening; to be heard and understood; and to have that understanding acted upon
- **Stability:** to be able to develop an on-going stable relationship of trust with those helping them
- **Respect:** to be treated with the expectation that they are competent rather than not
- **Information and engagement:** to be informed about and involved in procedures, decisions, concerns and plans
- **Explanation:** to be informed of the outcome of assessments and decisions and reasons when their views have not met with a positive response
- **Support:** to be provided with support in their own right as well as a member of their family
- **Advocacy:** to be provided with advocacy to assist them in putting forward their views.

Every assessment should be child centred, parental issues or problems should not be allowed to eclipse the needs of the children and all decisions should be made in the child's best interests.

All assessments should acknowledge that children have rights, eg the UN Convention on the Rights of the Child (right to be safe, to have a family life, to be listened to and to have their views and wishes taken seriously). The child should always be seen alone by the social worker and if this is not possible or in their best interest the reason should be recorded. When undertaking assessments social workers and other professionals contributing to the assessment can make use of a range of questionnaire's and appropriate tools in order to assist them in working directly with children to gather and understand their views, wishes and feelings.

9. Young Carers

Young Carers need recognition and support. Their caring responsibilities may increase gradually, from a low level of "helping out around the house", which is found in many families, to a higher degree which could potentially compromise the young person's own welfare and life opportunities.

Children identified as young carers require a comprehensive assessment of their needs through an early help assessment if they are identified as having low level needs or an assessment under the auspices of the Children Act where they are identified as a child in need or a child in need of protection. In addition whenever a young carer is identified they should be offered a carers assessment under the Carers and Disabled Children Act 2000.

10. Children who have offending behaviour

Children and young people with offending behaviour are subject to the same standards of rigorous assessment and an assessment will be undertaken when the child/young person is known to the Youth Offending Service, as per statutory requirements.

11. Disabled children and young people

When undertaking an assessment of the needs of a disabled child the professional undertaking the assessment should ensure that the same principles and requirements as outlined on page 3 of this document. Additional consideration should be given to:

- The focus on the disabled child's abilities as well as the impact of the disability on their day to day lives and activities.
- How the child's disability affects their growth and physical development, emotional and mental well-being, and their ability to understand and communicate.
- Whether the child is receiving appropriate basic and specialist healthcare and treatment
- How the child's sense of self impacts on their emotional health and wellbeing
- What universal provision and extended family provision is in place in order to support the disabled child and his / her family
- Whether children and young people are supported to take appropriate risks in order to achieve greater independence skills as commensurate with their level of need and in line with their peers
- How community resources support the disabled child and family.

12. Children in Care

The same framework of assessment will be applied to children who are to be returned from care to live with their families. Care Planning Regulations 2010 outline the procedure to be followed for children returning home from care who are subject to section 20 or section 31 of the Children Act 1989.

13. Series of assessment

It is widely known that disabled children and young people are subject to numerous assessments throughout their childhood owing to the additionality and complexity of their needs. Parents and carers of disabled children consistently report that assessments are often duplicated with the same stories and information being repeated. Completion of an Early Help Assessment and a coordinated plan should contribute to a reduction in the number of assessments.

Education, Health and Care Plans should encompass and take account of any assessment completed to date when considering whether a disabled child should be supported by such a plan.

14. Involving Parents

Involving parents is essential in achieving good outcomes for children. Parents should be helped and supported to communicate and identify their goals and outcomes of the assessment. Aligning the goals of both parents and the agency/organisation is a key factor in working in partnership and evoking identified change. The assessment process should challenge parent's statements and behaviour where it is evidenced that there are inconsistencies, problems or obstacles to progress. Every effort must be made to involve parents in the assessment process, even in cases of serious chronic sexual abuse or domestic violence, however there may be exceptional circumstances that precludes the involvement of parents or carers when the safety of an adult or that of a child takes priority over participation in the assessment.

15. Agency and Professional contribution to assessment

All agencies and professionals involved with a child and family have a responsibility to contribute to an assessment. This might take the form of providing information in a timely manner and direct or joint work. The relevant professionals who can make a contribution to the child's and family's needs should be involved from the outset and throughout the process of service provision and review.

Agencies providing services to adults who are parents / carers to children must consider the impact on the child of the particular needs of the adult in question.

Agencies should contribute their specific expertise, knowledge and skills they have in particular areas of children and adult work into the assessment. They may also contribute through undertaking direct work, e.g. adult mental health services with adult carers, health visitors on early years/ child development work, substance misuse/ alcohol services on adult programmes. They may contribute by providing relevant historical information and intelligent chronologies and participating in joint supervision where appropriate.

All organisations can contribute to assessments by joint visits and undertaking specific elements of the assessment based on their professional expertise and knowledge. They may contribute at meetings to the assessment, analysis, judgment and intervention and be actively involved in reviewing service provision and effectiveness of achieving the goals and outcomes of the assessment.

Although assessment is a dynamic process it should inform a single planning process where new and emerging information is integrated and enhances the process rather than deviates into separate or multiple other assessments. Specialist assessment, such as SEN and disability assessments should take the form of additional layers of information and analysis that is integrated into the continuing assessment, to ensure that the assessed needs and actions to meet those needs remain transparent to the family and understandable to the professionals.

16. The outcome of an assessment

Every assessment should be focused on outcomes, deciding what support the child and family require. The assessing worker should work with the child and family and attempt to achieve a shared agreement on what changes are needed, aligning the goals of the agency/ agencies with the goal and understanding of the child and family. Every effort should be made to agree what the outcome (the end result looks like) and what steps can be made to bring this about.

Where particular needs are identified at any stage of the assessment, professionals should not wait until the assessment reaches a conclusion before commissioning services to support the child and

family. This will be monitored by management oversight and supervision during the 45 day period.

The outcome of an assessment can be no further action as the assessment has facilitated the family in considering their issues and identifying the strengths and capacity they have to resolve these. Some children will have a continuing need for the provision of services through section 17 of the Children Act 1989 within the child in need process to prevent impairment of health and development or maintain a reasonable standard of health and development. Some children will require the provision of services through section 47 of the Children Act 1989 within the child protection process to prevent actual or likely ongoing significant harm. Finally some children will require local authority care delivered via section 20 and section 31 of the Children Act.

17. Further sources of Information

- LSCB Multi-Agency Policies, Procedures and Guidelines www.northlincs.lscb.co.uk
- [Working Together to Safeguard Children 2015](#)
- [Care Planning, Placement and Case Review Regulations 2010](#)