

### 5.3 Adult mental health

#### Recommended interface with the CAF

As recommended in the National CAMHS Review, adult services should consider using the common assessment if they are trained and it is appropriate. If not, they should work in collaboration with other practitioners as necessary.

### 5.4 Health visitors, midwives and community nurses

#### Recommended interface with the CAF

Health practitioners should complete the common assessment when there is potential unmet need that cannot be met within their single agency.

### 5.5 General Practitioners

#### Recommended interface with the CAF

GPs should complete common assessments when appropriate in collaboration with other practitioners as necessary.

### 5.6 Metropolitan Police Service (MPS)

In response to the *Every Child Matters* agenda and as an attempt to achieve earlier identification of needs, the MPS have introduced the Merlin Pre-assessment Checklist (Merlin PAC), which they complete when they are concerned that a child or young person has an unmet additional need (as per the five key outcomes of the Children's Act 2004).

The Merlin PAC can be completed by any member of the police service and all Merlin PACs are sent to the Public Protection Desk (PPD) for an initial assessment.

PPD's will check if the child/young person (CYP) is known on police systems. They will either retain for further investigation or a problem solving approach on the borough.

Another option is to send to Child Abuse Investigation Team (SCD5 or CAIT) if the matter is within their remit. The other option is to send to the most appropriate Local partnership agency. This would be completed under the Local Information sharing Protocol.

#### Recommended interface with the CAF

Police staff that work more closely with CYP in multi-agency teams e.g. Safer Schools and YOT/YOS may collaborate on common assessments or become a member of the Team Around the Child when appropriate.<sup>1</sup>



<sup>1</sup> In line with the recommendations of the Association of Chief Police Officers (ACPO)



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### Our Partners



# Young London Matters



GOVERNMENT OFFICE  
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## Mobility and Young London

### Annex 3: Common Assessment Framework (CAF) interface with other assessments



**ALDCS**  
Association of London  
Directors of Children's  
Services

## Annex 3: Common Assessment Framework (CAF) interface with other assessments

This annex outlines regional guidance for managers and practitioners relating to the interface between the Common Assessment Framework and other key assessment/referral tools and key interventions.

It is part of a series of annexes from *Integrated Working Without Boundaries - The London Common Assessment Framework (CAF) Protocol*.

The recommendations in this guidance have been developed through consultation with local, regional and national partners.

### 1. Background

The CAF was introduced as a shared assessment tool for all practitioners that work with children and families in the UK. The common assessment has been specifically designed to reduce duplicate assessments and provide a common holistic framework for assessing need. It also facilitates integrated support and joint planning at an early stage.

Specialist services should always consider using a common assessment to support a child or young person when they move to a lower level of need.

### 2. Education Sector

#### 2.1 Early years action or school action

##### Recommended interface with the CAF

The common assessment could be used as an assessment tool to trigger a school/early years action for a child.

#### 2.2 Early years action plus or school action

##### Recommended interface with the CAF

The common assessment could be used as an assessment tool to trigger a school/early years action plus for a child.

#### 2.3 Assessments relating to learning difficulties (S139)

##### Recommended interface with the CAF

The common assessment can be used as one of the tools to provide supporting evidence for the request of a S139 (previously S140).

#### 2.4 Pastoral support programmes (PSPs)

It is imperative that ALL children or young people at risk of exclusion undertake a common assessment.

##### Recommended interface with the CAF

DCSF recommends that a CAF should be completed as part of a PSP in the *Improving Behaviour and Attendance: Guidance on Exclusions from Schools and Pupil Referral Units*, (DCSF 2008).



### 3. Youth Sector

#### 3.1 ONSET/ASSET

##### Recommended interface with the CAF

Practitioners should complete a common assessment when referring into a Youth Inclusion Support Panel (YISP), which will then inform any subsequent assessment made by Youth Justice services (e.g. Onset). For young people who have been convicted of offences, the CAF does not replace Asset. However, if a CAF has been completed prior to a young person entering the Youth Justice system, this will provide a useful source of information which practitioners should take into account when undertaking assessments of offending behaviour.

Youth Justice practitioners should complete a common assessment if additional needs have been identified that cannot be met by Youth Justice services. The purpose of completing the common assessment is to bring in additional support from other services either at the point of Onset/ASSET being completed, during a Youth Justice programme or when a young person leaves a Youth Justice intervention. Youth Justice practitioners should operate as the Lead Professional when appropriate.

#### 3.2 Substance Misuse

There are a number of different tools/processes used across the London boroughs to support staff in children's services to screen vulnerable groups of young people with an identified propensity to substance use/misuse. Commonly used screening tools include DUST and SMART.

The purpose of the screening process is to identify specific substance-related need and the appropriate level of intervention required to address it. Local screening procedures should be followed when there is a concern regarding drug or alcohol use, perhaps arising out of the CAF or other contact with a young person.

Screening is not the same as a comprehensive substance misuse assessment. However, the areas addressed within the screening process will help to identify risk factors. Screening will also indicate when onward referral may be appropriate, or when specialist advice should be sought in order to decide how best to address the identified need.

##### The interface between substance misuse screening tools and the common assessment.

The common assessment should be completed as an early, or the first, assessment tool. If the common assessment raises concern about substance misuse, screening should be undertaken by the worker undertaking the common assessment if they are trained in screening for substance misuse. If the worker is not trained for screening, the young person should be referred on to someone in the same agency who is. The initial point of contact of the local substance misuse treatment service should be located on the local authority Family Information Service Directory.

##### The substance misuse specialist should complete a common assessment in addition to any specialist screening if:

- the first contact made by a young person is to a substance misuse specialist; or
- the referral does not come from Children's Services; or
- a young person reaches the end of their treatment journey and a common assessment is not in place.

The specialist should be enabled to draw the Team Around the Child together where the most appropriate professional to act as the Lead Professional will be identified. The CAF will also play a vital role in ensuring an effective plan is in place for young people leaving targeted support or specialist treatment.

#### 3.3 Assessment Planning Intervention and Review (APIR)

##### Recommended interface with the CAF

Connexions advisers should complete the common assessment when there are additional unmet needs that cannot be met within the single agency.

### 4. Children's Social Care

##### Recommended interface with the CAF

Where there are child protection concerns, practitioners should follow the Local Safeguarding Children Procedures and refer without delay.

### 5. Health

#### 5.1 Early Support

##### Recommended interface with the CAF

The common assessment is a holistic tool that can be filled out collaboratively to gain a full picture of unmet additional needs. This information could be used as supporting evidence to request specialist support for a child from an early support service.

The common assessment can be used to enable specialist early support services.

#### 5.2 CAMHS (child and adolescent mental health services)

The national CAMHS review supports the use of the common assessment as a tool to help practitioners identify a child's psychological and mental health. This will then lead to an accurate assessment of needs and decisions about whether they can be met within their own service or if more specialist mental health support is needed.

##### Recommended interface with the CAF

The common assessment should be completed as an early or the first assessment tool.

If the common assessment raises a concern about emotional or psychological ill health, screening should be undertaken by the worker undertaking the CAF if they are trained in screening for this. If the worker is not trained, the young person should be referred on to someone else in their agency who is, or contact should be made with the CAMHS service in the borough of residence so that appropriate identification of need can take place. The initial point of contact should be located on the local authority Family Information Service Directory.

##### The CAMHS specialist should complete a common assessment in addition to any specialist screening if:

- the first contact made by a young person is to a CAMHS specialist; or
- the referral does not come from children's services; or
- a young person reaches the end of their treatment journey and a common assessment is not in place.

The specialist should be enabled to draw the team around the child together, where the most appropriate professional to act as the Lead Professional will be identified.

##### If the young person is identified as having acute or complex needs a practitioner should refer without delay.

