



Coordinating and delivering integrated services for children and young people

The Team Around The Child (TAC) and the Lead Professional

A guide for managers





Contents

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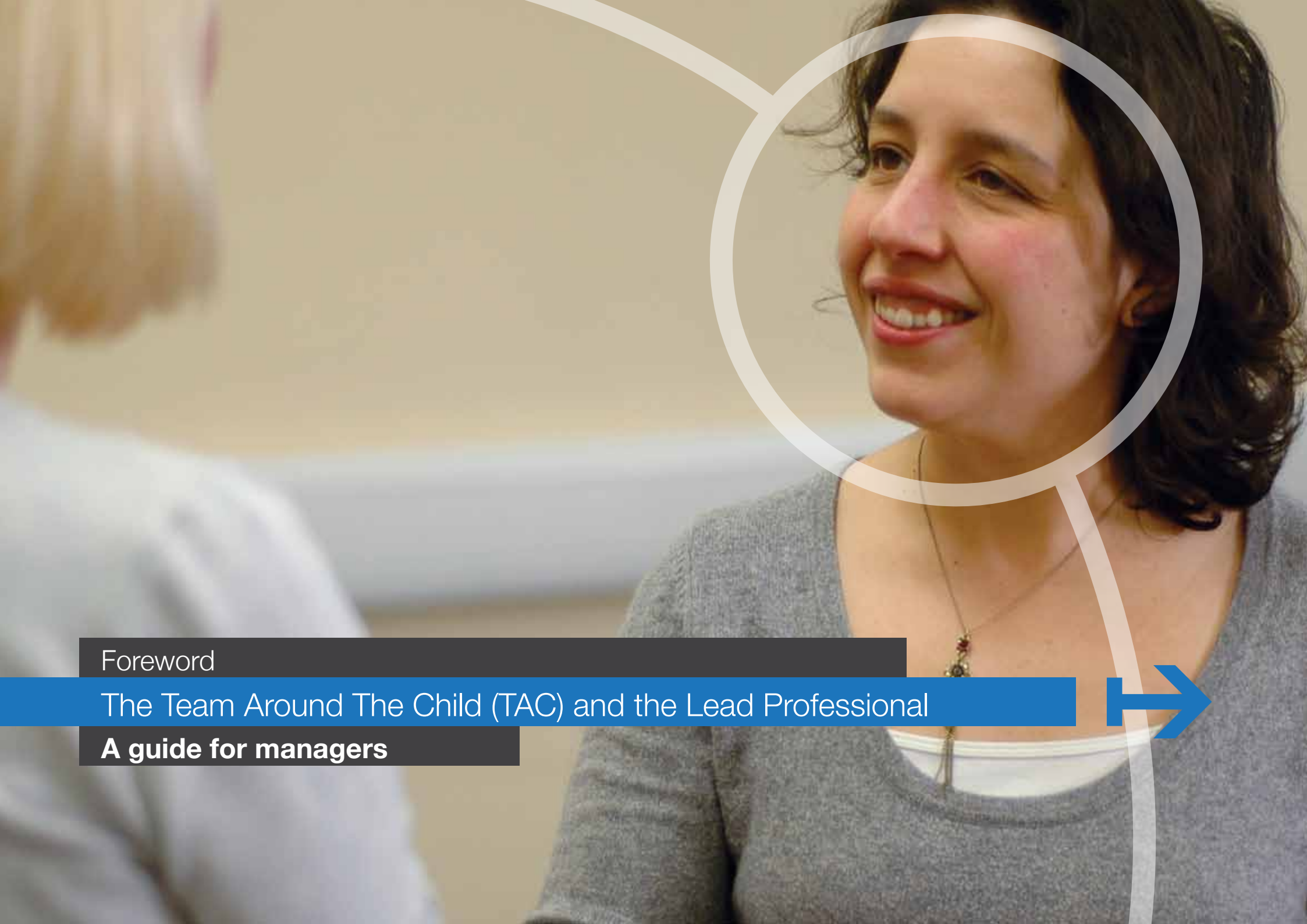
A guide for managers





Contents

Foreword	5		
Executive summary: the lead professional at a glance	8		
01 Background	10	04 Role and responsibilities of managers	40
The status of this guidance	11	Principles for successful implementation	41
The policy context	12	A. Building commitment and ownership	41
Resources and implementation	18	B. Developing structures for service delivery	42
Budget holding lead professional	20	C. Clarifying lines of accountability	43
		D. Developing a robust management framework and infrastructure	45
02 The lead professional and integrated working	22	E. Developing support structures for the lead professional	45
Information sharing	24	Training	47
Effective communication	24	Line management and supervision	48
Multi-agency integrated support	26	Capacity and workload	50
		Administrative support	51
03 The Team Around the Child and lead professional	28	05 Annex A: Every Child Matters outcomes and aims	53
Team Around the Child	29	Annex B: The lead professional for children and young people with additional needs	54
The functions of the lead professional	30	Annex C: The lead professional for children and young people with complex needs	60
Core tasks	31	Annex D: Examples of who delivers the lead professional functions in complex cases	66
Who can be a lead professional?	31	Annex E: The legislative framework for children with complex needs	68
Knowledge and skills of the lead professional	32		
Developing a lead professional model	37	Resources	81
		Key	
		Case study	
		Hints and tips	

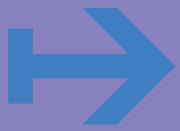


Foreword

The Team Around The Child (TAC) and the Lead Professional

A guide for managers





Foreword

On 1 October 2006, the Children's Workforce Development Council (CWDC) took over responsibility from the Department for Children, Schools and Families (DCSF) (previously the Department for Education and Skills DfES) for the implementation of the toolkits and guidance which support the implementation of integrated working.

They cover:

- information sharing
- the Common Assessment Framework (CAF)
- role of the lead professional
- multi-agency working

The policy for integrated working remains with the DCSF.

This guidance replaces *The lead professional: managers' guide* originally published by the DfES in 2006 and reprinted in September 2007. It remains non-statutory guidance. The new guidance has been updated and re-titled in order to reflect policy developments and include revisions identified in consultation with practitioners and managers across the children and young people's workforce. It also seeks to link together the processes and tools mentioned above, to show how collaboratively they provide a package of support to help practitioners and managers implement integrated working in their practice.

This publication *The Team Around the Child (TAC) and the lead professional: Co-ordinating and delivering integrated services for children and young people* provides guidance for managers on the lead professional functions and the team around the child. A separate guide is available for practitioners.

Two other relevant publications are *Early identification, assessment of needs and intervention* and *The common assessment framework for children and young people*. These provide guidance for practitioners and managers on the CAF framework and CAF form.

A further publication *Information Sharing: Guidance for Practitioners and Managers* is also available providing guidance to help practitioners work together more effectively to meet children and young people's needs through sharing information legally and professionally.

All guidance materials can be found on the CWDC website www.cwdcouncil.org.uk and on the Every Child Matters website www.dcsf.gov.uk/ecm

Any enquiries relating to this document should be directed to integratedworking@cwdcouncil.org.uk



Foreword

Note on terms used in this guidance

Children and young people with additional needs

Children, young people and families experience a range of needs at different times in their lives. However, while all children and young people require access to high-quality universal services, some of them also benefit from targeted support to address additional needs which may relate to education, health, social welfare or other areas.

An estimated 20 per cent to 30 per cent of children and young people have additional needs at some point in their lives. This could be for a limited period, or on a longer-term basis. It is this group for whom targeted support within universal settings will be most appropriate. The needs of children and young people with additional needs will, in many cases, be cross-cutting and might be associated with:

- disruptive or anti-social behaviour
- overt parental conflict or lack of parental support/boundaries
- involvement in, or risk of, offending
- poor attendance or exclusion from school
- experiencing bullying
- special educational needs (SEN)
- disabilities
- disengagement from education, training or employment post-16
- poor nutrition and/or inadequate clothing
- ill health
- substance misuse
- anxiety or depression
- housing issues
- experiencing domestic violence
- teenage pregnancy and parenthood (including the risk of pregnancy and early parenthood as well as actual pregnancies and parenthood among young people)
- young carers who exhibit additional needs which are as a direct result of their caring responsibilities, eg. truancy/lateness, ill health, housing issues

Children and young people with complex needs

Of those children and young people with additional needs, a small proportion has more significant or complex needs which meet the threshold for statutory involvement.

These are:

- children who are the subject of a child protection plan
- looked-after children
- care leavers
- children and young people for whom adoption is the plan
- children and young people with severe and complex special educational needs
- children and young people with complex disabilities or complex health needs
- children diagnosed with significant mental health problems
- young offenders involved with youth justice services (community and custodial)



Children and young people

The terms 'child or young person' and 'children or young people' are used throughout this document to refer to unborn babies, infants, children and young people aged 0 to 19.

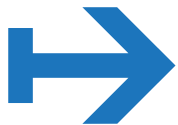
The CAF is generally used with children and young people up to the age of 18, but its use can be extended beyond 18 where appropriate to enable the young person to have a smooth transition to adult services. In the case of the Connexions service, the CAF can be used with young people up to the age of 19, and up to the age of 24 where a young person has a learning difficulty or disability.

Parents and carers

The terms 'parent' or 'carer' refer to mothers, fathers, carers and other adults with responsibility for caring for a child or young person.

For more information on parental responsibility

GO TO: www.direct.gov.uk/en/parents/parentsrights/DG_4002954



Executive summary: the lead professional at a glance

Policy overview

Status of this initiative

The lead professional contributes to the delivery of integrated frontline services to children, young people and families. This is outlined in the statutory guidance supporting section 10 (inter-agency co-operation) and section 11 (safeguarding and promoting the welfare of children) of the *Children Act 2004*. All local authorities and relevant partners have to take account of this guidance. If they decide to depart from it, they must have clear reasons for doing so.

Target group

Children and young people with a range of additional needs, including complex needs, requiring integrated support from more than one practitioner.

Integrated working

In delivering services to meet the needs identified for a child or young person where more than one agency is involved, one of the practitioners takes a lead role to

ensure that meetings of all the practitioners concerned are convened, and services are delivered that are integrated, coherent and achieving intended outcomes. This practitioner is called the lead professional and should be supported by a TAC. This team is made up of professionals from across the children and young people's workforce convened together to meet the needs of the child or young person. The lead professional is not responsible for delivering all of the services needed by the child or young person.

Key functions

The lead professional role has three core functions which can be carried out by a range of practitioners from across the children and young people's workforce:

- act as a single point of contact for the child, young person or family
- co-ordinate the delivery of the actions agreed
- reduce overlap and inconsistency in the services received

A lead professional is accountable to their home agency for their delivery of the lead professional functions. They are not responsible or accountable for the actions of other practitioners or services.

Who will do it?

Many practitioners in the children and young people's workforce can be a lead professional at certain times for some of their cases. This includes practitioners within the core children and young people's workforce (people who work or volunteer with children, young people and their families, or are responsible for their outcomes all the time). It also includes those in the wider children and young people's workforce (people who work or volunteer with children, young people and/or their families, part of the time, or are responsible for their outcomes as part of their jobs).



Issues for strategic managers

Build commitment and ownership in the workforce

The lead professional and TAC need to be owned by all practitioners in the children and young people's workforce. Managers need to ensure that all partners are aware of the lead professional role, and that they have considered who will take on the functions in their organisation.

Develop structures for service delivery

Models for delivering early intervention support include a TAC; support via a multi-agency panel; or support via a multi-agency team. It is likely that local areas will have more than one model in place in accordance with local needs and available infrastructure.

Clarify accountability lines

The line of accountability is from each practitioner through their line managers to the Director of Children's Services (DCS). The lead professional is accountable to their own line manager for the delivery of the lead professional functions, but not responsible or accountable for the actions of other practitioners or services.

Develop management framework

Management will need to marshal and deploy resources, set criteria for resolving conflicts or disputes, establish information sharing governance frameworks, provide strategic direction on challenging issues such as working across local authority/ Children's Trust boundaries, ensure close links and open channels of communication between different service managers, develop joint training and development, and develop structures to support lead professionals.

Develop support structures

Helpful structures to support lead professionals include:

- a training programme
- appropriate line management and supervision arrangements (including infrastructure to support the lead professional)
- access to other lead professionals for support and exchange of good practice
- planning around capacity and workload
- administrative support



Background

The Team Around The Child (TAC) and the Lead Professional

A guide for managers



01



Background

1.1 This guidance is aimed at strategic and operational managers across all children's services who have responsibility for implementing a lead professional model of working. There are three interdependent elements of The Every Child Matters: Change for Children programme:

i. The Common Assessment Framework (CAF)

A framework to help practitioners work with children, young people and families to assess children and young people's additional needs for earlier and more effective services, develop a common understanding of those needs and how to work together to meet them.

ii. The lead professional

The person responsible for co-ordinating the actions identified in the assessment process; a single point of contact for children and young people with additional needs, supported by more than one practitioner within a TAC¹.

iii. Information sharing

Helping practitioners work together more effectively to meet children and young people's needs through sharing information legally and professionally.

The status of this guidance

1.2 DCS's working in partnership with local agencies are responsible for implementing these developments, as part of their Children's Trust arrangements under sections 10 and 11 of the *Children Act 2004*. The statutory guidance accompanying sections 10 and 11 sets out the government's expectations that the CAF, the lead professional and information sharing are key aspects of delivering better services to children and young people. This suite of guidance materials provides information to help those organisations covered by sections 10 and 11 to carry out their planning and implementation duties.

1.3 DCS's are expected to take the lead in agreeing with their partners how to operate the CAF, introduce a lead professional model of working, and introduce information sharing arrangements as part of the development of Children's Trusts. Further legislation is expected in 2009 to strengthen the remit of Children's Trusts and to give them a statutory duty and accountability for the children and young people within their area.

¹ Sometimes called team around the young person (TAYP).



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The policy context

1.4 The government is committed to improving outcomes for all children and young people. The policy framework underpinning this includes ECM, *Youth Matters* (2005), the *Children's Plan* (2007) and the *2020 Children and Young People's Workforce Strategy* (2008). All are concerned with improving the lives of all children and young people so that they can all achieve the following five outcomes:

- be healthy
- stay safe
- enjoy and achieve
- make a positive contribution
- achieve economic well-being

1.5 In addition, *The National Service Framework for Children, Young People and Maternity Services* (2004) sets standards in health and social care for improving service delivery. This is particularly around:

- health and well-being
- delivering child-centred services
- safeguarding and promoting welfare
- supporting those who are disabled or who have complex health needs
- promoting mental health and psychological well-being

1.6 In 2007, the government published the *Children's Plan* which sets out a series of ambitions for all areas of children's lives including early years foundation, levels of literacy and numeracy, GCSEs, A levels, child poverty, health and youth offending. *The Children's Plan: One Year On* (2008) sets out progress so far and the next steps needed to make a reality of those ambitions. The 'two year on' paper will be available from December 2009.

1.7 This is reinforced by policy initiatives for schools and families which support the government's ambition to make England the best country in the world for children and young people to grow up in.

Centrally, this includes:

- *21st Century Schools: A World-Class Education for Every Child* (2008) sets out the ambition laid out in the *Children's Plan*, that 21st century schools will be hubs for the community, providing access to a range of services for children, young people and families. These might include health, family support, adult learning and leisure activities. This will mean that the entire school system and individual schools will need to look beyond traditional boundaries, be outward facing and work in close partnership with young people, parents, children centres, other schools, colleges, universities and with other children's services.

- *Think Family: Improving the Life Chances of Families at Risk* (2008) sets out a vision for a local system that improves the life chances of families at risk and helps to break the cycle of disadvantage. The report outlines the key characteristics of a system that 'thinks family' at all levels, from governance to the frontline. Following publication, work on families at risk is now being taken forward by the DCSF. The Family Pathfinder programme was launched in May 2008 and will develop the 'Think Family' approach championed by the Task Force. 15 local areas will test innovative ways of supporting vulnerable families. The national roll-out of 'Think Family' also promotes the use of the CAF with a strong emphasis on section 3 of the assessment (Family and environment) so as to bring out the needs of the wider family more thoroughly.

1.8 To successfully achieve these ambitions, the government is committed to the development of a world-class workforce across all Children's Trusts. The *2020 Children and Young People's Workforce Strategy* (2008) sets out a vision for a reformed and integrated children and young people's workforce "where people know when and how they need to work together – and have the skills and capacity to do so."

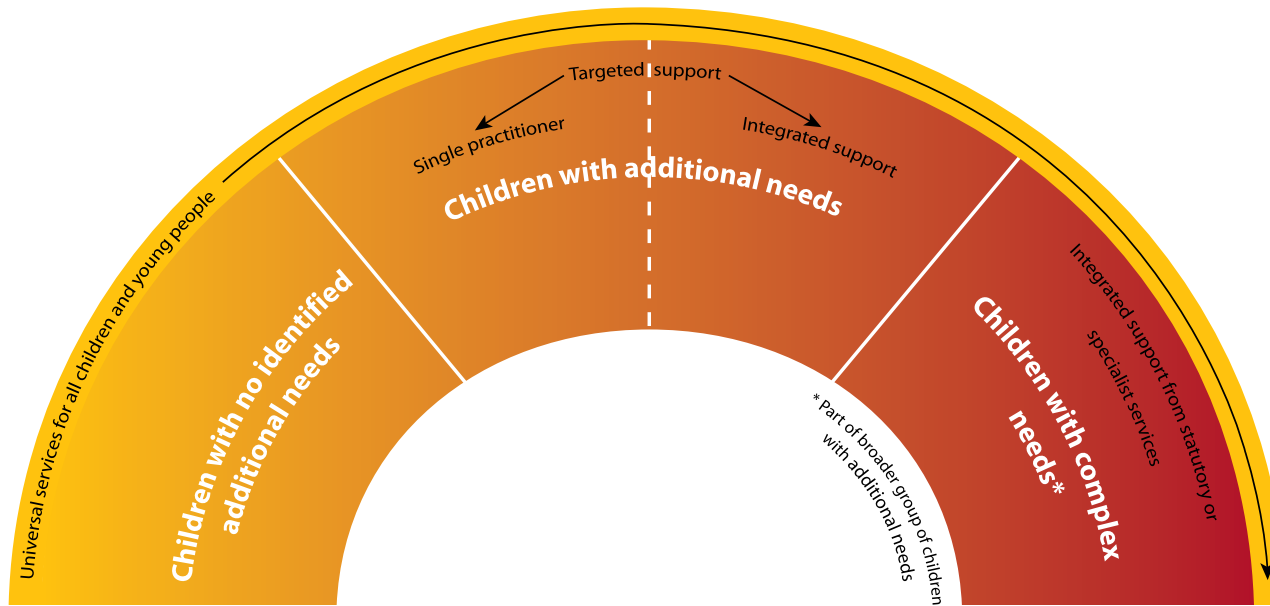


This includes developing:

- a more integrated approach to the development of leaders and managers
- a strategic approach to recruitment
- effective partnership working, as well as partnerships with children, young people and parents
- high-quality and accessible qualifications, training and progression routes
- workforce skills and knowledge to support children and young people who are particularly vulnerable
- a knowledge bank for the children and young people's workforce to ensure that practice, training and workforce development is firmly based on evidence about what makes the most difference
- a conceptual model for meeting children and young people's needs

1.9 A key part of the development of Children's Trusts and the reform of children's services is the integration of systems and processes. This is to ensure the needs of children, young people and families are met in a more appropriate and cohesive way. Many local areas have begun to do this by conceiving a 'whole systems' approach where the needs of children, young people and families lie along a continuum, supported by flexible and responsive services which become increasingly targeted and specialist, according to need. Managers report that using a visual model is the most helpful way of communicating to others what they are trying to achieve. Where areas have not yet done so, they may wish to use [Figure 1](#) (opposite) to inform the development of their own approach locally.

Figure 1: Continuum of needs and services



Note: Diagram is not to scale in representing the proportion of children and young people in each section of the windscreen.

This diagram has been provided by the Department for Children, Schools and Families

1.10 Children, young people and families are supported most effectively when services are planned and delivered in a co-ordinated way to offer integrated support across the continuum of needs and services. A range of processes and tools have been developed to help practitioners deliver more integrated support, including the CAF and the lead professional role.

1.11 The lead professional role focuses on children and young people with a range of additional needs (including complex needs) requiring integrated support from more than one practitioner.



1.12

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The common service delivery pathway

1.12 The process chart opposite is a high-level representation of the typical activities that practitioners would be expected to undertake when in contact with a child or young person who appears to have unmet need(s). Different parts of this pathway could involve different practitioners. Note that the sequence of activities here is an example only – the actual process may vary.

To view the full-size chart

GO TO: www.cwdcouncil.org.uk/common-service-delivery-pathway

1.13 Effective integrated working is underpinned by the following:

- **information sharing:** guidance, training and support materials are available to support good practice in information sharing by offering clarity on when and how information can be shared legally and professionally, to achieve improved outcomes. The guidance also explains how organisations can support practitioners and ensure that good practice in information sharing is embedded.

GO TO: www.dcsf.gov.uk/ecm/informationsharing

- **Common Core of Skills and Knowledge for the Children and Young People's Workforce:** this sets out the knowledge and skills all practitioners (including volunteers) need to work effectively with children, young people and families.
GO TO: www.cwdcouncil.org.uk/common-core
- **Championing Children:** a framework that establishes a shared set of skills, knowledge and behaviours for those who are leading and managing integrated children's services. A resource book to support implementation is also available.
GO TO: www.cwdcouncil.org.uk/championing-children

- **Multi-agency working:** there are a number of ways of delivering multi-agency services; an online resource is available for managers and practitioners in a range of settings who are starting to work with families in new ways.

GO TO: www.cwdcouncil.org.uk/multiagencyworking

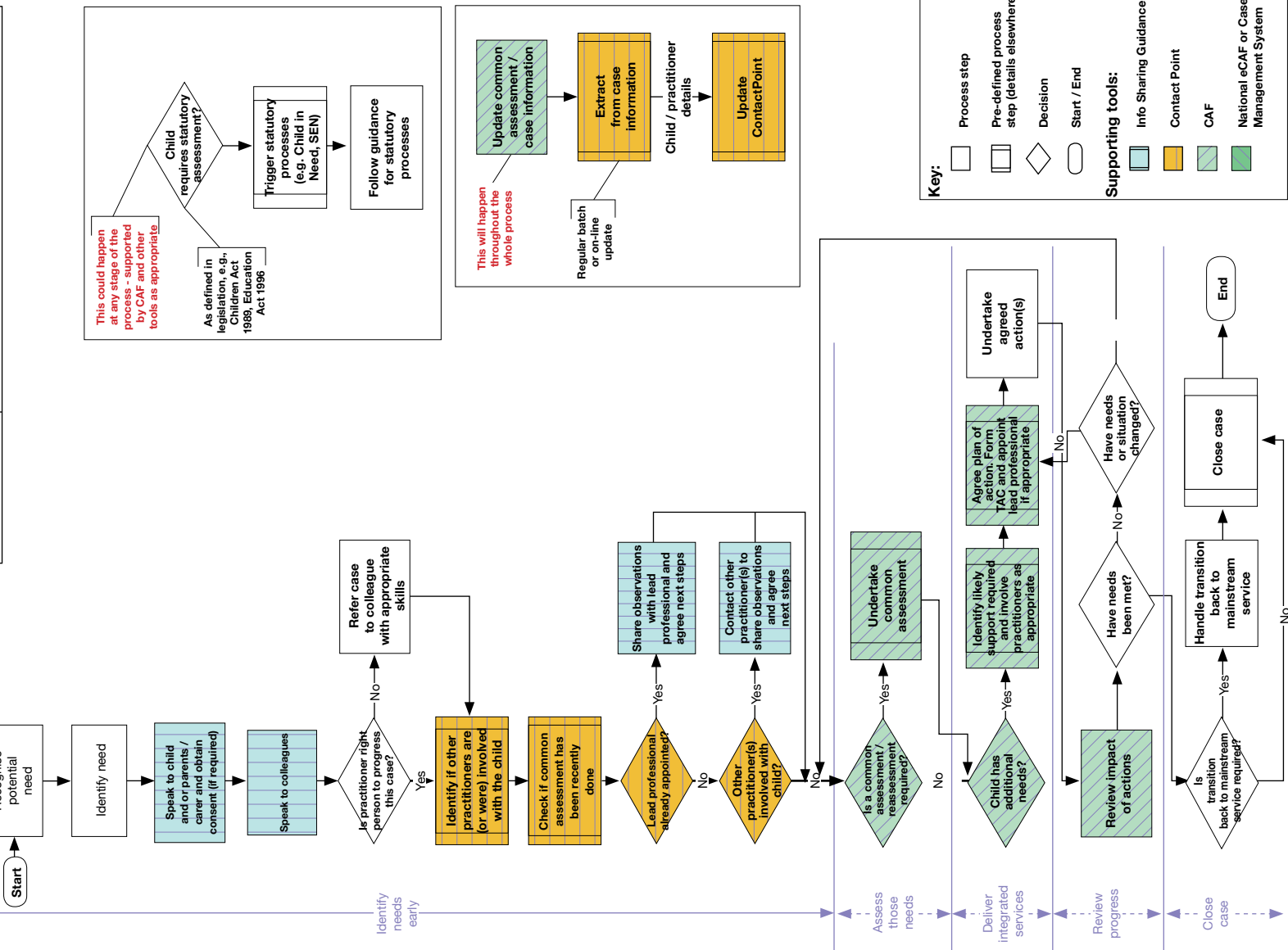
- **CWDC Share!** has been developed to show how integrated working can really make a difference to the lives of children, young people and families, CWDC Share! highlights emerging practice in the children and young people's workforce, breaking down the barriers and demonstrating solutions to make the implementation of integrated working more achievable.

GO TO: www.cwdcouncil.org.uk/cwdc-share

Figure 2: The common service delivery pathway

This diagram has been provided by the Department for Children, Schools and Families

Title	Description
Common Service Delivery Pathway	A high-level representation of the typical activities that practitioners would be expected to undertake when in contact with a child or young person who appears to have unmet needs). Different parts of this pathway could involve different practitioners. Note that the sequence of activities represented here is an example only – the actual sequence can vary and/or be highly iterative.





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Resources and implementation

1.14 CWDC has provided funding to local areas to support the implementation of integrated working and workforce reform. This is available on an annual basis from 2008-2011 and totals approximately £20 million across the 152 local areas.

1.15 CWDC has also developed the *One Children's Workforce Framework (OCWF)* and Tool to help each Children's Trust to move towards a reformed workforce. The online tool, which was piloted in 2008, will help local areas understand their children and young people's workforce better analyse areas for potential improvement, and thus focus development activity on the areas that are likely to have the greatest positive impact on ECM outcomes. 'Integrated working practices' is one of the seven strands of a reformed children and young people's workforce.

Figure 3: The One Children's Workforce Framework



You can explore the framework online at
GO TO: <http://onechildrensworkforce.cwdcouncil.org.uk>

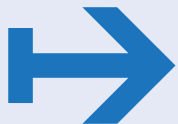
Workload

1.16 Managers are encouraged to take into account the workload implications for practitioners involved in CAF and lead professional work. When embedded across children's services, these developments should lead to efficiencies by reducing time spent on finding out who is working with a child or young person, reducing duplication and responding to children and young people's needs early, before they escalate to a crisis point. However, each service will need to recognise the staff time spent on these activities by individual practitioners.

Training

1.17 Training materials to support the move to integrated working are available. They enable practitioners to work together as part of one children and young people's workforce to deliver integrated frontline services, using common processes and tools. The materials address the specific requirements of CAF, the lead professional, multi-agency working and information sharing.

GO TO: www.dcsf.gov.uk/everychildmatters/strategy/deliveringservices1/iwtraining/training



Case study: BHLF funding makes a big difference to the whole family

In Telford and Wrekin, a Sure Start worker identified a family that needed urgent support. The family, which had five children under the age of four, including twins aged 18 months and another baby, agreed to participate in the CAF process. It identified a range of issues that needed immediate action including:

- cramped and poor housing
- a father who was unemployed, had mental health problems, would be missing for days and offered little support for his family
- debt
- the twins and the three-year-old child displayed developmental delay and behaviour problems
- appointments for the twins
- the midwife arranged for the father to see a psychiatrist
- the family support worker helped to bring routine in the household
- the family were supported to access debt counselling

Following on from the CAF, a multi-agency TAC was formed led by the Home-Start worker, who was later appointed the BHLF. The TAC involved a number of services including Sure Start, health and housing professionals and the family and agreed a range of solutions:

- the family were put on a priority housing list
- the twins went to nursery and the other children attended therapeutic play sessions
- the mother was helped to attend medical

Regular review meetings were also arranged following the initial multi-agency meeting to agree an ongoing support package.

The BHLF funding was quickly made available to provide necessary furnishings and appliances for the family home and loan repayment package and to fund nursery care and specialised play. This had an instant impact on the children's well-being and offered the parents respite. The integrated approach alleviated a situation that could have led the family into child protection procedures.

Source: A case study from the BHLF pilot, February 2008

Budget holding lead professional (BHLF)

1.18 This guidance focuses solely on the generic lead professional functions. In 2006, 16 local authority pilots were set up to trial a related concept called the BHLF. The pilot was set up to test whether a better service of support packages can be delivered for children and young people with additional needs by giving the lead professional a budget. The budget was used to procure goods and/or commission services directly from providers. These pilots ran up to April 2008.

1.19 DCSF have published an evaluation of pilot projects in England that allowed lead professional's to control budgets for commissioning and purchasing support services for children and young people with additional needs.

GO TO: www.dcsf.gov.uk/everychildmatters/strategy/managersandleaders/leadprofessional/budgetholding/bhlpp/

Monitoring

1.20 The outcomes of local authorities' implementation of CAF, the lead professional role and integrated working will be monitored as a part of the Comprehensive Area Assessment (CAA) which replaced the Comprehensive Performance Assessment, children's services Joint Area Reviews, and Annual Performance Assessment. For the first time, joint working arrangements between local authorities, health, police, fire and rescue and wider organisations will be held collectively accountable for the outcomes they deliver for communities in their area. The CAA will consider how partnerships are listening and responding to local community priorities.

Equality and diversity

1.21 Within the CAF, lead professional and integrated working approach, all managers and practitioners (in local authorities and third sector organisations) have a responsibility to ensure that every child and young person is treated equally and fairly, and not discriminated against on any ground including those that arise from race, ethnicity, religion or belief, gender, age, disability, social class, sexuality or marital status.

1.22 All agencies and organisations should seek to embed equality issues in their policies and practices. This includes:

- identifying equality goals and the action plan to implement them
- consulting appropriate stakeholders
- ensuring that equality issues are addressed in all proposed developments in policy, provision and practice
- working towards a diverse workforce able to meet the shared and specific needs of all children and young people

GO TO: Equality and Human Rights Commission www.equalityhumanrights.com



The lead professional and integrated working

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The lead professional and integrated working

The lead professional is one of a number of integrated tools and processes which help practitioners to assess and address the needs of a child or young person through a co-ordinated package of support. Figure 4 describes the journey a practitioner may follow when putting in place early intervention support for a child or young person. For more information see Annex C of the 2020 Children and Young People's Workforce Strategy.

GO TO: www.dcsf.gov.uk/everychildmatters/strategy/childrenandyoungpeoplesworkforce/workforcestrategy

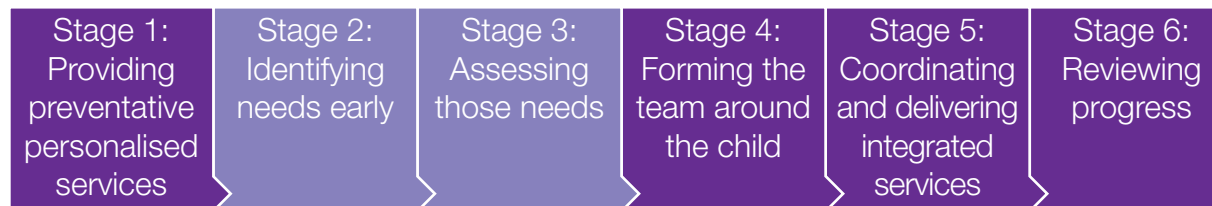
2.1 Integrated working focuses on enabling and encouraging the children and young people's workforce in the public, private and third sectors to work together effectively to deliver frontline services. This requires everyone supporting children and young people to work together effectively to put the child or young person at the centre of everything they do, meet their needs and improve their outcomes as set out in ECM.

2.2 Integrated working is about building the children and young people's workforce, with all practitioners and sectors working together, and communicating effectively. It is not a new concept but, since 2006, specific tools and processes have helped embed integration more fully across the workforce.

Stage 1: Providing Preventative Personalised Services

2.3 Integrated working is particularly important when a child or young person has additional needs to those usually met through universal services. Universal services do this by providing preventative personalised services for all children and young people in their day-to-day work. In the majority of cases, a child or young person's needs are addressed at this early stage. Integrated tools and processes help identify and assess needs early and put in place support for practitioners working together to tackle those needs as early as possible. Needs can therefore be addressed more quickly and effectively because practitioners with a range of expertise and skills from across the children and young people's workforce provide preventative personalised services.

Figure 4: Early intervention journey diagram





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Stage 2 and 3: Identifying needs earlier and assessing those needs

2.4 The CAF is a key tool for integrated working as it is a generic and holistic early assessment of a child or young person's strengths and needs that is applicable across all children's services and the whole children and young people's workforce. The CAF is an assessment of what the family and services can do jointly to address children and young people's needs.

Stage 4: Forming the team around the child

2.5 Where a multi-agency response is required, the formation of a TAC brings together practitioners from across different services who work together to co-ordinate and deliver an integrated package of solution-focused support to meet the needs identified during the common assessment process. It is important that the child or young person and parents/carers are also included as part of the TAC.

Stage 5: Co-ordinating and delivering integrated services

2.6 In these instances, the person who undertakes the common assessment (and identifies the need for multi-agency support) is responsible for convening the first TAC meeting from which a lead professional is agreed. The lead professional acts as the main point of contact for the child or young person and their family, and co-ordinates delivery of integrated services.

Stage 6: Reviewing progress

2.7 The common assessment and delivery plan are regularly reviewed by the TAC to monitor progress towards agreed outcomes. The review identifies any unmet or additional needs for the child or young person's smooth transition between universal, targeted and specialist services. In the case of multi-agency responses, this will involve further multi-agency meetings and liaison between the members of the TAC.

2.8 Effective integrated working is underpinned by good practice in information sharing and effective communication.

2.9 Information sharing is a key part of the government's goal to deliver better, more efficient public services that are co-ordinated around the needs of children, young people and families. Information sharing is essential to enable early intervention and preventative work, for safeguarding and promoting welfare, and for wider public protection. Information sharing is also a vital element in improving outcomes for all. *Information Sharing: Guidance for practitioners and managers* is available at:

GO TO: www.dcsf.gov.uk/ecm/informationsharing

Effective communication

2.10 IT tools such as ContactPoint and National eCAF² are being introduced to support more effective information sharing.

¹ National eCAF will allow practitioners to electronically create, store and share CAF information securely.

2.11 ContactPoint is a contact list of those who work with children and young people. It provides a quick way to find out who else is working with the same child or young person, making it easier to deliver more co-ordinated support. It holds basic identifying information about all children and young people in England up to their 18th birthday, and contact details for their parents and for services working with the child or young person.

2.12 ContactPoint holds only the following information:

- name, address, gender and date of birth of child or young person and an identifying number for all children and young people in England up to their 18th birthday
- name and contact details of parents or carers, educational setting (eg. school), primary medical practitioner (eg. GP) and practitioners providing other relevant services.

There is a facility to indicate if a practitioner is a lead professional for a child or young person.

There is also a facility to indicate if a practitioner has undertaken an assessment under the CAF (the assessment itself will not be accessible from ContactPoint).

ContactPoint will not hold case data or sensitive information.

GO TO: www.dcsf.gov.uk/ecm/contactpoint

2.13 National eCAF is being developed to support practitioners who use the CAF to assess a child or young person's additional needs and determine how they will be met. It will be a national system to allow practitioners to electronically create, store and share CAF information securely; enabling them to work together more effectively across geographic and organisational borders when helping a child or young person.

A single National eCAF system will help to promote a consistent working approach between all practitioners, supporting practitioners working in different agencies and locations to deliver a co-ordinated service effectively and efficiently. National eCAF will provide an automatic feed to ContactPoint to show that a common assessment has been started or undertaken for a child or young person.

GO TO: www.dcsf.gov.uk/everychildmatters/strategy/delivering-services1/caf/ecaf/ecaf

2.14 For those organisations that are required to provide information to ContactPoint (the majority of organisations that will use a CAF), there is a statutory duty for practitioners to inform ContactPoint of the existence of a CAF whether it is in paper form, held on a local IT system or is on the National eCAF system.



Initially, and prior to the availability of National eCAF, this might require the practitioner undertaking the CAF to add their contact details directly to ContactPoint. Over time, more and more local systems will become ContactPoint compliant and will be able to supply this information automatically. Practitioners are not required to seek consent to supply this information to ContactPoint, but it would be good to inform the child or young person and/or parent/ carer that the existence of a CAF will be indicated on ContactPoint. This could be reinforced in local Fair Processing Notices or local leaflets explaining the CAF to children, young people and their families.

ContactPoint factsheet

GO TO: www.dcsf.gov.uk/ecm/contactpoint

Multi-agency integrated support

2.15 The lead professional, together with the CAF, good practice in information sharing and supporting tools such as ContactPoint and National eCAF (when available) has a crucial contribution to make to integrated support. These processes will help change the way that services are delivered, shifting the focus from dealing with the consequences of difficulties in children and young people's lives to preventing things from going wrong in the first place. This will help more children and young people to achieve the five ECM outcomes.



Integrated Working in Practice: Police

Every Friday night, Iain Mclellan joins a multi-agency team including representatives from social services, housing, youth intervention, youth work, youth offending teams and schools, who patrol the local area on the lookout for children in trouble.

“We basically blitz the area looking for children misusing drink or drugs or getting into fights. Having representatives from so many different agencies means we can respond to the range of needs they may have, and can do what’s right for them,” he says.

Iain is based at two of the biggest schools in Wythenshawe – Newall Green and St Paul’s – both of which demonstrate highly effective integrated working. Each school has a staggering list of in-house agencies, including health workers, mentors, attendance officers, education welfare officers, social workers, Connexions advisors, as well as Iain himself. All are based on-site to offer 360 degree support to pupils. These people become familiar faces in the local community, creating

a real sense of neighbourhood, and showing the young people that the support doesn’t end when they leave the school grounds.

It’s a very different way of working for a police officer. Iain has had to get used to working within the school system where, unlike on the streets, he doesn’t always have the final decision and has to consult with the school staff and head teacher. He says: “It’s a very different culture. It’s a great way of working as it allows us to really get to know the young people and make decisions based on what is best for them, rather than just automatically sending them to court when there’s a problem.”

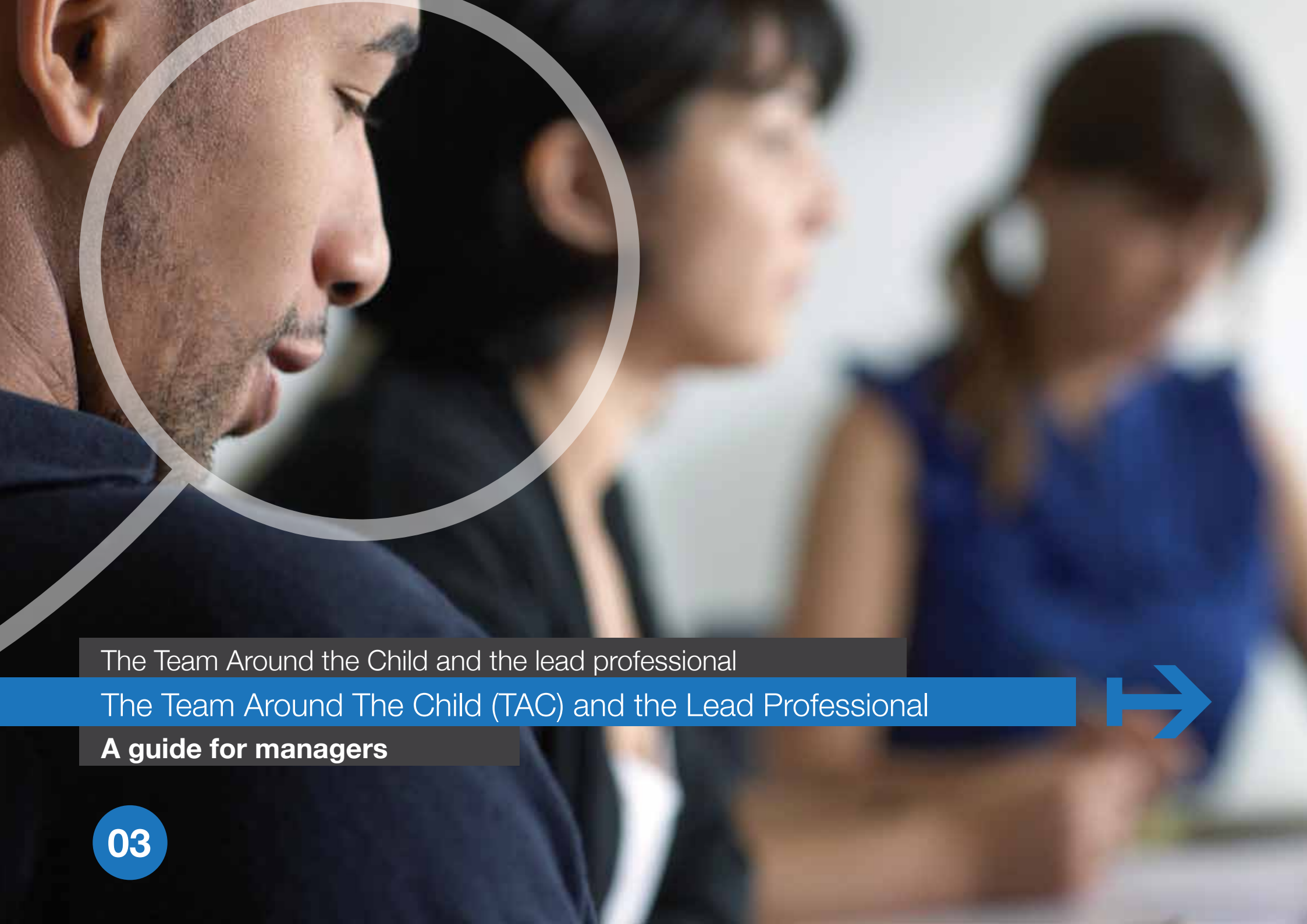
Recently, a child was being very aggressive and abusive towards staff, including Iain, and eventually had to be physically restrained. After searching his bag, Iain discovered a high-powered BB gun in his possession. The boy was instantly remorseful and started crying and apologising.

“He’d never been in trouble before, but if he’d been caught like that by a police officer on the street, he’d almost certainly have gone straight to court. Thanks to the rapport I had through working so closely with students and staff at the school, I was able to dig deeper into the issue and work out a way of stopping this kind of thing happening again without criminalising him.”

Iain’s advice for people developing a similarly successful system of integrated working is to make sure there is mutual respect and trust between all parties.

He says: “Be patient, and make an effort to understand where the other agencies are coming from. Try not to pre-judge others before you really know what they do and what they can offer because everybody can bring something to the table. The rewards of everybody working together like this can be huge.”

Iain Mclellan: Police Officer



The Team Around the Child and the lead professional

The Team Around The Child (TAC) and the Lead Professional

A guide for managers





The Team Around the Child and the lead professional

Team Around the Child

3.1 The TAC is a model of multi-agency service provision. The TAC brings together a range of different practitioners from across the children and young people's workforce to support an individual child or young person and their family. The members of the TAC develop and deliver a package of solution-focused support to meet the needs identified through the common assessment.

3.2 The model does not imply a multidisciplinary team that is located together or who work together all the time; rather, it suggests a group of practitioners working together as needed to help a particular child or young person.

3.3 The model is based on the ethos of a flexible children and young people's workforce providing services to meet the diverse needs of each and every child or young person. TAC places the emphasis firmly on the needs and strengths of the child or young person, rather than those of organisations or service providers.

3.4 Each practitioner in the TAC is responsible/accountable to their own line manager for the services they deliver to children, young people and families.

3.5 In addition:

- members of the TAC are jointly responsible for developing and delivering the delivery plan to meet the needs of the child or young person, and achieve the intended outcomes identified through the common assessment
- each member of the TAC is responsible for delivering the activities they agreed to carry out as part of the delivery plan
- each member of the TAC is responsible for keeping the other members of the team informed about progress in their area of responsibility
- TAC members should support the lead professional by keeping them informed, providing reports promptly when requested and attending meetings
- all TAC members should contribute to taking minutes and chairing meetings, and take on other tasks as necessary

- TAC members should support the lead professional by providing information, offering guidance and advice
- TAC members should contribute actively and positively to solving problems or resolving difficulties

3.6 To ensure that these activities are well co-ordinated, and that there is clear communication with the child or young person and family, the TAC agrees (with input from the child or young person and family) a particular practitioner who will act as the lead professional.

The vision for the lead professional

3.7 All children and young people with additional needs (including complex needs), who require integrated support from more than one practitioner, should experience a seamless and effective service where one practitioner takes the lead to ensure that services are co-ordinated, coherent and achieving intended outcomes. This is called a lead professional.



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The case for lead professional support

3.8 Evidence from practice suggests that appointing a lead professional is central to the effective frontline delivery of integrated services for children and young people with a range of additional needs. Delivered in the context of multi-agency assessment and planning, underpinned by the CAF or relevant specialist assessments, the role ensures that professional involvement is rationalised, co-ordinated and communicated effectively.

3.9 More importantly, the lead professional role helps to overcome some of the frustrations traditionally experienced by children, young people and families with a range of needs, requiring input from a number of practitioners, for example:

- numerous lengthy meetings
- lack of co-ordination
- conflicting and confusing advice
- not knowing who to speak to
- the right support not being available at the right time
- having to repeat their story to different people at different times

3.10 The lead professional role can also help alleviate the frustrations often felt by practitioners, for example:

- difficulties in accessing specialist help
- inadequate, misleading or inappropriate referral information
- barriers to information sharing and communication problems
- over-large and bureaucratic case conferences and management meetings, to the detriment of delivering early intervention support

The functions of the lead professional

3.11 The lead professional role is a set of functions to be carried out as part of the delivery of effective integrated support.

These functions are to:

- act as a single point of contact for the child, young person or family, who they can trust and who can engage them in making choices, navigating their way through the process and effecting change
- co-ordinate the delivery of the actions agreed by the practitioners involved in the multi-agency TAC to ensure that children, young people and families receive an effective integrated service which is

regularly reviewed. These actions will be based on the outcome of the common assessment and recorded in the CAF delivery plan

- reduce overlap and inconsistency in the services received by children, young people and their families

3.12 An important principle underpinning these functions is that the lead professional should ensure that the **child or young person and their family remain central to any decisions made**, and should provide them with sufficient information to empower them to make their own decisions, acting as a sounding board if necessary.

3.13 The aim is that these functions become 'embedded' within a practitioner's wider remit so that a range of practitioners across the children and young people's workforce are able to act as the lead professional.

Core tasks

3.14 Here are some examples of the tasks a lead professional may need to carry out to deliver the functions detailed:

- Build a trusting relationship with the child or young person and their family (or other carers) to secure their engagement in the process.
 - Be the single point of contact for the child or young person and family, and a sounding board for them to ask questions and discuss concerns. (In most cases, other practitioners will also need to make direct contact with the child, young person or family, and it will be important for them to keep the lead professional informed of this).
 - Be the single point of contact for all practitioners who are delivering services to the child or young person, including staff in universal health and education services, to ensure that the child or young person continues to access this support.
 - Convene the TAC meetings to enable multi-agency integrated support in the delivery of services
- Co-ordinate the effective delivery of a package of solution-focused actions³; and ensure process is reviewed regularly.
 - Identify where additional services may need to be involved and put processes in place for brokering their involvement (In some instances, this may need to be carried out by the line manager rather than by the lead professional themselves).
 - Continue to support the child, young person or family, as appropriate, if specialist assessments need to be carried out.
 - Support the child or young person through key transition points (eg between universal, targeted and specialist services; or between children and adult services).
 - Where necessary, ensure a safe, careful and planned 'handover' takes place if it is more appropriate for someone else to be the lead professional.
 - Will have support mechanisms in place to resolve any issues; for example, other services failing to deliver on agreed actions.

3.15 The lead professional:

- does not need any particular qualifications
- does not have to be an 'expert' in everything
- is not automatically the person who carried out the common assessment – although that person is responsible for convening the initial TAC meeting at which the lead professional is agreed
- is not responsible or accountable for the actions of other practitioners or services.
- is accountable to their home agency for delivering the lead professional functions and the service provision from their home agency as agreed in the delivery plan

Who can be a lead professional?

3.16 Many practitioners in the children and young people's workforce can be a lead professional at certain times for some of their cases. The following list gives some examples of who may take on the role:

- children's centre workers
- health visitors
- school nurses

³ Solution-focused actions focus on what people want to achieve as opposed to focusing on their problems.



- community children's nurses
- housing support staff
- school support staff
- community support officers
- learning mentors
- teachers
- Connexions personal advisers
- midwives teenage pregnancy advisers
- early years worker
- nursery nurses
- volunteer
- education welfare officers
- personal tutors
- youth offending team workers
- family workers
- play workers
- youth workers
- GPs
- police officers
- substance misuse worker

3.17 Figure 5 (opposite) illustrates the broad range of practitioners within the core children and young people's workforce (people who work or volunteer with children, young people and their families, or are responsible for their outcomes all the time); and wider children and young people's workforce (people who work or volunteer with children, young people and/or their families, part of the time, or are responsible for their outcomes as part of their jobs) who may, at some time, take on the lead professional role.

A child, young person, parent or carer can request that the CAF process is undertaken. It is possible that a young person, parent or carer may go on to be the lead professional.

Knowledge and skills of the lead professional

3.18 Whatever the practitioner's background, emerging practice suggests that there is a key set of knowledge and skills needed to deliver the lead professional functions. These are shown in the table below. Managers may wish to use the table

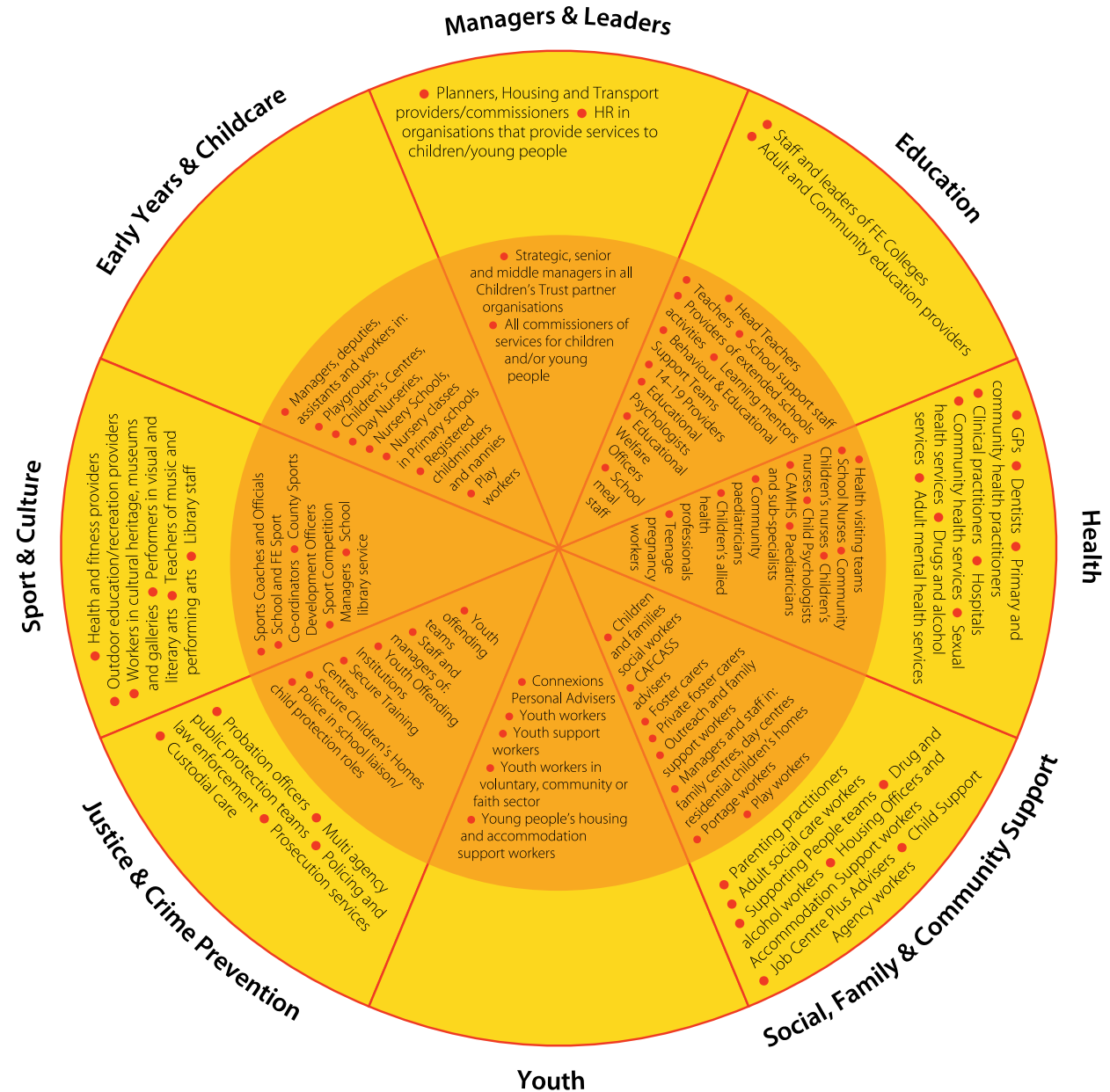
as a guide when working with practitioners to assess their strengths and areas for development. This list of knowledge and skills may also be used in supervision as part of the practitioner's learning and development plan linked to the Common Core of Skills and Knowledge for the Children and Young People's Workforce which sets out the knowledge and skills all practitioners need to work effectively with children, young people and families.

GO TO: www.cwdcouncil.org.uk/common-core

Figure 5: Children and Young People's Workforce

(2020 Children and Young People's Workforce Strategy, DCSF, 2008)

- Core Children and Young People's Workforce:**
 People who work or volunteer with children, young people and their families, or are responsible for their outcomes all the time.
- Wider Children and Young People's Workforce:**
 People who work or volunteer with children, young people and/or their families part of the time, or are responsible for their outcomes as part of their jobs.



This diagram has been provided by the Department for Children, Schools and Families



3.19 Lead professionals, like all practitioners, should understand information sharing, consent and issues around safeguarding and client confidentiality. Managers have a vital role to play in helping practitioners to:

- access information
- understand/interpret information

- apply their understanding to practice

GO TO: www.dcsf.gov.uk/ecm/informationsharing

GO TO: www.dcsf.gov.uk/everychildmatters/safeguardingandsocialcare/safeguardingchildren/safeguarding

3.20 Managers can also support practitioners to acquire the necessary authority and credibility to carry out the lead professional functions by promoting:

- a commitment from other practitioners to this way of working and to carrying out their agreed actions
- clear and transparent systems developed

Table 1: Knowledge and skills for carrying out the lead professional functions

Knowledge		Skills
<ul style="list-style-type: none"> • knowledge of the CAF and integrated working • knowledge of local and regional services for children, young people and families and how to access them or where to go for information – eg. local service directories • understanding of the child or young person’s strengths and needs • understanding of information sharing, consent and issues around confidentiality • understanding of safeguarding in relation to CAF and lead professional role • understanding of the boundaries of their own skills and knowledge 	<p>Knowledge and skills are underpinned by key skills in:</p> <ul style="list-style-type: none"> • effective communication, eg. <ul style="list-style-type: none"> • providing information • giving and receiving feedback • offering clarification • interpretation and challenge • empathy • diplomacy • sensitivity • negotiating • encouraging the child or young person and family’s self-directed problem solving • planning, organisation and co-ordination • critical and innovative thinking 	<p>Ability to:</p> <ul style="list-style-type: none"> • establish a successful and trusting relationship with the child or young person and family • support the child or young person and family to achieve their potential • empower the child or young person and family to make decisions including challenging them when appropriate • convene effective inter-agency meetings and initiate discussions with relevant practitioners • work effectively with practitioners from a range of services

and agreed at strategic level, in relation to line management, accountability, professional support, and dispute resolution

- personal development opportunities, in line with the requirements of the *Common Core of Skills and Knowledge for the Children and Young People's Workforce*

GO TO: www.cwdcouncil.org.uk/common-core

Skills relevant to working with younger children

3.21 Where a child or young person is young or developmentally young, the lead professional will need to use ways of communicating which are meaningful to the child or young person. They will also be working closely with the parents or carers. In these cases, the lead professional functions are more likely to draw on these skills:

- communicating with the child or young person using forms of interaction appropriate to their age, level of

understanding and preferred method of communication (eg. pictures, gestures or a personalised communication board)

- engaging parents and carers
- enabling the family, child or young person to choose the practitioner they want to act as their lead professional, balanced against 'best fit' and specific agency requirements
- understanding key transition points in a child or young person's life; for example, beginning a new school (eg. nursery to primary; primary to secondary, reception to year 1)

Skills relevant to working with young people

3.22 Many practitioners working in young people's services, (including targeted youth support)⁴, will take on lead professional functions during the course of their work. There will be particular challenges for these practitioners centred around:

- enabling young people to choose the practitioner they want to act as their lead professional, balanced against 'best fit' and specific agency requirements
- gaining their trust and respect, being able to challenge them when necessary and helping them move on in their thinking
- ensuring an effective transition from school to post-16 education and employment or in to adult services

GO TO: www.dcsf.gov.uk/everychildmatters/youth/targetedyouth/targetedyouthsupport

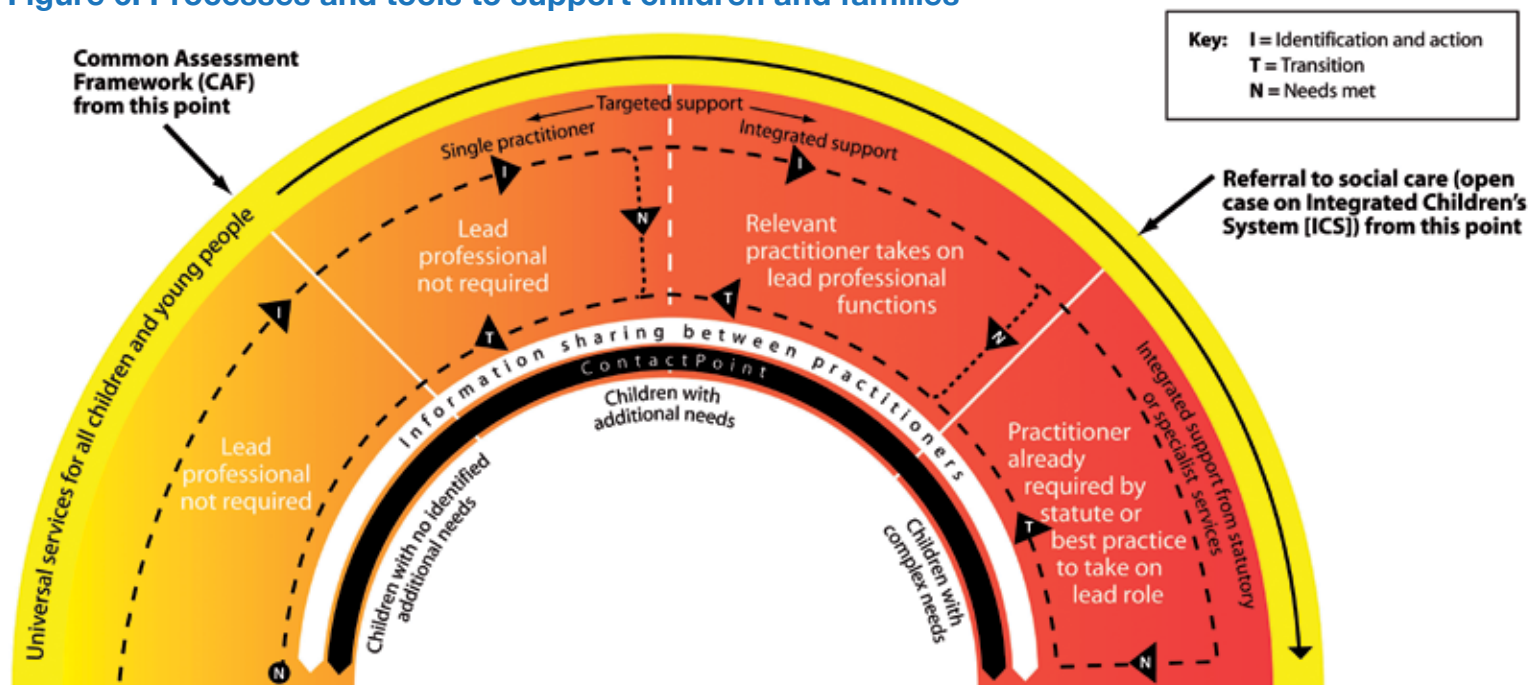
3.23 Managers can support practitioners to meet these challenges by creating a structured environment in which they can:

- identify their learning needs
- identify learning and development opportunities to address those needs
- reflect on their learning and its application to practice

⁴ Targeted youth support (TYS) is a model of multi-agency working for vulnerable young people and those with additional needs aged 13-19. It aims to ensure that a young person's needs are identified early and met by agencies working together effectively in ways that are shaped by the views and experiences of young people themselves. TYS aims to help vulnerable young people achieve the five ECM outcomes by addressing the risk factors that may result in poor outcomes, and helping to build vulnerable young people's resilience.



Figure 6: Processes and tools to support children and families



Note: Diagram is not to scale in representing the proportion of children and young people in each section of the windscreen.

This diagram has been provided by the Department for Children, Schools and Families

Developing a lead professional model

3.24 Figure 6 (opposite) illustrates the spectrum of support and the relationship between the different tiers of a 'whole systems' approach.

3.25 Such a 'whole-systems' approach ensures that someone is always in place to co-ordinate and act as a single point of contact when a child, young person or family requires an integrated package of support. Figure 6 shows how the spectrum of lead professional support is geared to meeting the wide-ranging needs of children, young people and families. Where children and young people have no additional needs (see page 6) or where their needs require a response from just one practitioner, a lead professional is not required. Where CAF has identified that a child or young person has additional needs requiring an integrated team around the child response, a relevant practitioner from among those supporting the child or young person is identified to carry out the functions of the lead professional. In some cases, the child or young person's needs may be more complex and they may receive a specialist

assessment (eg. Asset, for young people who have offended and come into contact with the criminal justice system; or Children in Need). In these cases, statute or good practice requirements already seek to ensure that someone is in place to take a lead role in linking up with other services and being a single point of contact for the child or young person and family. Where this is being carried out effectively, the person carries out the functions of the lead professional.

3.26 A key aim of integrated working is to ensure a smooth handover between services. When a child or young person's needs change, all services should ensure that the support is seamless (ie. between universal, targeted and specialist services, or from children to adult services). This may involve a hand-over from one lead professional to another and support should be put in place to ensure this works well and is based on good practice in information sharing and communication between practitioners.

What else is needed to implement the lead professional functions?

3.27 For the lead professional concept to work successfully, managers need to ensure that:

- the CAF has been established as the main way for initially identifying and addressing additional needs of children and young people
- there is a commitment to, and a clear understanding of, when and how information can be shared legally and professionally
- there are mechanisms for storing and sharing CAF information securely between practitioners supporting the same child or young person, either in local IT systems or in National eCAF when available or by other mechanisms
- the Integrated Children's System (ICS) is used to support the management of information about looked after children and children in need where applicable
- practitioners have a clear understanding of the range of tools available to support more effective integrated working, and relevant staff have access to ContactPoint and National eCAF when available



3.28

3.29

- there is a cross-agency commitment to multi-agency working so that practitioners carry out their agreed actions
- there are sources of support for practitioners when required
- there is a clear and transparent management framework in place, with effective systems for line management, training, accountability and dispute resolution

3.28 In addition, managers must provide:

- **Access to high-quality supervision** and line management support for the lead professional. This will enable practitioners to carry out their core responsibilities, together with any additional functions arising as a result of their lead professional work; as well as address workload and time management issues.
- **Additional training where necessary** to enable lead professionals to develop the skills identified above, for example:
 - chairing, planning and reviewing meetings

- understanding the roles and remits of other practitioners and agencies
- representing and communicating the child or young person and family's needs
- negotiating and building effective relations with other practitioners from across the children and young people's workforce.

- **Clearly defined escalation routes** to resolve disputes or other matters (for example, about who the lead professional should be; where accountability lies; non-delivery of action; or how resources are to be allocated) and to provide strategic input to secure engagement of all services.

3.29 In response to these requirements, a number of areas have appointed operational managers to co-ordinate integrated working arrangements, including the support of lead professionals.

These may go by a range of terms; for example, integrated service managers, CAF co-ordinators or professional practice managers. They may carry out a number of functions; for example, resolving difficulties or conflicts between practitioners. In addition, they can help lead professionals deliver the more administrative aspects of their work, enabling them to focus on the delivery of services and support to the child or family. These issues are discussed in more detail in [Section 4](#).



Case study: Supervision and the lead professional

The pieces began to fall into place for Newcastle's children and young people's workforce when it introduced a solution-focused approach to assessment and supervision.

The solution-focused approach consists of:

- 'appreciative inquiry', which identifies and appreciates good practice by focusing on achievements, rather than problems, and creating a learning culture and one where success is celebrated
- 'signs of safety', which is an approach to risk assessment that identifies and manages risk by highlighting potential weaknesses in the family and also areas of strength that can be built on to protect children and keep them safe

When these approaches have been used, practitioners say it results in:

- increasing confidence in working as a member of the TAC
- keeping the family at the centre
- helping the practitioner make sense of the complexity around cases

This approach emphasises positive solution-building rather than a problem-focused way of working, and develops confidence to work in an integrated way in partnership with families.

Hints and tips:

- focus on solutions in supervision
- encourage practitioners to work out their own ideas and solutions as they are more likely to act on them
- highlight achievements no matter how small

For further details, see:

Joining the Pieces: Integrated Working in Practice – CWDC Share! 2009



Role and responsibilities of managers

The Team Around The Child (TAC) and the Lead Professional

A guide for managers



Role and responsibilities of managers

4.1 As emphasised earlier, a lead professional role is an integral part of each local Every Child Matters (ECM): Change for Children programme. Managers have a number of **key responsibilities** to help embed integrated working in their organisation. They must:

- understand the CAF and how it fits into services for children and young people with additional needs
- ensure common assessments are undertaken as ‘core business’
- encourage and expect practitioners to take on the lead professional role as ‘core business’, and support them through effective supervision and management
- promote integrated multi-agency working through the TAC

4.2 In undertaking these responsibilities, it is helpful to remember that success in implementing a lead professional model of working will, in large part, be dependent on the local strategic approach – in particular, the emphasis on management and accountability, training and development and cultural change.

4.3 This section describes a number of principles for implementing the lead professional role and integrated working, followed by key management tasks to make implementation easier.

Principles for successful implementation

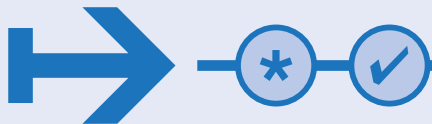
- A. Building commitment and ownership
- B. Developing structures for service delivery
- C. Clarifying lines of accountability
- D. Developing a robust management framework and infrastructure
- E. Developing support structures for the lead professional

A. Building commitment and ownership

4.4 The lead professional and TAC process needs to be owned by all professionals working to meet the needs of the child or young person; and understood by the child, young person and family. Indicators that this has been successful include:

- all partners being aware of what a lead professional and TAC is and what their functions are

- services having considered who will be able to take on the lead professional functions in their organisation, and how links with other services can be strengthened to ensure effective transition arrangements
- lead professional functions being incorporated into job descriptions, setting a clear expectation that staff will be the lead professional at some point and helping people realise it is a way of working rather than another job for them to do
- active involvement from all partners in the TAC processes (eg. contributing to delivery of integrated services, chairing meetings, taking minutes)
- practitioner performance is monitored and managed, and any targets and objectives set support integrated working and good performance is recognised



Case study: Building commitment and ownership in Barnsley

Barnsley has added the human touch to driving culture change forward. It has presented its change programme as something that needs to be shaped by families. This has meant taking into account the context of the community: where people learn, where they get help and where they can make positive changes. All these pieces inform the 'bigger picture.'

The exciting issues around culture change in Barnsley concern partnerships working 'on the ground' which has supported:

- an increase in momentum as key people buy into the vision of integrated services
- a recognition of the need to 'underpromise and over-deliver'
- a recognition that cultural change is not about more work, it is about seeing the work through a different lens – so that everyone sees themselves as part of children's services

Checkpoints:

- ensure that integrated working is seen as the 'day job' for everyone
- seek to build strong relationships across professional boundaries
- be an optimistic leader for change

For further details, see:

Joining the Pieces: Integrated Working in Practice – CWDC Share! 2009

GO TO: www.cwdcouncil.org.uk/cwdc-share

B. Developing structures for service delivery

4.5 Local areas are developing a range of service models for delivering early intervention support centred on CAF and the lead professional. For example:

- Creating a TAC to support a particular child or young person, where the CAF is used as the main mechanism for bringing practitioners together to discuss how they can best support the child or young person. The lead professional is agreed from among this group and will be responsible for overseeing the delivery of the agreed actions set out in the plan. Practitioners remain employed by their home agency.
- Establishing multi-agency panels (such as Youth Inclusion Support Panels) which meet regularly (eg. monthly or termly) to discuss cases which meet particular criteria for involvement (eg. known to two or more services). The lead professional is agreed at the same time that an action plan is developed.

- Setting up multi-agency teams (where staff are seconded or recruited into a new service) that provide a core ‘hub’ of practitioners normally based in, or associated with, a specific locality, to deliver services to address the needs of children and young people in that locality. Members of this team will often take the lead in undertaking CAFs or processing CAFs after additional needs have been identified. The members of a TAC for a particular child or young person will normally be drawn from the multi-agency team with the involvement of other targeted or specialist services as appropriate for the child or young person. The team manager ensures that all agencies are on board, supports team members and helps resolve disputes.
- Multi-agency working and lead professional functions are incorporated into commissioning arrangements with service providers in the private, public, and third sectors.

4.6 There is no one correct model, and it is likely that local areas will have more than one model in place to address population needs and the infrastructure in different localities. For more information on setting up and delivering different models of multi-agency services is provided in a multi-agency working toolkit
 GO TO: www.cwdcouncil.org.uk/multiagencyworking

C: Clarifying lines of accountability

4.7 A clear line of accountability is vital and often a particular concern for practitioners starting work in this area. The following principle can provide a useful starting point and help reassure those taking on lead professional functions. Each lead professional is accountable to their home agency for their delivery of the lead professional functions and other aspects of their role. They are not responsible or accountable for services delivered by other agencies.

4.8 Where a robust multi-agency assessment and planning process is in place, all partners will have signed up to making a contribution and fulfilling that commitment. This makes it less likely that the lead professional will have to follow up a failure to deliver an agreed service.

4.9 A clear line of accountability for lead professionals will run from the practitioner, through line management in their home agency, through co-ordinated arrangements in the Children’s Trust, and ultimately to the DCS on behalf of the local authority. This should be accompanied by a process for communicating and resolving disputes. Developing a local protocol for this would be helpful.



4.10 The different responsibilities of the TAC and lead professional are shown below in Table 2.

Table 2: Responsibilities of the TAC

The TAC:	The lead professional:	The lead professional is NOT:
<ul style="list-style-type: none">• brings a multi-agency approach to supporting a child or young person following a common assessment• develops and delivers a package of solution-focused support with each TAC member being responsible and accountable to their home agency for their actions and the services they provide• reviews progress and outcomes, identifying further action and support that may be needed	<ul style="list-style-type: none">• acts as a single point of contact for the child or young person and their family• co-ordinates the delivery of the actions agreed by the practitioners involved in the TAC• reduces overlap and inconsistency in the services received	<ul style="list-style-type: none">• an 'expert' in everything• automatically the person who undertook the common assessment• responsible or accountable for the actions of other practitioners or services

D: Developing a robust management framework and infrastructure

4.11 At strategic level, robust management structures often take the form of a multi-agency steering group which can:

- marshal and deploy resources to those areas or children and young people most in need
- set criteria for managers to intervene to resolve conflicts or disputes
- arbitrate or intervene to resolve disputes when necessary
- review lead professional implementation through regular monitoring and evaluation
- provide a 'support and challenge' role to ensure that practitioners and managers feel supported in their roles, and that all agencies are carrying out their commitments and responsibilities
- provide strategic direction on challenging issues such as working across local authority or Children's Trust boundaries
- establish, or assure adherence to, local information sharing governance frameworks and ensuring that good

practice in information sharing becomes embedded in working practices

- develop appropriate protocols for TACs and lead professional working

4.12 At operational level, effective management arrangements are necessary to ensure:

- close links between service managers, including open channels of communication where necessary to resolve disputes
- a programme of joint training and staff development
- structures are developed to help lead professionals carry out their functions (see E opposite)

4.13 In some areas, this has been achieved by introducing a management tier focused on supporting integrated working. Commissioning processes also provide a useful mechanism for supporting integrated working across all sectors.

E. Developing support structures for the lead professional

4.14 The evaluation of the CAF and lead professional implementation found that many practitioners felt they lacked skills or confidence in carrying out the functions of a lead professional. Their concerns covered a number of issues, for example:

- a lack of experience in chairing a case review or family support meeting
- anxiety about who else they might have to work with and what their backgrounds/experience might be
- concern about 'taking their work home with them'

4.15 Issues like these can be resolved through effective management structures, joint agency training and a commitment from senior management to monitor and address workload issues.



Practical management tasks to help embed the lead professional and TAC

4.16 The principles outlined in Table 3 can be implemented by undertaking the following practical management tasks within your organisation to help embed the lead professional role.

Table 3: Practical management tasks

Management and accountability	Training and development	Cultural change
<ul style="list-style-type: none">• configuring systems and processes to facilitate lead professional and TAC• ensuring development and delivery of (multi-agency) training and development opportunities• establishing effective information governance frameworks and ensure that good practice in information sharing is embedded in working practices• setting up systems to quality assure CAFs and action plans• ensuring provision of administrative Support	<ul style="list-style-type: none">• providing induction based on the CWDC Common Induction Standards• providing regular, structured supervision• supporting capacity building for lead professional in developing knowledge and skills• supporting lead professional to put learning into practice• supporting lead professional as member of TAC• enabling support groups/mentoring/ buddy system• allowing staff time to participate in these programmes	<ul style="list-style-type: none">• championing CAF, lead professional and integrated working in the Children's Trust• engaging managers from other services in integrated working processes• demonstrating commitment to TAC, CAF and lead professional as 'core business'• engaging managers and develop structures to sustain the relationships

4.17 In addition, early evaluations of the implementation of CAF and the lead professional, and recent learning from progress checks by the CWDC, have identified a number of factors that can help or hinder the process of implementation. These are summarised in [Table 4](#).

A number of the success factors and barriers highlighted in [Table 4](#) relate directly to the implementation of a lead professional model, and are expanded upon on the next page.

Training

4.18 Training materials to support the move to integrated working are available. They enable and encourage practitioners to work together in more integrated frontline services, using common processes and tools designed to create and underpin joint working. The modules of most interest to practitioners taking the lead on lead professional work are:

- introduction to integrated working
 - introduction to information sharing
 - information sharing in practice
 - introduction to CAF
 - introduction to assessment to support CAF
 - using the CAF in practice
 - introduction to the lead professional
 - the lead professional in practice
- For more information, email integratedworking@cwdcouncil.org.uk
 GO TO: www.dcsf.gov.uk/everychildmatters/strategy/delivering-services1/iwtraining/training

Table 4: Success factors and barriers to implementation

Success factors	Barriers
<ol style="list-style-type: none"> 1. Enthusiasm at grass roots and managerial level 2. 'Champions' and leaders at all levels 3. Clear perception of the benefits for children, young people and families 4. Participation/involvement of children, young people and families 5. History and practice of multi-agency working 6. Learning from others 7. Clear infrastructure, systems, structures and processes (eg. to allocate appropriate lead professionals taking account of the child or young person's view; systems to effectively engage partners, practitioners and services) 8. Good support for practitioners 	<ol style="list-style-type: none"> 1. Lack of senior management and middle management support/commitment 2. Lack of joining-up across services; conflicts of interest 3. Mismatch between the 'vision' and the practice 4. Confusion and muddle about systems and processes 5. Lack of clarity about the role of the lead professional (as a point of contact and co-ordinator of support) as distinct from the shared role and responsibilities of the team around the child for developing and delivering a package of support 6. Anxiety about increased workload 7. Skill/confidence gaps 8. Lack of local support



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4.19 Local training should also be available. Lead professionals should be encouraged to explore what is available to meet their needs and enabled to participate as appropriate.

Managers should also consider their own training needs

4.20 Managers will find the Introduction to the lead professional module helpful, as well as the series of modules for managers on CAF and information sharing. A number of other resources are also available which link with, or provide a starting point for, lead professional training.

GO TO: www.dcsf.gov.uk/everychildmatters/strategy/deliveringservices1/iwtraining/training

4.21 *Championing Children* is a framework that establishes a shared set of skills, knowledge and behaviours for those who are leading and managing integrated children's services. It provides a common understanding about the particular abilities required by leaders and managers of these services. Individuals, teams and organisations can use this document as

a planning tool to help develop the skills, knowledge and behaviours necessary.

GO TO: www.cwdcouncil.org.uk/championing-children

4.22 Managers also need to understand when and how information can be shared legally and professionally in order to support their staff.

Information sharing: guidance, training and support materials are available to support good practice in information sharing by offering clarity on when and how information can be shared legally and professionally, in order to achieve improved outcomes.

The guidance also explains how organisations can support practitioners and ensure that good practice in information sharing is embedded.

GO TO: www.dcsf.gov.uk/ecm/informationsharing

Line management and supervision

4.23 As a manager you should be:

- fully aware of the lead professional functions and the demands of working in this way

- able to monitor caseloads and mandated to change the balance if necessary
- capable of directing others if needed
- able to challenge the lead professional and other practitioners involved in a case
- able to deal with complaints or performance issues and escalate if necessary
- able to ensure appropriate supervisory models
- able to identify appropriate training if required

4.24 Existing supervision arrangements may need to be revisited to ensure that they enable the early identification of any problems in delivering the lead professional functions, and their successful resolution. Suggestions from practice include:

- adapting the frequency of supervision for the duration of lead professional involvement
- putting flexible arrangements in place so that the lead professional can request additional supervision if there are particular issues or demands

4.25 Supervision can have different meanings in different agencies. In the context of the lead professional, line management supervision ensures that practitioners are encouraged and supported to work efficiently and effectively to deliver the functions of the lead professional role. Supervision supports practitioners to:

- reflect on and evaluate their work as a lead professional
- engage with broader issues, developments and priorities
- identify support, training and development needs

4.26 Line management supervision, therefore, has three elements as seen in [Table 5](#).

4.27 It is helpful to all practitioners undertaking the lead professional role (whether they are working full or part-time) to receive regular supervision, as this is a crucial support in helping them to reflect on case work, workload, training and development needs. Where arrangements for line management supervision do not currently exist, you may want to explore options with the practitioner, eg. peer supervision, informal supervision.

4.28 Good line management and supervision will help lead professionals to make appropriate decisions regarding the:

- needs presented by the child or young person and family
- areas where they have the skills and knowledge to intervene
- areas where they need to gain support from others with more specialist skills or knowledge
- areas where other practitioners are required to carry out direct work with the child, young person or family

GO TO: www.cwdcouncil.org.uk/providing-effective-supervision

Table 5: Line management supervision

Managerial	Concerned with the practitioners' accountability for their delivery of services and lead professional functions (eg single point of contact; co-ordinating TAC actions).
Support	Line manager and/or local support function offers support, advice and guidance to practitioners in carrying out the lead professional functions – including supporting them to reflect on case work and case management, convening and chairing meetings.
Training and development	Practitioners continuously assesses their strengths, and identifies training and development needs.



Case study: Three-way model of supervision

As part of Warrington's integrated working practices, family support workers (FSWs) were regularly being asked to act as lead professionals. To ensure safe working practices for both staff and families, Warrington decided that a robust supervision model was needed.

How the three-way model works

Every FSW:

- is line managed by an area co-ordinator who focuses on day-to-day working and professional review and development
- is offered monthly professional supervision for their caseload by a senior practitioner from children's social care
- attends a network meeting, facilitated by the senior practitioner, where FSWs come together to discuss working practice and training needs

It is hoped that this three-way model of supervision, as used in Warrington's children's centres, could serve as an area of best practice, possibly being mirrored by other agencies seeking to change their approach to supervision.

Hints and tips:

- endeavour to prioritise every supervision session
- prepare for supervision as this makes for a more valuable session
- encourage reflective practice
- encourage two-way debate and discussion

For further details, see:

Joining the Pieces: Integrated Working in Practice – CWDC Share! 2009

GO TO: www.cwdcouncil.org.uk/cwdc-share

Capacity and workload

4.29 Clearly, the time taken up by lead professional functions will vary according to the level of the child or young person's needs, the number of practitioners involved and the duration of the involvement.

4.30 Being the lead professional can be more time-intensive than being a supporting practitioner in the same case. However, the lead professional will not always be the same person, and the time pressures involved in delivering the lead professional functions can be offset against other cases the practitioner may be involved in, where the demands on their time may be less significant.

4.31 These variations need to be considered by operational managers when setting and allocating caseloads. There are particular implications for staff who may be working part-time in a multi-agency setting and part-time in their home agency. Clear communication is necessary between both services so that the individual is not overwhelmed with lead professional or caseload responsibilities.



Administrative support

4.32 Many areas have found it helpful to ensure that lead professionals have some administrative back-up, for example:

- assistance in producing documentation for meetings
- minute taking
- keeping contact details up to date
- keeping files and information sharing systems up to date

Hints and tips for managers

Finally, the following tips are given by those already delivering a lead professional model:

- Find advocates for the lead professional: people who have been lead professionals are very useful in taking the learning from their experience back to their home agencies to persuade others of the benefits of this way of working.
- For people who are new to this way of working, think about setting up a system of lead professional mentoring or a buddy system by practitioners who have been lead professionals before. This could include setting up a group email or virtual network.
- Where families are receiving support from a number of practitioners, the lead professional may find it useful to have a diary or calendar for families in which they can write down visits and other scheduled work.
- At the initial multi-agency meeting, attended by the family and child or young person, it may be useful to record needs on white-boards and then prioritise them. The top three priorities are then translated into an action plan and tasks to achieve success, allocated to appropriate agencies and to the family. A time scale is agreed. This is electronically recorded, printed off and signed by all the relevant parties. A lead professional is appointed with the agreement of the child or young person and family. Review dates are set.
- Some areas have found a newsletter helpful to introduce the new way of working. This, coupled with initial training, means that, by the time a practitioner becomes a lead professional, they know what support is available and will see it as 'one of the things practitioners do'.



Annex

The Team Around The Child (TAC) and the Lead Professional

A guide for managers



05



Annex A: Every Child Matters outcomes and aims

Be healthy	<ul style="list-style-type: none"> • physically healthy • mentally and emotionally healthy • sexually healthy 	<ul style="list-style-type: none"> • healthy lifestyles • choose not to take illegal drugs
Stay safe	<ul style="list-style-type: none"> • safe from maltreatment, neglect, violence and sexual exploitation • safe from accidental injury and death • safe from bullying and discrimination 	<ul style="list-style-type: none"> • safe from crime and anti-social behaviour in and out of school • have security, stability and are cared for
Enjoy and achieve	<ul style="list-style-type: none"> • ready for school • attend and enjoy school • achieve stretching national educational standards at primary school 	<ul style="list-style-type: none"> • achieve personal and social development, and enjoy recreation • achieve stretching national educational standards at secondary school
Make a positive contribution	<ul style="list-style-type: none"> • engage in decision-making and support the community and environment • engage in law-abiding and positive behaviour in and out of school • develop positive relationships and choose not to bully and discriminate 	<ul style="list-style-type: none"> • develop self-confidence and successfully deal with significant life changes and challenges • develop enterprising behaviour
Achieve economic well-being	<ul style="list-style-type: none"> • engage in further education, employment or training on leaving school • ready for employment • live in decent homes and sustainable communities 	<ul style="list-style-type: none"> • access to transport and material goods • live in households free from low income



Annex B: The lead professional for children and young people with additional needs

1. For most children and young people who have additional needs and require support from a range of services, their lead professional will be drawn from the range of practitioners who are currently delivering early intervention and preventive services. They could be based in the third or the statutory sector and could include (but are not limited to):

- midwives
- health visitors
- community children's nurses
- early years workers, for example, nursery nurses
- children centre workers
- play workers
- school nurses
- school support staff
- teachers and special educational needs (SEN) co-ordinators
- education welfare officers
- personal advisers
- youth workers
- social workers
- family workers
- substance misuse workers
- housing support staff
- teenage pregnancy advisers

2. The practitioner most appropriate to be the lead professional for a particular child or young person is likely to change over time, as the complexity and nature of the child or young person's needs change. A child or young person should help choose their lead professional.

Implications for universal services

3. Universal services such as education, health and social welfare are often the first and in closest contact to a child or young person. They will work together in order to prevent problems from occurring and improve outcomes for children and young people. This means they are often the natural choice of lead professional for a child or young person as part of integrated service delivery.

The introduction of such models are most effective when they are part of a new approach to multi-agency planning and service delivery which gives universal services access to co-ordinated support for children, young people and families who need it. A commitment to joint working, and a

clear strategy for the delivery of targeted support, should help ensure that it does not create additional burdens for these services.

Schools and early years services

4. As well as the practitioners identified above, it may be appropriate for school staff or early year's practitioners to take on the lead professional functions, especially in schools offering access to extended services. In some cases, heads and deputy heads have taken on the role of lead professional with success. Some secondary schools have welcomed multi-agency teams to be based in their schools to work with both their staff and with their feeder primary schools. A special educational needs co-ordinator (SENCO) may, where appropriate, act as a lead professional for a child or young person with special educational needs. Primary head teachers and Sure Start Children's Centres practitioners have also taken on the lead professional functions. In all these cases, this works well when they are the person with the strongest



relationship with the family; where the child or young person's needs are primarily nursery or school-based and where it is useful for the school or nursery to hold the overview. Where the child or young person's needs require input from a range of professionals outside the school or nursery setting, or a high degree of family support is required, it may be appropriate to identify someone from another service to take on the lead professional functions. During Year 9, for pupils with statements, the personal adviser takes on responsibility for overseeing the delivery of the transition plan and is therefore well placed to be the lead professional.

5. In Education Improvement Partnerships, an individual should be designated to take responsibility for provision for pupils with a range of needs. Where the support of different services is required, that person will ensure that the service is co-ordinated and progress is monitored. Therefore, they will be an appropriate person to either be the lead professional or ensure that someone

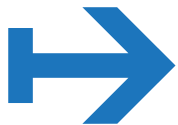
else is in place and supported to deliver these functions.

Post-16 learning

6. In the post-16 learning environment, young people with additional needs are less likely than their peers to have a Level 2 qualification. Therefore, their two principal learning opportunities will be in further education or on an Entry to Employment (E2E) programme.
7. The White Paper *Further Education: Raising Skills, Improving Life Chances* (DfES, 2006) strengthens pastoral support systems in further education, to help learners to cope with independent learning and navigate the more complex learning environment. Where a young person has a range of additional needs – including learning needs – which require integrated support, one person should be appointed to take on the functions of the lead professional, co-ordinating the support and acting as a single point of contact for the young person.

This person may be their Connexions personal adviser, a personal tutor in the college (if they have one) or another relevant practitioner from among the other agencies involved with the young person. Providing integrated support to this young person will require strong links and effective joint working between staff in further education colleges and those services delivering targeted support.

8. In E2E programmes, young people are registered with Connexions and are supported by a personal adviser. Where a young person has a range of additional needs and is receiving support from a number of services, the personal adviser has a remit to co-ordinate this provision and act as a single point of contact. This already means that they are carrying out the functions of the lead professional (unless the young person is looked after or on the child protection register, in which case the named social worker will be the lead professional – see Annex C).



Primary healthcare

9. The *Children's National Service Framework* (NSF) sets the context for the work of NHS organisations and partner agencies in relation to the health and well-being of children and young people. The ten-year programme requires agencies to work together to achieve sustained improvement in children and young people's health and well-being. It forms an integral part of the Every Child Matters (ECM): Change for Children programme.
10. Health visitors, midwives and school nurses are, in many cases, already involved in new ways of multi-agency working, and have acted as lead professionals very successfully. Some areas have found GPs more difficult to engage, as their work is strictly defined by their GP contract.
11. Engaging health professionals from an early stage in the development of a CAF, information sharing arrangements and lead professional models of working

will result in a more comprehensive and effective service. This work should build on developments at a strategic level to secure the commitment and involvement of health services within the context of the local Children's Trust arrangements. It will be helpful at an operational level to:

- be familiar with the Children's NSF and, if possible, local plans for its implementation
- identify and highlight common aims and objectives
- reassure that you are not looking for great changes in structure or practice but an adaptation of approach that will promote integration, prevent duplication and ensure a more consistent approach for families
- identify shared training opportunities

Appointing a lead professional for a child with additional needs

12. The common service delivery pathway shown in Section 1 is an exemplar of a generic step-by-step process for

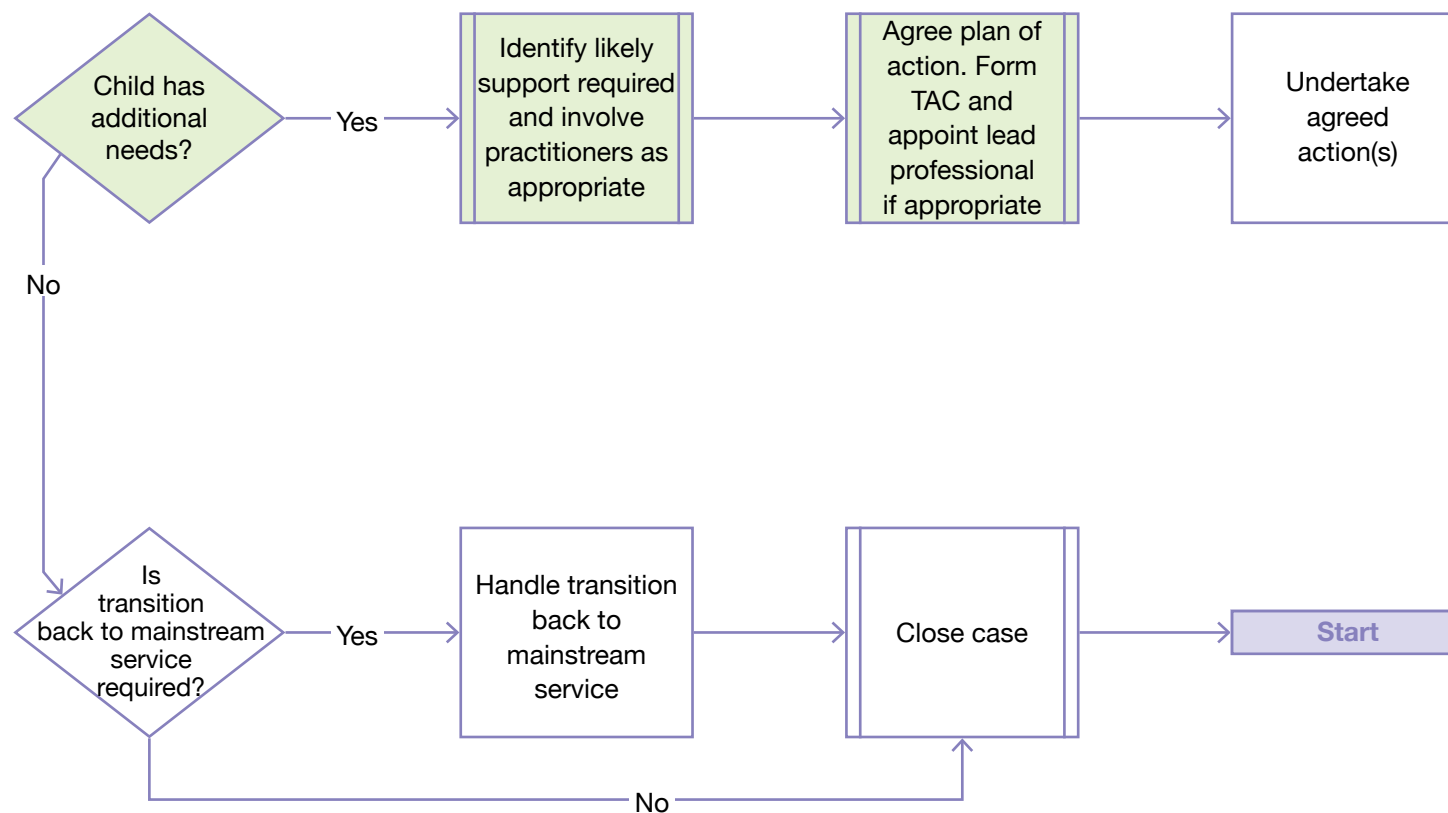
delivering an integrated service to a child or young person with additional needs. We use a section of this below to illustrate a step-by-step process for appointing a lead professional where additional needs are previously unidentified. It assumes that an assessment, usually via CAF, has been carried out by a practitioner with the skills and knowledge to do this, they may or may not become the lead professional

13. Good practice suggests the information gathered as part of this process should be used to help determine the most appropriate practitioner to be the lead professional. Deciding who is best placed to be the lead professional can be done most effectively when all parties, including the child or young person and family, have discussed the identified needs, agreed the intended outcomes and agreed the contribution that each will make in achieving the intended outcomes. There are some key principles which can inform this process:



Figure 7: Appointing a lead professional for a child or young person with additional needs

This diagram is an extract taken from the common service delivery pathway (page 17)





- Agreeing a plan of action places responsibility and expectations not only on the person designated to carry out the lead professional role but on every practitioner involved in supporting the child or young person or family (ie. the TAC). These interventions, which are set out in the CAF action plan, are a vital part of the overall support programme.
- The lead professional will be responsible for gathering people together to review progress, but it is up to all individuals to deliver on their agreed actions. This takes a commitment and recognition from everyone involved that the process is a shared one.
- In most cases, the lead professional will also be carrying out case work with the child or young person and/or their family, as identified in the CAF plan. Their lead professional functions are likely to be in addition to this and it is helpful for line management arrangements to anticipate and address any impact on workload (as discussed in [Section 4](#)).

Criteria for choosing the lead professional

14. Good practice suggests that where areas have set out clear criteria by which lead professionals are chosen and a clear process to facilitate this, disagreements or confusion relating to the practitioners choosing or agreeing to carry out the functions are less likely. Such criteria could include reference to such issues as:
 - the predominant needs of the child, young person or family
 - the level of trust built up with the child, young person or family
 - the wishes of the child, young person or family
 - the person with primary responsibility for addressing the needs of the child, young person or family's needs
 - a clear statutory responsibility to lead on work with the child, young person or family
 - a previous or potential ongoing relationship with the child or young person
 - the skills, ability and capacity to provide a leadership and co-ordinating role in relation to other practitioners involved with the child, young person or family
15. The lead professional should be the practitioner who is **most relevant** to the child or young person's plan and who has the skills to carry out the specified functions. This is not necessarily the practitioner who first becomes involved with the child, young person or family or who carries out the CAF. Experience from Information Sharing Assessment trailblazers suggests that if the person who carries out the CAF and engages in the first instance with other practitioners is **automatically** designated as lead professional, the result is that many practitioners may become unwilling to carry out a common assessment.
 - an ability to draw in and influence universal and specialist services
 - an understanding of the surrounding support systems which are available to manage and sustain this



Disagreements

16. Sometimes, especially where there are a number of people involved, there may be disagreement about who should be the lead professional. Disagreements may also occur where practitioners are not able or willing to deliver 'their part' of the package of support for the child, young person or family, or where there are differences in approaches to working with the child, young person or family which cannot be resolved through regular meetings.
17. The solution to this lies within the overall approach and commitment to integrated working in your local area. It is vital to have an effective integrated working strategy backed up by appropriate management and accountability structures. This will make disagreements much less common.

Transition to adult services

18. Eligibility for many services ends at 18 or 19. However, some young people with a range of additional needs, such as teenage parents, continue to need support beyond this period. The CAF provides a vehicle for assessing older teenagers' readiness to make the transition to adult services. The planning process that follows a common assessment can ensure that there is a clear plan for addressing any issues identified.
19. The lead professional can play a key role in helping a young person make a smooth transition, in particular by:
 - ensuring the young person understands the support they are entitled to as a young adult and what this means, practically, in the context of local service arrangements
 - accompanying them to introductory meetings with adult services
 - sharing CAF information with adult services where appropriate
20. It will also be helpful for lead professionals to be familiar with how to work with relevant adult services, including awareness of:
 - the circumstances in which a young person is likely to receive services from adult teams
 - the type and level of services available locally
 - local policy and practice guidelines
21. As part of the new local framework for young people's services, in particular Targeted Youth Support (TYS) areas, practitioners will need to consider how they can link with adult services and involve relevant practitioners from these services in their delivery models to promote effective transition for young people. This might include, for example, adult mental health services, approved social workers and Jobcentre Plus advisers.



Annex C: The lead professional for children and young people with complex needs

1. Of those children and young people with additional needs, a small proportion have more significant or complex needs which meet the threshold for statutory involvement.
These children and young people are often defined as having significant or [complex needs](#):
 - children and young people who are the subject of a child protection plan
 - looked-after children and young people
 - care leavers
 - children and young people for whom adoption is the plan
 - children and young people with severe and complex special educational needs
 - children and young people with complex disabilities or complex health needs
 - children and young people diagnosed with significant mental health problems
 - young offenders involved with youth justice services (community and custodial)
2. In these cases, there is already legislation or best practice guidance in place which seeks to ensure these children and young people have a named practitioner to oversee and co-ordinate the delivery of a multiagency programme of support, as well as other functions which may be set out in statute. Examples include the named social worker for looked-after children and young people, or the key worker for children and young people with complex disabilities or complex health needs (see Annex D).
3. The existing legislation and guidance highlight how the lead professional functions set out above are embedded in the wider roles carried out by these practitioners.
4. [The box opposite](#) shows which practitioners are currently defined by legislation or best practice as carrying out the lead professional functions for children with complex needs. A table of the supporting legislation and guidance is set out in Annex E.



Children and young people's workforce practitioners carrying out the lead professional functions	
Care leaver	<p>The personal adviser, or the child or young person's social worker, is the lead professional. Where care leavers remain looked after (eligible children), they should usually have a social worker who, where appropriate, will assume the personal adviser role. However, in some authorities, eligible children will have both a social worker and a personal adviser. Roles and responsibilities will be allocated between them, but the lead statutory accountability will lie with the social worker.</p> <p>Where care leavers have left care before their 18th birthday (relevant children) the lead professional will usually be a personal adviser who may be attached to a specialist leaving care service. The personal adviser must participate in assessment, planning, intervention and review of the young person's needs and maintain their pathway plan. Accountability will be with their line management on behalf of the local authority responsible for supporting the young person.</p>
Adoption cases	<p>For children and young people for whom adoption is the plan, the child or young person's social worker is the lead professional.</p>
Child or young person with special educational needs	<p>The SENCO may, where appropriate, be the lead professional. Where these needs require input from a range of professionals outside the school setting, or a high degree of family support is required, it may be appropriate for someone else to take on the lead role. During Year 9, for pupils with statements, the personal adviser takes on responsibility for overseeing the delivery of the transition plan and is likely to be the lead professional.</p>



Children and young people's workforce practitioners carrying out the lead professional functions (continued)

Child or young person with complex disabilities or complex health needs	<p>Where the child, young person or family have a key worker, they are the lead professional. Key worker models are increasingly in place for children and young people with severe and complex disabilities or health needs, as recommended by the Children's National Service Framework (NSF). Key workers tend to be deployed in one of two ways: (i) as a 'non-designated' key worker, in which they carry out the key worker functions alongside the practitioner role for which they are employed, or (ii) as a 'designated' key worker in which they are employed and paid specifically to carry out a key worker role.</p> <p>Both roles deliver the functions of the lead professional as defined in this guide. Where a key working service is not in place, or where the level of support required is less intense, another practitioner should be appointed to take on the lead professional functions for a disabled or seriously ill child or young person.</p>
Child or young person with mental health needs	<p>Where a Care Programme Approach (CPA) is being followed, the care co-ordinator is the lead professional. Where a CPA is not being followed, it is still appropriate to appoint someone as the lead professional to oversee the delivery of services via a multi-agency approach.</p>
Young offender	<p>For young people on community orders or sentences, the Youth Offending Team (YOT) will allocate a YOT supervising officer. For young people in custody, the supervising officer oversees the management of the case as a whole, linking with the key worker/personal officer in the establishment. The YOT supervising officer in such situations may be the lead professional but, where the young person is looked after or on the child protection register, the lead professional must be the social worker. In all situations where a YOT is involved, the decision as to who should be the lead professional must be agreed locally. If it is agreed that the YOT supervising officer should be the lead professional, this must be with the support of relevant mainstream agencies.</p>



Appointing a lead professional for children with complex needs

5. In cases where a child or young person has complex needs, the lead professional is likely to be identified and appointed as part of the lead agency's multi-agency assessment and planning process. What we have tried to show in the box above is that, through existing statutory processes and roles, there are already procedures in place for ensuring that someone delivers the functions required of the lead professional in some instances.
6. For some children and young people with complex needs; for example, looked-after children and young people, or those in contact with the youth justice system, there may be times when the lead professional from the child or young person's perspective may not be the same person as the lead professional who has statutory and administrative accountability for managing the plan for the child or young person.

For example, the child or young person may have a closer relationship with another practitioner or a foster carer who they will share questions and concerns with, and who they may engage with more readily. In these instances, these two people will need to develop a good working relationship and have protocols for sharing relevant information to ensure that the lead professional (ie. the named social worker) can carry out their role effectively.

7. Children and young people with complex needs are not a static group. Many will move between targeted and more specialist support at different stages. For example, a child or young person on the child protection register will be de-registered once they are assessed to be no longer at risk, and a child or young person who offended will be discharged by the YOT when the set period of intervention comes to an end.

However, they may still require some ongoing support to ensure that their needs do not intensify again. For this reason, we recommend that local areas put in place steps to ensure that a child or young person's needs are assessed when moving out of specialist services. This should involve anyone who may be required to deliver services from that point on (see [Figure 8](#) over).

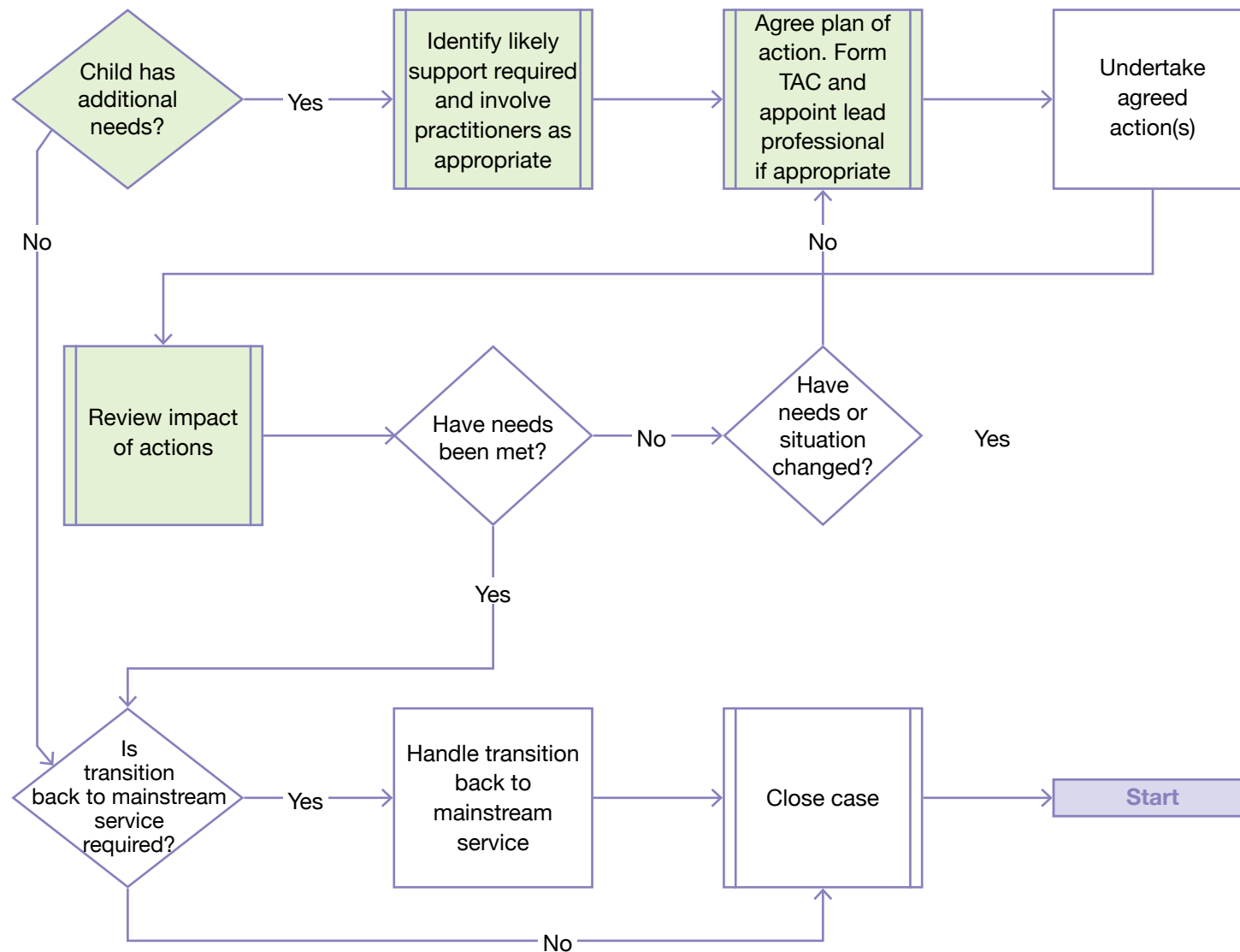
There is no statutory guidance about who should take on the lead role although, in some cases it might be appropriate and practical for this to be the same person who had previously carried out the lead professional functions as part of a specialist intervention.

It is also important that those involved in a specialist service intervention team, for example a YOT team, continue to support the child or young person in their transition to targeted or universal services.



Figure 8: Transfer to a new lead professional when child or young person is no longer in need of statutory services

This diagram is an extract taken from the common service delivery pathway (page 17)





8. A multi-agency planning approach is a key part of ensuring that the lead professional for children and young people with complex needs can carry out their functions effectively. In many cases, this will take place as part of the statutory review process. The principles that apply for children and young people with additional needs also apply here:

- The multi-agency planning process is critical. It places responsibility and expectations not only on the person designated to carry out the lead professional functions, but on every practitioner involved in supporting the child, young person or family.

Their interventions, which will be set out in the child or young person's plan, are a vital part of the overall support programme.

- The lead professional will be responsible for gathering people together to review progress, but it is up to all individuals to deliver on their agreed actions. This takes a commitment and recognition from everyone involved that the process is a shared one.

- Each practitioner in the TAC is responsible and accountable for their actions and the services they provide.

Transition to adult services

9. Many young people with complex needs will continue to require services beyond the age at which they are entitled to them as part of children's services. There are provisions in place for some young people reaching the threshold between child and adult services, namely:

- Local authorities or Connexions services have the power to carry out an assessment of the needs of young people with learning difficulties and disabilities up to the age of 25, to help them make an effective transition to adult services
- Young people in and leaving care continue to get help from social services – via their personal adviser – until they reach 21, or for as long as they remain in an approved programme of education or training

10. In other cases, for example, young people with mental health problems, provision will transfer to adult services at a specified point. In these cases, it would be important for the existing lead professional to begin planning for this transition well in advance and identify what types of support are available from adult services.

11. As part of a broader partnership approach with adult services, it will be helpful for lead professionals to be familiar with how to work with relevant adult services, including awareness of:

- the circumstances in which a young person is likely to receive services from adult teams
- the type and level of services available locally
- local policy and practice guidelines

See Annex B paragraphs 18-21 for more information on effective transitions.



Annex D: Examples of who delivers the lead professional functions in complex cases

Key worker for children and young people with complex disabilities or complex health needs

They may come from a range of backgrounds, co-ordinate service provision, and be a clear point of reference for the family. They have responsibility for co-ordinating and facilitating the total care package. In particular, they will organise the formulation, review and implementation of action plans or family service plans (for young children) in partnership with families and provide:

- a single point of reference for families and those working with the child or young person and family
- practical help negotiating services and structures and coping with multiple contacts
- better co-ordinated assessment of child or young person and family's support needs

- regular review of support arrangements
- regular, long-term contact and continuity of support
- personal or emotional support
- information and help to understand information about disability and services in the context of a child or young person's particular situation

The Children's NSF promotes integrated working and key worker services for children and young people with complex disabilities and complex health needs.

The Early Support programme is aimed specifically at young disabled children (aged up to three) and their families, and supports the local implementation of *Together From The Start*.

Key worker standards have also been developed by the Care Co-ordination Network UK (For more information, see the Resources section at the end of this guide).

Youth offending team supervising officer

Supervision involves co-ordinating those interventions that tackle offending behaviour and providing support and guidance for the young person using a variety of methods, services and facilities. When supervising a young person receiving a range of interventions, the officer will:

- maintain a relationship with the young person that provides a sense of continuity for them
- prepare a young person for the various interventions and deal with any concerns or anxieties
- ensure that the young person knows when and where they should be for different activities
- provide appropriate information about the young person's needs to colleagues/other service providers
- ensure that they are informed about the young person's attendance and progress at each activity
- monitor and evaluate the work achieved
- be sensitive to possible changes in the young person's life



Care co-ordinator for children with serious mental health needs

The care co-ordinator is a key element of the Care Programme Approach (CPA), the standard method for supporting people with severe mental illness in the community. The role of care co-ordinator (formerly called a key worker) is usually taken by the person best placed to oversee care planning and resource allocation. They are responsible for keeping in close contact with the service user and for advising the other members of the care team of changes in circumstance that might require a review of the care plan.

The care co-ordinator should have the authority to co-ordinate the delivery of the care plan and be respected by all those involved in delivering it, regardless of agency of origin. The CPA was originally an adult planning tool but is increasingly being used with young people, particularly those in in-patient care or receiving high levels of care in the community. However, it is still only a small percentage of Child and Adolescent Mental Health Services (CAMHS) users who will come under CPA, and most will be in the 16-18 age group. (From *Modernising the Care Programme Approach: A Policy Booklet*, 1999).



Annex E: The legislative framework for children with complex needs

Area of need	Designated activities which relate to lead professional functions	Status of guidance
Children and young people with additional needs	<p>Where children, young people and their families have multiple needs, integrated support is provided by a number of professionals in order to achieve better outcomes. In these cases, it may be appropriate for one practitioner among those involved to take on a lead role in co-ordinating the support.</p> <p>(Section 2.15 of the statutory guidance supporting section 11(4) of <i>The Children Act 2004</i>)</p>	Should be complied with unless local circumstances indicate exceptional reasons which justify a variation.
All Children in Need, during assessment phase (see over for specific areas of need)	<p>Under section 17 of <i>The Children Act 1989</i>, social services departments carry lead responsibility for establishing whether a child is in need and for ensuring services are provided to that child as appropriate. This may not require social services to provide the service itself. Following a Child in Need assessment, for example, a child with communication impairment may require the help of a NHS speech therapist and additional classroom support at school rather than any specialist services of the social services department. The third sector may have an important role to play in contributing to an assessment and providing services to a family.</p> <p>The social services department has the lead role for ensuring initial and core assessments are carried out according to the <i>Framework for the Assessment of Children in Need and their Families</i>. In practice, this means planning, preparation, co-ordination and communication with professionals in other agencies. This is where inter-agency protocols (and intra-agency where adult services are concerned) can be an effective means of providing a structure for collaboration and lines of communication.</p>	Statutory guidance under section 7 of <i>Local Authority Social Services Act 1970</i> . Should be complied with unless local circumstances indicate exceptional reasons which justify a variation.



Area of need	Designated activities which relate to lead professional functions	Status of guidance
Children in Need continued	<p>For children looked after and children whose names have been placed on the child protection register and who are subject to a child protection plan, the responsibilities for monitoring and reviewing the children's progress (including safety) are set out in the same <i>Regulations and Guidance</i> (Department of Health 1991; Department of Health et al, 1999). Social services departments have lead responsibility for ensuring these reviews take place within the prescribed time scales. There are no such regulations governing the review of welfare of other Children in Need.</p> <p>However, it is essential that agreements are reached on an inter-agency basis about how best to monitor and review Children in Need plans. The lead agency for this activity may not necessarily be the social services department, as another agency may be better placed to undertake this responsibility.</p> <p>(Sections 5.5 and 5.9, <i>Framework for the Assessment of Children in Need and their Families</i>, 2000)</p>	Statutory guidance under section 7 of <i>Local Authority Social Services Act 1970</i> . Should be complied with unless local circumstances indicate exceptional reasons which justify a variation.



Area of need	Designated activities which relate to lead professional functions	Status of guidance
Children who are the subject of a child protection plan	<p>Each child who is the subject of a child protection plan should have a named key worker. The key worker is responsible for making sure that the outline child protection plan is developed into a more detailed inter-agency plan. They should complete the core assessment of the child and family, securing contributions from core group members and others as necessary.</p> <p>The key worker is also responsible for acting as the lead professional for the inter-agency work with the child and family. They should co-ordinate the contribution of family members and other agencies to plan the actions which need to be taken, put the child protection plan into effect, and review progress against the planned outcomes set out in the plan. It is important that the role of the key worker is fully explained at the initial child protection conference and at the core group. (Sections 5.115 and 5.116 of <i>Working Together to Safeguard Children, 2006</i>)</p>	Statutory guidance under section 7 of the <i>Local Authority Social Services Act 1970</i> . Should be complied with unless local circumstances indicate exceptional reasons which justify a variation.



Area of need	Designated activities which relate to lead professional functions	Status of guidance
Looked-after children	<p>All looked-after children must have a care plan which must be based on an assessment of need (core assessment) led by the social worker but likely to draw on other professional assessments. The social worker co-ordinates the services that the assessment indicates are necessary.</p> <p>(Section 5.12, <i>Framework for the Assessment of Children in Need and their Families</i>, 2000)</p> <p>Children's homes: Each child's placement plan is monitored by a key worker within the home who ensures that the requirements of the plan are implemented in the day-to-day care of that child. The placement plan sets out the roles and responsibilities of the respective professionals involved in the child's care and how this will be ministered. The placement plan indicates how the placement will contribute to the outcomes set out in the child's care plan.</p> <p>The key worker also provides individual guidance and support to the child and regularly makes time available to the child to enable them to seek guidance, advice and support on any matter. Where homes do not use key working schemes, this responsibility passes to the registered person or to another member of staff nominated by the registered person.</p> <p>(Section 2.2 <i>Children's Home National Minimum Standards</i>)</p>	<p>Statutory guidance under section 7 of <i>Local Authority Social Services Act 1970</i>.</p> <p>The Department of Health publishes the minimum standards. These are based on Children's Homes Regulations 2002 – Fostering Services Regulations 2002 and other sets of regulations; The <i>Children Act 1989</i>, and The <i>Care Standards Act 2000</i>.</p> <p>The standards form the basis for judgements made by the Commission for Social Care Standards.</p>



Area of need	Designated activities which relate to lead professional functions	Status of guidance
Looked-after children continued	<p>Foster carers: There may be circumstances (eg. children in permanent foster placements) where a foster carer may act as lead professional from the child's perspective, taking responsibility for most aspects of a child's day-to-day care – though not being ultimately accountable for the care plan. This responsibility remains with the social worker. In residential special schools, each child has at least one key worker (or similar person) within the school who provides individual guidance and support to the child.</p> <p>In residential special schools: Each child has at least one key worker (or similar person) within the school who provides individual guidance and support to the child or young person. They regularly make time available to the child or young person to enable the child or young person to seek guidance, advice and support on any matter. They monitor that the school is complying on a day-to-day basis with the child or young person's placement plan.</p>	<p>Statutory guidance under section 7 of <i>Local Authority Social Services Act 1970</i>.</p> <p>The Department of Health publishes the minimum standards. These are based on Children's Homes Regulations 2002 – Fostering Services Regulations 2002 and other sets of regulations; The <i>Children Act 1989</i>, and The Care Standards Act 2000.</p> <p>The standards form the basis for judgements made by the Commission for Social Care Standards.</p>



Area of need	Designated activities which relate to lead professional functions	Status of guidance
Care leavers	<p>The personal adviser or child's social worker is the lead professional. 'Eligible children' should usually have a social worker who, where appropriate, will assume the personal adviser role. In some authorities, eligible children will have both a social worker and a personal adviser. Lead statutory accountability will lie with the social worker. Where care leavers have left care before their 18th birthday (relevant children), the lead professional will usually be a personal adviser.</p> <p>Accountability will be with their line management on behalf of the local authority responsible for supporting the young person. The functions of a personal adviser include: "To co-ordinate the provision of services and to take reasonable steps to ensure that (the child or young person) makes use of such services."</p> <p>(see Regulation 12 of the Children (Leaving Care) (England) Regulations 2001 for full list of functions)</p>	<i>Children (Leaving Care) Act 2000.</i>



Area of need	Designated activities which relate to lead professional functions	Status of guidance
Children for whom adoption is the plan	<p>All children will have a named social worker who will be responsible for them throughout the adoption process.</p> <p><i>(National Adoption Standards for England, 2001)</i></p> <p>Work is in progress to incorporate the National Adoption Standards into the statutory guidance for <i>The Adoption and Children Act 2002</i>.</p> <p>(see Chapters 1, 2, 4, 5, and 7 of statutory guidance issued in respect of <i>The Adoption and Children Act 2002</i> and associated regulations)</p>	Statutory guidance under section 7 of <i>Local Authority Social Services Act 1970</i> .
Children with special educational needs	<p>The SENCO has responsibility for co-ordinating educational provision for children and young people with special educational needs within their school and their responsibilities may include liaising with other services outside the school. In Year 9, the annual review should include the development of a Transition Plan. The Connexions service is responsible for overseeing the delivery of the Transition Plan and the Personal Adviser should co-ordinate its delivery.</p>	<i>SEN Code of Practice, 2001; Education (Special Educational Needs) (Information) (England) Regulations 1999</i>



Area of need	Designated activities which relate to lead professional functions	Status of guidance
Disabled children and those with complex health needs	<p><i>Together From The Start</i> (for under 3 year-olds) states that all children with complex needs and their families should be allocated a key worker. Recognised as good practice for other age groups. Definitions of key worker functions vary but can be summarised as: 'Co-ordinates service provision and is a clear point of reference for the family. Has responsibility for co-ordinating and facilitating the total care package in partnership with families.' See Annex D for the range of functions provided.</p> <p>Standard 8 (disabled children and those with complex needs) of the Children's NSF states: 'Children and young people who are disabled or who have complex health needs receive co-ordinated, high-quality child and family-centred services which are based on assessed needs, which promote social inclusion and, where possible, which enable them and their families to live ordinary lives.'</p> <p>Marker of good practice: Disabled children and young people receive child-centred multi-agency co-ordinated services from the point of referral through identification and assessment to delivery.</p> <p>Paragraph 5.8: Parents of severely disabled children, or those with high levels of need, require a single point of contact with services and an effective, trusted and informed named person (a key worker or care manager) to help them obtain the services they require. One of the markers of good practice in relation to this standard is that key worker services are provided in line with the guidance in <i>Together From The Start</i> (DH and DfES, 2003) and the key worker standards produced by Care Co-ordination Network UK (2004), supported by cross-agency senior management commitment.</p>	<p><i>Together From The Start</i> (DfES and DH, 2003). This is published as 'good practice guidance'.</p> <p><i>National Service Framework for Children, Young People and Maternity Services</i> (DH and DfES, 2004). This is published as best practice guidance.</p>



Area of need	Designated activities which relate to lead professional functions	Status of guidance
Children diagnosed with complex mental health problems	<p>One of the four main elements of the Care Programme Approach (CPA) is the appointment of a care co-ordinator to keep in close touch with the service user and to monitor and co-ordinate care. In these cases, the co-ordinator will be carrying out the lead professional functions; however, currently only a small percentage of Child and Adolescent Mental Health Services (CAMHS) users come under CPA, and most of them are in the 16-18 age group.</p> <p>Standard 9 (mental health and psychological well-being) of the Children's NSF is supportive of the more widespread adoption of the CPA, for example:</p> <p>'All children and young people, from birth to their eighteenth birthday, who have mental health problems and disorders, have access to timely, integrated, high-quality, multi-disciplinary mental health services to ensure effective assessment, treatment and support, for them and their families.'</p> <p>Marker of good practice: 'When children and young people are discharged from in-patient services into the community and when young people are transferred from child to adult services, their continuity of care is ensured by use of the CPA.'</p>	<p><i>Care Programme Approach</i> (DH, 1999). Issued as best practice guidance.</p> <p><i>National Service Framework for Children, Young People and Maternity Services</i> (DH and DfES, 2004). This is published as best practice guidance.</p>



Area of need	Designated activities which relate to lead professional functions	Status of guidance
Children involved with youth justice services (YOT, in custody, secure accommodation)	<p>This section describes the contact Youth Offending Teams (YOT) have with young people. The nature of the contact will vary considerably according to the circumstances. A YOT officer may take on the role of the lead professional in these situations but this must always be subject to agreement by the local YOT and with the support of all relevant mainstream agencies. Many children and young people who offend have wider health and well being needs which can remain unmet if the focus is solely on their offending behaviour. A YOT should never take on the role of lead professional in cases where the child or young person is a looked-after child or a child protection case.</p> <p>1. Young people on final warnings: A designated member of each YOT should act as a key worker to oversee the final warning intervention from start to finish. (from <i>Key Elements of Effective Practice: Final Warning Intervention</i>)</p> <p>2. Young people on court-ordered interventions (ie. referral, reparation, action plan, parenting, supervision, community punishment and rehabilitation, attendance centre, drug treatment and testing (DTTO), curfew, antisocial behaviour (ASBO) and child safety orders): A ‘responsible officer’ should be appointed from within the YOT. National Standards state that work should follow the principles of effective practice based on research and evidence as identified by the Youth Justice Board’s (YJB) <i>Key Elements of Effective Practice: Assessment, Planning Interventions and Supervision</i>, namely:</p> <ul style="list-style-type: none">• each young person has an allocated ‘case supervisor’• supervision involves co-ordinating these interventions that tackle offending behaviour, and providing support and guidance for the young person using a variety of methods, services and facilities	<p><i>National Standards for Youth Justice Services</i> (YJB, 2004). Issued by Secretary of State. Any departure from the standards needs to be appropriately authorised by the YOT manager, governor or head of establishment and reasons recorded.</p> <p>Other guidance listed here is taken from the <i>Key Elements of Effective Practice</i> series produced by the YJB and available at GO TO: www.yjb.gov.uk</p>



Area of need	Designated activities which relate to lead professional functions	Status of guidance
<p>Children involved with youth justice services (YOT, in custody, secure accommodation) continued</p>	<p>Note: In some instances, the terms YOT officer, case supervisor, responsible officer and allocated case supervisor have been used interchangeably. In practice, they all undertake the core lead professional functions but, for the purposes of clarity, the following definitions are offered:</p> <ul style="list-style-type: none">• The YOT officer or ‘responsible officer’ refers to a pre-sentence report writer or an officer involved in preventive work. YOT prevention officers work with young people already involved in low-level offending or anti-social behaviour, through Youth Inclusion Programmes, Youth Inclusion Support Panels or other interventions. It is essential that these workers have the support of the other mainstream services to be able to co-ordinate effective interventions.• The allocated case supervisor or supervising officer is an officer who has statutory responsibility and is likely to be involved with the young person on a longer term, with clear supervision plans and interventions identified. <p>3. Persistent young offenders on intensive supervision and surveillance programmes (ISSP): The ISSP must be enforced in line with the requirements relating to bail, community supervision or the detention and training order as appropriate. This is the responsibility of the supervising officer. Effective case management arrangements should ensure that there is clear responsibility for co-ordination of individual programmes, together with strong and consistent support for the young person (see <i>Key Elements of Effective Practice: ISSPs</i>).</p>	<p><i>National Standards for Youth Justice Services</i> (YJB, 2004). Issued by Secretary of State. Any departure from the standards needs to be appropriately authorised by the YOT manager, governor or head of establishment and reasons recorded.</p> <p>Other guidance listed here is taken from the <i>Key Elements of Effective Practice</i> series produced by the YJB and available at GO TO: www.yjb.gov.uk</p>



Area of need	Designated activities which relate to lead professional functions	Status of guidance
Children involved with youth justice services (YOT, in custody, secure accommodation) continued	4. Young people in custody: <ul style="list-style-type: none">• A key worker, case worker or case manager (from within the institution) must be allocated to each young person to provide advice and assistance during their period in custody.• A supervising officer from the YOT must be appointed within one working day of sentence and Asset completed before arrival at the institution. Secure establishment staff must deliver the training plan with the active support of the supervising officer. The supervising officer must make regular contact with secure establishment staff to discuss progress, and must maintain regular contact with the parent(s) or carer(s).• On transfer to the community, the training plan must be reviewed within ten days. The supervising officer must chair the review.	<p><i>National Standards for Youth Justice Services</i> (YJB, 2004). Issued by Secretary of State. Any departure from the standards needs to be appropriately authorised by the YOT manager, governor or head of establishment and reasons recorded.</p> <p>Other guidance listed here is taken from the <i>Key Elements of Effective Practice</i> series produced by the YJB and available at GO TO: www.yjb.gov.uk</p>



Area of need	Designated activities which relate to lead professional functions	Status of guidance
<p>Children involved with youth justice services (YOT, in custody, secure accommodation) continued</p>	<p>5. Young offenders involved with statutory social services:</p> <ul style="list-style-type: none">• Social services departments have a continuing responsibility for looked-after children who offend, Children in Need, providing accommodation for children and young people transferred from police stations under section 38 (6) of The Police and Criminal Evidence Act 1984, and those remanded to local authority accommodation.• YOTs can hold, where appropriate, Children in Need cases, but should never lead child protection cases or looked-after children cases (see <i>Sustaining the Success</i>, 2004).• If there is a seconded social worker based in the YOT, they could be the lead professional for looked-after children who are offending. The overall responsibility for the young person remains with the social worker and children's services.	<p><i>National Standards for Youth Justice Services</i> (YJB, 2004). Issued by Secretary of State. Any departure from the standards needs to be appropriately authorised by the YOT manager, governor or head of establishment and reasons recorded.</p> <p>Other guidance listed here is taken from the <i>Key Elements of Effective Practice</i> series produced by the YJB and available at GO TO: www.yjb.gov.uk</p>



Resources

Common Assessment Framework

Early identification, assessment of needs and intervention: The Common Assessment Framework for children and young people – a guide for practitioners

www.dcsf.gov.uk/everychildmatters/strategy/deliveringservices1/caf/cafframework

Early identification, assessment of needs and intervention: The Common Assessment Framework for children and young people – a guide for managers

www.dcsf.gov.uk/everychildmatters/strategy/deliveringservices1/caf/cafframework

The Common Assessment Framework and schools fact sheet

www.dcsf.gov.uk/everychildmatters/strategy/deliveringservices1/caf/cafframework

Non-statutory guidance for children's services and housing services in using the CAF when dealing with young people who are homeless or at risk of being made homeless.

www.dcsf.gov.uk/everychildmatters/strategy/deliveringservices1/caf/cafframework

CAF form in full including delivery and review form

www.dcsf.gov.uk/everychildmatters/resources-and-practice/TP00004/

Separate delivery and review form
www.dcsf.gov.uk/everychildmatters/resources-and-practice/TP00004/

Separate consent statement
www.dcsf.gov.uk/everychildmatters/resources-and-practice/TP00004/

Lead professional

The Team Around the Child and lead professional: Co-ordinating and delivering integrated services for children and young people – a guide for practitioners

www.dcsf.gov.uk/everychildmatters/strategy/managersandleaders/leadprofessional/leadprof

Integrated services

Championing Children: a framework for those who are leading and managing integrated children's services

www.cwdcouncil.org.uk/championing-children

Making It Happen: booklet supporting the implementation of effective frontline integrated working practice
www.dcsf.gov.uk/ecm/resources-and-practice/IG00130

Information sharing

Information sharing: Guidance for practitioners and managers and other supporting documents
www.dcsf.gov.uk/ecm/informationsharing

ContactPoint:
www.dcsf.gov.uk/ecm/contactpoint

National eCAF:
www.dcsf.gov.uk/ecm/ecaf

Training

National core training materials are available at www.dcsf.gov.uk/everychildmatters/strategy/deliveringservices1/iwtraining/training



Families

Think Family: an initiative to improve support for the most disadvantaged families and prevent problems passing down from excluded parents to their children.

www.dcsf.gov.uk/everychildmatters/strategy/parents/workingwithparentscarersandfamilies

Health

Healthy lives, brighter futures: The strategy for children and young people's health

www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_094400

Children in Need

Integrated Children's System: framework for working with Children in Need and their families

www.dcsf.gov.uk/everychildmatters/safeguardingandsocialcare/integratedchildrenssystem/ics

Organisations

Council for Disabled Children (CDC) provides a national forum for the discussion and development of a wide range of policy and practice issues relating to service provision and support for disabled children and young people and those with special educational needs.

www.ncb.org.uk/cdc

Care Co-ordination Network UK promotes and supports care co-ordination and key working services for disabled children and their families.

www.ccnuke.org.uk



Notes

The Children's Workforce Development Council leads change so that the thousands of people and volunteers working with children and young people across England are able to do the best job they possibly can.

We want England's children and young people's workforce to be respected by peers and valued for the positive difference it makes to children, young people and their families.

We advise and work in partnership with lots of different organisations and people who want the lives of all children and young people to be healthy, happy and fulfilling.

The Department for Children, Schools and Families and the Children's Workforce Development Council work together to support integrated working.

Visit www.everychildmatters.gov.uk/integratedworking for more information.

You can download this document online at:

www.cwdcouncil.org.uk

www.dcsf.gov.uk/everychildmatters/strategy/deliveringservices1/caf/cafframework

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