

The Role of Partners in Child and Family Assessments and Plans: A Shared Responsibility

1 Sharing information

- Sharing information helps us to build a fuller picture of what is happening in a child and family's life, as no single agency will know the full story
 - All practitioners who know the child and family should be involved in the child and family assessment. This includes practitioners from children's and adult services, including specialist services
 - Practitioner's views may be different to what the child and family share – any difference of opinion should be explored and analysed so that everyone's views are considered
 - Children and families are the experts in their own lives however practitioners may hold important information that parents/carers or children don't feel able to share, e.g. when there are child protection concerns
 - Practitioners should provide evidence to support their worries based on:
 1. What the worrying behaviour is
 2. How often the worrying behaviour is happening
 3. Over what timeframe it happens
 4. How serious the worrying behaviour is
 5. The impact on the child.
 - Practitioners should provide evidence of any existing strengths and safety based on:
 1. What support they are providing that already helps to reduce the worries or meet the child/young person's needs
 2. What everyday actions they are taking to make life better for the child/young person or keep them safe
 3. What difference this support is making to the child/young person
- During the assessment, if a referral to a support service is needed then we do this in a timely way so that the child/young person or their parents/carers aren't left waiting for support

2 Involvement in meetings

- Practitioners involved in the child and family's life should be invited to and attend any review meetings such as TAFs, Core Groups, Care Team Meetings and Conferences.
- If a practitioner is unable to attend, then we always share information with the family and the lead practitioner beforehand, so they are prepared
- This allows relevant information to be shared in a timely way and for practitioners to contribute to the child's plan
- All practitioners should be strengths-based and solution focused so that the meeting is positive and purposeful

3 Supporting the lead

- Practitioners who already have good relationships with the child or their parents/carers can help the lead practitioner by:
- Helping to gather the child or parent/carers views about the worries, what helps and what else they think could help
 - Chairing meetings or taking minutes
 - Sharing information about important people in the wider family network
 - Helping the lead practitioner build a relationship with the child and family, e.g. if there are trust issues or cultural differences

4 Building safety

- Safety is the action that someone takes to keep the child/young person safe when risk or danger is present
- We build safety by having a network of family and practitioners around the child and their parents/carers
- The network's job is to notice the signs when things are getting difficult or risky and step in to help
- Safety is not a one off – we need to be able to demonstrate that the network's actions are keeping the child safe over time

Useful links

- [Multi-agency procedure: Assessments](#)
- [Multi-agency procedure: Child Protection Conferences](#)
- [How we Practice in Durham Fifth Edition \(Children's Social Care\) Information Sharing Procedure](#)
- [Managing Professional Differences and Mutual Challenge](#)

5 Supporting the plan

- The plan is created with the child/young person, their family and practitioners so we are 'working with' rather than 'doing to'
- Practitioners from children's and adult services should have active roles in the child's plan, such as providing direct support or updates on how the plan is progressing
- The support offered should be holistic, address the worries and ensure the child's needs are met
- Specialist practitioners should contribute specific information to inform the assessment and plan
- Practitioners should raise concerns if the child's needs aren't being met or if the risks increase
- When practitioners get stuck, we should go back to exploring strengths as this helps to build relationships and identify solutions

6 A note on language...

- All practitioners should use language that is kind and compassionate – remember that a child can access their files at any time
- This means we speak and write about children and families in the same way we would want someone to write about our own child
- We talk and write about the worries/harm using straightforward, jargon free language that the child and family can understand. This means describing behaviour and its impact rather than using labels
- We talk and write about strengths and safety in as much detail as the worries, so we build on what is already working to inform the plan