

The Lancashire Continuum of Need and Thresholds Guidance





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1. Introduction and Foreword

It gives me great pleasure to introduce the new Lancashire Continuum of Need and Thresholds Guidance.

The guidance sets out the 'Levels of Need' experienced by children, young people and families in Lancashire and offers clarity and support to practitioners working with them. This guidance has been developed by partners across the county to help practitioners who have contact with children, young people and families to work together effectively to meet their needs.

The revised 'Levels of Need' offer clarity to practitioners when assessing needs working alongside a family and the refreshed 'Continuum of Need' promotes early support for families – helping families to address issues and problems as soon as they arise.

The Guidance as a whole supports and underpins the development and refresh of the Common Assessment Framework (CAF) and the development of 'Early Support' provision across Lancashire, providing a 'Total Family' approach. It highlights and supports the emphasis on both assessment and planning when working with a family and focuses on empowering families by working alongside them to build resilience.

The Lancashire Safeguarding Children's Board (LSCB) and the Lancashire Children and Young People's Trust (LCYPT) welcome the new guidance and associated processes which provide a clear and improved framework for agencies in Lancashire to work together to provide early support for families, prevent escalation of issues and ensure children are kept safe from harm.

Independent Chair of the LSCB

2. The Lancashire Common Assessment Framework (CAF)

a) Overview

The Lancashire Common Assessment Framework (CAF) is a shared assessment and planning tool for use across all children's services in Lancashire. It helps in the early identification of needs for children, young people and families. The CAF promotes a co-ordinated approach on how these needs should be met.

The CAF and Lead Professional (LP) are contributing elements for improved outcomes for children, young people and families and support the delivery of services that are integrated and focused around the needs of children and young people.

The CAF is a process that has been designed specifically to help practitioners and families assess needs at an early stage and then work with families, alongside other practitioners, to help them to meet those needs.

The CAF is a process to assist in providing integrated services and should:

 Support earlier support, by providing a method to help practitioners who come into day-to-day contact with children, young people and families, such as those providing

- ante and post-natal services, those in early years settings, youth work settings or schools and further education, to identify and meet identified needs at an early stage through the lead professional working with the family. This should lead to fewer children and young people in need of specialist assessments and support.
- Improve and build on multi-agency working, by enabling practitioners to maintain a single, overview record of the needs and progress of a child in contact with several agencies; embedding a common language of assessment, need and response through action planning; and improving communications and information sharing between practitioners;
- Reduce bureaucracy for families, by providing practitioners with a fuller overview of a child's needs and responses, thereby reducing the number of inappropriate and duplicate inter-agency requests of service, separate assessments and plans and different agencies working with the child. This means for families that they do not have to tell and re-tell their story every time they come in contact with different agencies. This approach is governed by the rule 'Tell Us Once'.

The principles underlying this approach to common assessment and planning is that it:

- Looks at the whole child, in the context of their family, not just the policy focus and statutory obligations of a particular service;
- Takes account of strengths as well as needs and understands the role of parents/ carers and a wide range of family and environmental factors on child development;
- Is simple to use and geared towards the practical delivery of support to children, young people and their family members;
- Is empowering for families, completed in partnership with children and families at all stages, where possible enabling them to take the lead, and ensuring they have a copy of all the relevant documentation;
- Shifts the emphasis of working with a family, from simply assessment, to assessment and planning – it will provide a simple and straight forward way in which a family is going to plan, progress and develop;
- Enables and encourages information held by agencies to follow the child, e.g. as they get older, change schools or move house, subject to controls to protect confidentiality and their family circumstances;
- Is a tool to support practice; is not used mechanistically or when it adds little value;

- and supports and enhances ongoing and effective communication within and between agencies and the family. Communication should not end with the completion and forwarding of the CAF, this is the start of engagement to support the family;
- The refreshed Lancashire CAF builds on and develops the pre-existing CAF; building on what was good in the national CAF but adding a new emphasis on working and planning with families and on families solving problems and issues for themselves.

CAF has been designed for use with unborn babies, new babies, children, young people and their families. CAF processes can be extended for young people beyond the age of 18 where it is appropriate to enable a young person to have a smooth transition to adult services or the young person has an identified Special Educational Need or Disability.

The CAF for children and young people is one of the contributing elements to the delivery of integrated frontline services, as outlined in the statutory guidance supporting section 10 (duty to cooperate and promote the well being) and section 11 (duty to safeguard and promote the welfare of children) of the Children Act 2004.

b) Using the CAF as a request for service engagement

The CAF is not a referral form it is an assessment of need and a joint plan of action. Where a child meets the threshold for an early assessment (CAF) and this assessment indicates that a request for service engagement to a targeted or specialist service is needed, then the CAF will contain much of the information necessary for a detailed request for service engagement. It would be appropriate therefore, for the CAF to be shared with that specialist service, subject to consent from the young person/parent/carer; it can and should be shared without this consent only if it is a

matter of risk in relation to child protection. If additional specific information that is not contained in the CAF form is necessary to back up a request for service engagement then a specialist service may ask for more information, which should be kept to a minimum, ideally a single sheet, and this should accompany the CAF.

A CAF should be undertaken based on identified unmet need; it should be needs led not service led. The decision to undertake a CAF should be based on an assessment using the Continuum of Need (CON).



c) Securing Consent with Families

It is important that services in Lancashire work alongside families. It is crucial that organisations adopt a 'working with' and not 'doing to' approach, when working with families and seek to build family resilience.

The importance of engaging children, young people and families from the outset and of securing their consent to work differently with them is crucial to ensure long term improved outcomes for children and young people.

Child protection concerns are the exception to this and in these circumstances the practitioner should respond in line with Local Safeguarding Children's Board (LSCB) guidance and procedures.

However, where there is need for intervention with a child, young person or family which is below the statutory thresholds, consent from the child/young person/parent/carer to engage with the CAF process must be obtained. This must be informed consent, ensuring that the child/young person/parent/carer is clear about the aims of the CAF process and the next stages of the process i.e. Team Around the Child (TAC)/Team Around the Family (TAF) or a Family Group Conference.

Consent must also be secured in order to record and share information with other agencies. If the child/young person/parent/ carer has consented to sharing information with all agencies this should be noted on the CAF, along with the signature of the appropriate people. Where consent has not been given or refused for information sharing with specific agencies it is good practice to note this on the CAF.

d) Completing the CAF

The CAF should always be completed jointly with the child, young person and family. The process of completing a CAF is an opportunity to highlight the strengths within the family and the support and resources they can draw on from each other and within their extended family unit (e.g. friends, neighbours, schools/pre-school and community). It also allows the practitioner to encourage access to other services where unmet needs are identified, through the action plan.

Ensuring that the family is integral to the action planning process is an important part of the process. We want to encourage families to find their own solutions to problems where possible and recognise and plan to make positive changes and life style choices, which can result in better outcomes for their children and the family as a whole.

It is important therefore to use appropriate positive and supportive language, which is clear and meaningful to the family. The assessment should be informal and the venue should meet the needs of the family and provide a place where they feel comfortable. This will also allow the practitioner the opportunity to make observations about the behaviour and interaction. The practitioner should be flexible with their approach to the CAF process and conduct it in a style that suits the child/young person/parent/carer and the context, in order for it to be successful. This might mean taking a different approach to the CAF process initially in order to achieve the same results. There are toolkits which are available to use as interactive resources and practitioners also often create their own bank of resources which can be used as a discussion point.

Where there are issues with gaining consent to agree to the CAF process the practitioner should refer to their line manager for operational guidance and support.

e) Building Resilience and Reducing Dependency

Early Support offered through the CAF promotes a way of working to ensure that the needs of children, young people and families, who are vulnerable to poor outcomes, are identified early and that those needs are met using an appropriate Assessment and Plan.

The CAF seeks to build resilience within families and aims to increase their capacity to manage challenging circumstances. The CAF should focus on reducing risk and promoting protective factors within the family.

An early support approach using the CAF offers children, young people and families more than a solution to a specific problem; it offers them the skills to deal with a similar problem if it arises in future and therefore promotes and builds resilience and reduces future dependency.

It must be recognised that the practitioner may meet resistance from the family in accepting their level of need but honest discussion is needed to ensure that a realistic view of where the family is now and where it wishes to be is agreed.

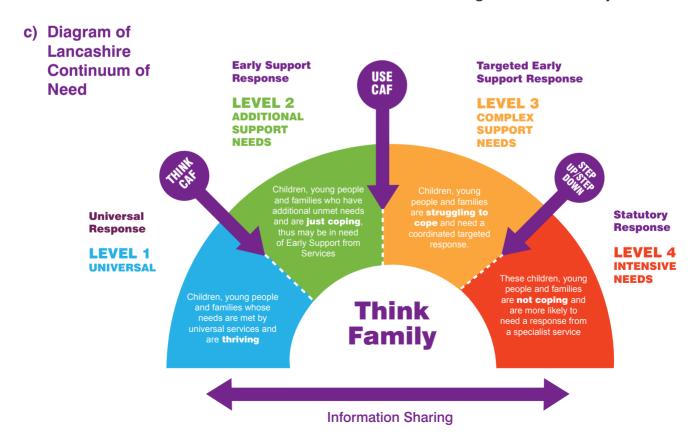


3. The Lancashire Continuum of Need (CoN)

a) Overview

The Lancashire Continuum of Need (CON) has been developed to provide help and guidance to practitioners at all levels, working in the statutory, public, voluntary and independent sectors, who work with children, young people and their families. It allows practitioners to identify levels of need through the use of indicators related to outcomes. The CON also supports practitioners in determining how their service can best support and work alongside children, young people and their families by providing guidance as to what assessment and planning procedures to follow at each level to meet or prevent the escalation of need and support de-escalation from statutory services.

b) Using the Lancashire Continuum of Need The CON is a tool which should be used to provide an equitable service response to children, young people and their families. The levels of needs are not prescriptive and allows for the practitioner judgement. Examples are provided within each dimension to aid practitioner decision-making – they are examples not definitions and should be used to support a practitioner's assessment. The list of needs is not exhaustive, does not take into account protective factors and is not age specific. There will always be issues that do not easily fit. The CON is a starting point to assist people who work with children young people and families to come to common understanding of what the family needs.



4. Thresholds and Level Descriptors

The CON indicators should not be considered in isolation and they are guides in determining levels of need. The indicators are illustrative to help practitioners have a shared understanding of the whole needs of a child/young person.

Practitioners' should be aware that this is not an exhaustive list of needs and is provided as a tool to aid practitioners in making a decision. Higher level thresholds assume progression through lower levels.



Level 1- Universal					
Children, young people and families whose needs are met by universal services and are thriving					
Response	Signposting to appropriate universal services, offer of information and advice if necessary.				
	Routine Assess	ments as required			
	Theme	Descriptor			
Examples of possible indicators (linked to headings on CAF form)	Health and Wellbeing	 CYP meeting development milestones Good hygiene Able to perform self care duties as appropriate to age Appropriately cared for when ill Good emotional health and/or well being Age appropriate social and communication skills Positive sense of self and abilities 			
	Safe From Harm	 Positive attachments Stable home environments Able to recognise unsafe activities, places, etc Secure relationships 			
Examples of possible indicators (linked to headings on CAF form)	Contribute and Engage	 CYP attending school/nursery regularly CYP who have their social, moral, spiritual and cultural needs met CYP reaching learning milestones Good relationships with peers and adults Appropriate stimulation, boundaries and guidance Good home/school link CYP appear happy, good level of emotional literacy Good level of self-esteem and confidence 			
	Aspire and Achieve	 Effective support networks Confident in social settings Experiences success and achievement Positive role models Good relationships with employer Planned progression beyond statutory education Access to learning resources Parents are able to offer stability Parents are economically active Access to appropriate family supports Suitable accommodation Reasonable income, being used appropriately to meet needs Good access to services 			

Level 2- Additional Support Needs

THINK CAF/USE CAF

Children, young people and families who have additional unmet needs and are **just coping**, thus may be in need of Early Support from Services

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Early Support Response

Needs can be met by family or existing service response
 – follow internal processes

Identified needs may require more than one support service engagement- Initiate and follow CAF Process. Identify team around the family (TAF) and Lead Professional

• Common Assessment Framework (CAF)

Descriptor

Please note that a combination of Level 2 descriptors may lead to a child having complex support needs i.e. Level 3

Examples of possible indicators (linked to headings on CAF form)

Health and Wellbeing

Theme

- Slow reaching developmental milestones (e.g. below centile chart height)
- and weight)Early/unsafe sexual activity
- · Missing/poor attendance at medical appointments
- Not registered with a GP
- Some relationship difficulties (e.g. divorce/separation, bereavement)
- Frequent illnesses and infections/minor health injuries/problems
- Unnecessarily accessing health services e.g. walk in clinics/A&E
- CYP for whom there are emotional, physical/behavioural health concerns
- Vulnerability to mental health problems due to family history or circumstances
- At risk of self harm
- Delayed speech or language/poor concentration
- Starting to experiment with substances/drugs
- · Insecurities about identity
- Clothing needs/no/inappropriate school uniform
- · Poor development of self care skills
- · Parents struggling to address own emotional needs
- Poor home routines
- · Families with poor hygiene
- CYP who appear hungry in school
- · CYP at risk of/showing signs of an eating disorders
- · Pregnant age 16 years or under

Examples of possible indicators (linked to headings on CAF form)	Safe From Harm	 Families subject to discrimination/harassment Change in family circumstances Very young parents Parent(s) who are absent Inappropriate childcare Basic care is not consistent Wider family and friends may engage in unsafe activities At risk of eviction through non payment of rent/utilities CYP beginning to misuse substances Lack of evidence of attachment/bonding CYP at risk of entering the Criminal Justice System – engaging in low level offending or anti social behaviour. CYP who have started going missing from home CYP involved in contact/residence disputes Families where concerns are beginning to emerge about domestic abuse Families where concerns are beginning to emerge about substance misuse Parents who are care leavers
	Contribute and Engage	 Young carers Lack of stimulation, boundaries or guidance Some difficulties in building/sustaining relationships with peers and adults Low/ threatened self-esteem and confidence Limited access to age appropriate leisure facilities and/or quality education including nursery Low expectations from community, school and parents/carers CYP presenting challenging behaviour in school CYP refusing to go to school Bullied or bullying behaviour Lack of positive role models Inappropriate responses and actions Find managing change difficult Does not always understand how actions impact on others Sometimes engages in low level offending or anti social behaviour CYP presenting increasing problems where parents are finding it difficult to manage Conflicts within the community Family has recently moved from out of/into the area CYP from migrant families whose first language isn't English CYP is withdrawing from peers and/or parents CYP is disengaging with family, school and peers CYP spends lot of time alone
	Aspire and Achieve	 Attitudes are affecting their ability to achieve economic well being Fixed term exclusion CYP who missed important education appointments Below educational levels/not meeting learning milestones CYP may require a differentiated approach to education, additional to/different from their peers Irregular attendance and CYP starting to have significant unauthorised absence from school/nursery At risk of making ill informed/inappropriate progression decisions Not settled in employment, education or training post 16 Not in education, employment or training (NEET)- less than 6 weeks Not completing education/college plan Has isolated or unsupported carer High number of children or more than two under 5 Low income may affect wider family unit Periods of unemployment may affect wider family unit Inadequate poor housing/home conditions due to overcrowding, lack of heating or structure Young Person living alone

Level 3- Complex Support Needs

USE CAF

Children, young people and families are **struggling to cope** and need a coordinated targeted response. They are experiencing sustained and persistent problems that it has not been possible to resolve at the previous levels.

Response

- Child/Family will have CAF in place;
- · May be a Child with a Disability who is in Need;
- There may be a YOT assessment in place (FW ASSET)

There are clear risks identified in relation to the child/young person's welfare which require a multi-agency co-coordinated response and there is a need to promote the child/young person's welfare. Where children, young people and their parents and carers are already receiving support under the CAF, but whose circumstances have continued to deteriorate.

- Common Assessment Framework (CAF);
- MASH:
- Final Warning ASSET;
- May meet thresholds for an assessment and/or involvement from the inclusion Disability Support Service.

Please note that a combination of Level 2 and 3 descriptors may lead to a child having complex support needs.

Health issues will have varying grades of severity and anything listed in lower levels if serious enough or a combination of enough factors will escalate the health issues into this level.

Examples of possible indicators (linked to headings on CAF form)

Health and Wellbeing

Theme

- Descriptor
- Family relationship difficulties (e.g. hostile, divorce/separation, bereavement)
- · Carers with chronic ill health or terminal illness
- Problematic diet at risk of obesity or malnourishment (failure to thrive)
- · Eating disorders
- Slow in reaching developmental milestones, including poor or delayed speech
- Refusal to register with GP
- Non attendance at health appointments
- Deteriorating mental health
- · Health and wellbeing concerns not being met
- Very frequent significant illnesses and infections/minor health injuries/ problems
- Frequently and unnecessarily accessing health services e.g. walk in clinics/ A&E
- CYP for whom there are emotional, physical/behavioural health concerns
- · Poor emotional health and/or well being
- Early signs of self harming behaviour
- Delayed speech or language/poor concentration
- Escalating experimentation with Substances/drugs/alcohol
- Identity issues impacting on emotional health and well being
- Parents/carers with mental health issues impacting on ability to parent
- · No home routine
- · Hygiene and self care needs struggling to be met
- Eating disorders impacting on development and health
- · Pregnant age 16 years or under
- Complex or multiple health issues being met via a variety of health professionals
- · Inability of parents to be warm and affectionate

Examples of possible indicators (linked to headings on CAF form)	Safe From Harm	 Significant insecurities about identity Exposure to problematic substance misuse/experimenting with substances. CYP entered the Criminal Justice System at pre-conviction stage e.g has received an Out of Court Disposal Increasing risk of vulnerability to sexual activity/teenage pregnancy. Difficulty coping with anger, frustration and upset. At imminent risk of eviction through non-payment of rent/utilities CYP who are repeatedly missing from home CYP beyond parenting control Families where there are concerns about Domestic Abuse
	Contribute and Engage	 Disruptive/challenging behaviour by parent or child linked to poor attachment Poor stimulation, boundaries or guidance Irregular attendance and CYP starting to have significant unauthorised absence from school/nursery Starting to offend/reoffend
	Aspire and Achieve	 Challenging and disruptive behaviour impacting on daily life, achievements and relationships. Low income/periods of unemployment affects significantly wider family unit Not in education, employment or training (NEET)- more than 6 weeks Will require a differentiated approach to education, additional to/different from their peers.

Level 4a) – Intensive Needs

These children, young people and families are **not coping** and are more likely to need a response from a specialist service

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Specialist Response

Child In Need

If you suspect a child is suffering or at risk of suffering significant harm, self harm, and/or at high or very high risk of harm to others, follow child protection procedures.

- Single Assessment- Section 17;
- ASSET;
- If a child/young person has significant educational needs they may have involvement from Inclusion Disability Support Service / Have a Statement of Special Educational Needs/or Education, Health and Care Plan.

Examples of possible indicators (linked to headings on CAF form)	Health and Wellbeing	 Substance misuse which has chronic health implications for the child and is detrimental to their development. Mental Health/severe bouts of depression/self harm/Threats of suicide. Dental/Optical concerns not being met. Risky sexual activity (child/young person) Complex Medical Needs and/or Disability All areas of life affected by problematic substance misuse Acute mental health problems (suicidal, severe depression, self harming) No sense of identity/ CYP self image is distorted Severe child obesity or malnourishment (failure to thrive) Developmental milestones unlikely to be met Non-attendance at essential medical appointments Basic care needs are rarely being met Serious lack of stability and routine, appropriate stimulation, boundaries and guidance Inability of parents to be warm and affectionate to children No positive relationships Notification for children who are living in potential private fostering arrangements.
	Safe From Harm	 Challenging/disruptive behaviour putting others in danger. Regularly involved in criminal/ anti-social behaviour. Inadequate supervision Inappropriate care arrangements At risk of sexual exploitation Risky sexual activity(child/young person) Sexually active under 13 years Parental refusal to engage over concerns Parents overly punitive Young/inexperienced parents with no support Repeated incidents of domestic abuse having impact on children Unsuitable and unsafe housing Parents have significant mental health needs impacting on their parenting ability Parents/ carers have significant Learning Disability which may be impacting on their parenting. Privately fostered children
	Contribute and Engage	 Significant impact on not engaging with speech or language support Subject to frequent harassment and hostility Extreme financial difficulties preventing CYP basic needs being met Out of control in the community Prosecution for offences resulting in court orders
	Aspire and Achieve	 Repeated permanent school exclusion School exclusion with other risk factors Denied access to stimulation Will require specialist educational provision/resources either within mainstream/ special school.

Level 4b) - Intensive Needs- Child in Need of Protection

Children, young people and families who are **not coping** and are in need of protection requiring intensive statutory intervention. They are children and young people who may be suffering or likely to suffer significant harm.

Response

Specialist Response

Child in Need of Protection

Or they are a Child In Need with a disability where the Local Authority has a duty to intervene.

If you suspect a child is suffering or at risk of suffering significant harm, self harm, and/or at high or very high risk of harm to others, follow child protection procedures.

- Single Assessment- Section 47;
- ASSET:
- If CYP has significant educational needs they may have involvement from Inclusion Disability Support Service/have a Statement of Special Educational Needs/or Education, Health and Care Plan.

Examples of possible indicators (linked to headings on CAF form)

Health and Wellbeing

- Substance misuse which has chronic health implications for the child and is detrimental to their development.
- Mental Health/severe bouts of depression/self harm/ Threats of suicide.
- Life threatening and severe chronic health problems for which appropriate treatment is not being sought.
- Regularly unfed/signs of malnutrition evident.
- Faltering growth
- Children and young people whose parents fabricate or induce illness resulting in unnecessary medical intervention
- · Complete rejection by parents
- · Suspected non accidental injury
- · Refusing medical care endangering own life
- Children and young people whose parents fabricate or induce illness resulting in unnecessary medical intervention

Examples of possible indicators (linked to headings on CAF form)	Safe From Harm	 Evidence of risk of sexual exploitation/abuse. Dysfunctional attachment between parent of child leading to significant harm. Challenging/disruptive behaviour putting self/ others in danger. Involved in sexual exploitation Suffering or at risk of suffering physical, emotional or sexual abuse Children whose basic needs are persistently neglected Deliberate self harm CYP assessed as high risk either to themselves or others as a result of their offending behaviour Regularly involved in anti-social and criminal activities Poor abusive relationship with sibling/ parental relationships Child is left to care for themselves although they are not able Parents may have abandoned child Person identified as posing a risk to children living in the home Children who disappear or are missing from home regularly/for a long period Children subject to CP Plan Children subject to CP Plan Child previously removed from parents Destructive involvement from extended family Family has experienced serious domestic violence Serious substance misuse Child/Young Person/Family Member Dangerous house or accommodation which places child in danger Family breakdown Children who abuse other children Children at risk of forced marriage Victim or witness of a crime Parents/ carers have significant learning disability which impacts on their parenting ability.
	Contribute and Engage	 Significant impact on not engaging with speech or language support Those in need of intensive support- individualised packages because of extreme isolation Child subject to emotional abuse with no self- esteem or sense of self worth.
	Aspire and Achieve	 Denied access to stimulation School exclusion with other risk factors Prosecution for offences resulting in court orders Subject to proceedings in family courts Young person is unable to cope with everyday life (including employment) Out of control in the community Young person living alone and not coping Chaotic family life Homeless and not eligible for temporary housing Family not entitled to benefits with no means of other support Inadequate poor housing Extreme financial difficulties (debt) not allowing needs to be met Chronically socially excluded/extreme isolation Sexual exploitation associated to financial reasons

Level 4c) – Intensive Needs- Children and Young People Looked After by the Local Authority

These children and families require a statutory specialist service. They are children who are in or have been looked after by the Local Authority

Response	Specialist Response			
	Child is Looked After by the Local Authority			
	May be a Child In Need with a disability where the Local Authority has a duty to intervene.			
	Please note- A child or young person is looked after by the local authority following appropriate Statutory Assessment/Care Proceedings. Request for service engagements cannot be made into this level for children/young people with accommodation issues.			
	tion Plan; gnificant educational needs they may have involvement from ability Support Service / have a Statement of Special Educational ducation, Health and Care Plan.			
Examples of possible indicators (linked to headings on CAF form)	Health and Wellbeing	 Meets criteria for secure accommodation Unaccompanied asylum seekers who require accommodation Full time accommodation for young person with complex Special Educational Needs and/or Disability/Complex Health Needs Parents are deceased and there are no family/friends options Mental Health/severe bouts of depression/self harm/Threats of suicide 		
Examples of possible indicators (linked to headings on CAF form)	Safe From Harm	 Child whose welfare can only be safeguarded through provision of accommodation outside of the family home 16/17 year old young people presenting as homeless. Unaccompanied minors Child has been abandoned and there are no family/friends options Child is consistently behaving in a way that places themselves or others at serious risk. Child remanded to local authority care or remanded to secure children's unit by the court Parents are in prison and there are no family/friend options 		
	Contribute and Engage	Eligible & relevant care leavers		

5. Acknowledgements

Thank you to colleagues and partners who have contributed to the development of the Lancashire Continuum of need and Thresholds Guidance.

Special thanks to West Sussex County Council for their kind permission to utilise their Continuum of Need to assist the Lancashire Developments.



6. Glossary

A&E Accident and Emergency unit within a hospital or clinical setting

Assessment The process of gathering and interpreting the information needed to decide what action to take to

help meet the child's (or their parent or carer) needs. In many cases, it is simply a conversation with

the child or young person and/or their parent and carer.

CAF Common Assessment Framework- An Assessment and Planning Tool

CIN Child In Need

CLA Children Looked After by the Local Authority

CON Continuum of Need CP Child Protection

CYP Children and Young People

Data
Protection Act

All agencies and practitioners operating the CAF must comply with the Data Protection Act (DPA) 1998. The Act applies irrespective of whether common assessments are held on IT or paper systems. It applies to all processing of assessment information, including collection, use, disclosure and destruction.

To meet the requirements of the DPA, agencies who are processing assessment information ("data controllers") must:

- notify the Information Commissioner of the purposes for which they are processing personal data. Their notification will appear on the Commissioners website; and
- comply with the data protection principles. The key principles for the purposes of this guidance are that the data must be:
 - o fairly and lawfully processed
 - o processed only for specified, lawful and compatible purposes
 - o adequate, relevant and not excessive
 - o accurate and where necessary kept up to date
 - o kept for no longer than necessary
 - o shown to the individual when they request it ("subject access")
 - o kept secure

In undertaking these responsibilities, agencies should bear in mind the likelihood that:

 they will be processing information about parents and carers as well as children or young people; and

some of the information is likely to be sensitive and therefore subject to more stringent control. To meet DPA requirements, the practitioner undertaking the assessment should always explain to the child or family what the

Date of Birth D.O.B

ECAF Electronic Common Assessment Framework

EHWB Emotional Health and Well Being

Family Group Conference **FGC**

Final Warning ASSET- used by YOT **FW ASSET**

Gillick For information on Gillick Competency please see: http://www.nspcc.org.uk/inform/research/

Competency questions/gillick wda61289.html

GP General Practitioner

IDSS Inclusion Disability Support Service

The Lead Professional (LP) is someone who takes the lead to co-ordinate provision and be a single Lead **Professional**

point of contact for a child/young person and their family, when a range of services are involved

and an integrated response is required.

LSCB Lancashire Safeguarding Children Board

MFH Missing from Home

NEET Not in Education, Employment or Training

No Further Action **NFA**

Pupil Attendance Support Team **PAST**

Section 17 **S17** Section 47 **S47**

SEND Special Educational Needs or Disability

Speech and Language Therapy **SLT**

Team Around the Family **TAF YOT** Youth Offending Team







Lancashire Children and Young People's Trust