

**Sheffield City Council**  
**Children and Families Service**

**Sheffield Single Assessment**  
**Guidance for Practitioners and Managers**

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## **About this Document**

<b>Title</b>	<b>Sheffield Single Assessment. Guidance for Practitioners and Managers</b>
Purpose	To set out Sheffield City Council People Portfolio Children and Families Service policy in relation to assessments with families.
Replaces	Sheffield Social Care Assessment Policy and Guidance March 2018
Author	Donna Taylor/Amy Walker
Authors role	Service Manager /Audit and Policy Officer
Owners	Carly Speechley
Owners role	Director of Children and Families
Approved by	Victoria Horsefield
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## **1. Introduction**

This guidance should be read in conjunction with the Practice Standards for practitioners and managers and follow the expectations as outlined.

Furthermore policies on Sheffield Tri X should also be fully read and understood. These can be found at; [Contents](#)

The Sheffield Single Assessment will provide an opportunity for social workers to focus on the specific needs of children and families, and allow appropriate time within the assessment for reflection and direct work with the child/young person to ensure a robust and analytical assessment.

The focus of the assessment is for social workers to draw on their professional judgement, to analyse and reflect on information gathered regarding the child/young person, and focus the assessment on the specific needs identified. It is expected that in undertaking an assessment in this way that it will lead to a high quality assessment that is child/young person focused. An assessment is a fluid process that considers emerging needs and sustainability of any change for the child/young person and their family.

The assessment should use the Framework for the Assessment for Children in Need and their Families (Department of Health et al., 2000) as an underpinning framework and examine children/young people's developmental needs, parent/carers capacity to respond appropriately and family and environmental factors which are specific to the purpose of assessment for that child/young person. Furthermore Sheffield has adopted the Signs of Safety (SoS) model and assessments need to ensure that they are clear as to – what we are worried about? what is working well? and what needs to happen?

## **2. Purpose of the Sheffield Single Assessment**

Working Together to Safeguard Children (DfE, 2018) is clear that social care assessments should be undertaken within a maximum of 45 working days. The 45 days represents a maximum limit and through careful management oversight most assessments will be completed in less time than this. It should be the focus of all Senior Fieldwork Managers (SFM) to ensure that all children and their families receive a timely assessment.

It is essential that the child/young person remains the focus of the assessment, to the extent of identifying needs and the impact of parental capacity and wider community influence, specifically upon the daily lived experiences of each individual child/young person in the family. For example, the needs of a parent in relation to issues such as mental health, use of alcohol/drugs or their vulnerability to domestic abuse, have to be explored in terms of the impact it has on the child/young person now and

going forward. Any actions towards support for the parent must be measured upon the outcomes for the child/young person.

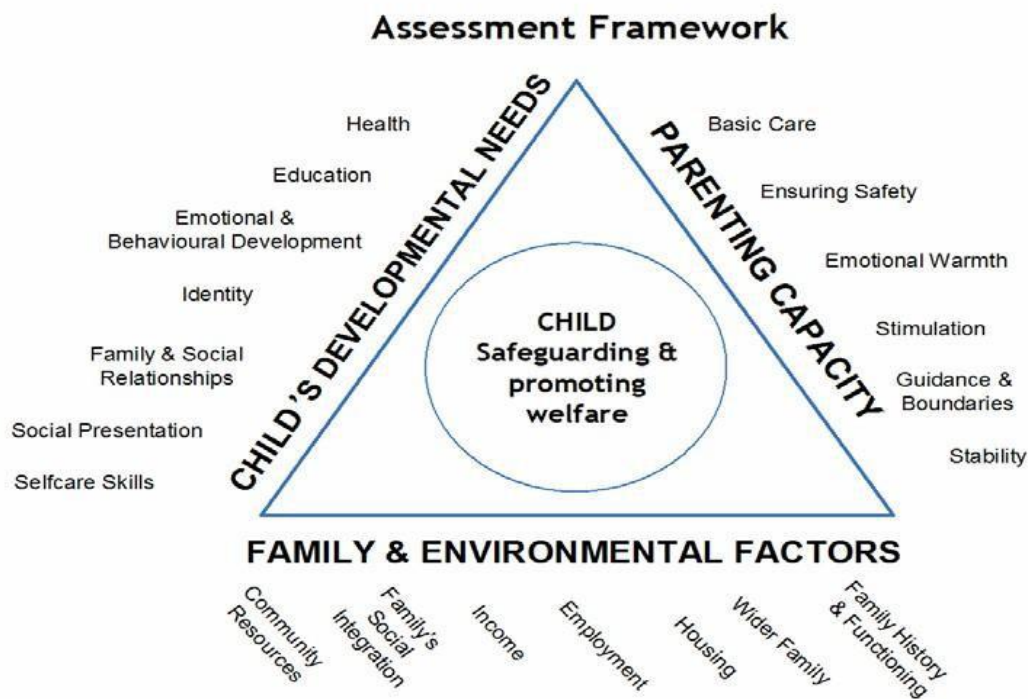
The purpose of the assessment is to determine if there is identifiable evidence of risk or significant harm to the child/young person, or whether they are unlikely to achieve or maintain a reasonable standard of health/development. The Sheffield Safeguarding Children Partnership (SSCP) Multi Agency Threshold Guidance for Sheffield Children, Young People and Families should be used to inform the identification of such factors. This can be found at;

<https://www.safeguardingsheffieldchildren.org/sscb/safeguarding-information-and-resources/thresholds-of-need-guidance-1>

The assessment is intended to be used proportionately to gather the most significant and relevant information according to the circumstances of particular children/young people. It will gather evidence which will inform the analyses, judgement and decision. These factors will then be addressed through a SMART plan, whether through a child in need or child protection process.

Should the analysis of the case lead to closure; a clear rationale is needed in relation to this and consideration given as to whether the child/young person and/or family members would benefit from input from Early Help. Information in relation to early help can be found through the SSCP at; <https://www.safeguardingsheffieldchildren.org/sscb/safeguarding-information-and-resources/early-help-1>

All assessments undertaken in Sheffield will follow the domains of the Framework for Assessment as illustrated in the diagram below:



This will be followed by a clear analysis and decisions for the suggested plan. It is expected that social workers link analysis to research and the use of assessment tools which focus upon the needs of the child/young person. The assessment should always be evidenced based and balanced, offering sound professional judgement.

There is an explicit expectation that the assessment includes and reflects the wishes and feelings of the child/young person, and it is important that these are recorded clearly and if possible in their own words. The child/young person needs to be the focus of the assessment and the analysis needs to consider what positive outcomes would benefit them, and ensure they are appropriately safeguarded.

Throughout the assessment, there is an expectation that the social worker is clear with both the child/young person and their parent/carer about the timing of key decisions and how these will be reviewed. Their input is incredibly valuable throughout the assessment process. Families should be informed of dates of planned reviews and be part of outcome focused planning.

### **3. Conducting the Sheffield Social Care Assessment**

#### Priority Setting and Tasks

An assessment is identified as being required at the point of referral, and when this decision has been made within the Sheffield Safeguarding Hub (SSH) the case will be transferred to an area fieldwork team. The Senior Fieldwork Manager (SFM) will review the case prior to allocation. The SFM will ensure that there are clear priorities and tasks set for the assessment, with timescales, and these will be recorded clearly on the child/young person's electronic file via a manager action plan.

The assessment process is something that should happen in parallel to any intervention and not a precursor for services and action. Initial priorities should be set at the beginning of the assessment and with a clear date for review. At the review date the SFM needs to consider alongside the social worker whether the assessment is complete at this stage, or whether further evidence is needed for the assessment to enable decision making (up to a maximum of 45 working days). Again reviews of the assessment at the 10 day point need to be clearly recorded on the child/young person's electronic file.

### Considering the domains of the Assessment Framework

The assessment should consider each area of need and development identified within the Assessment Framework triangle and focus upon those areas which are particularly pertinent for the child/young person. Below are some examples of questions which may assist when undertaking the assessment.

The Signs of Safety (SoS) model should also be used which looks at "What are we worried about? What is working well? What needs to happen?" In exploring the strengths for the child/young person it will be easier to see what areas they have of concern.

There is further guidance in relation to specific topics which includes but is not limited to – Pre Birth assessments, the assessments of parent/carers with - substance misuse, mental health, domestic abuse – and others. All such guidance for Sheffield can be found at; [Contents](https://sheffield.gov.uk/group/SSD/Public/ChildrenandFamilies) and [\\sheffield.gov.uk\group\SSD\Public\ChildrenandFamilies](https://sheffield.gov.uk/group/SSD/Public/ChildrenandFamilies)

## **Child Developmental Needs**

### Physical, emotional and mental health of the child/young person

- Relevant and significant information about the child's emotional, physical and mental health
- Evidence/or diagnosis of learning difficulties or physical impairments
- Are the child's immunisations up to date?
- Is the child missing health appointments?
- Has the child been subject to any major illness or diagnosis?

- Has the child been referred to any specialists?
- Is the child registered with a dentist? Does the child have generally good health?
- Does the child smoke or use substances?
- Consider the potential impact of poor home conditions upon the child's health

### Education/early years' experience for the child/young person

- What does education mean to the child/young person?
- Relevant and significant information about attendance, attainment and participation
- How does the child/young person get to education?
- Is attendance regular or how does reduced attendance impact upon their ability to reach their full potential?
- Are they fed, clean and ready to participate?
- How does the child present in education?
- Consider the impact of lack of routines upon attention span or ability to engage in learning?
- Any cognitive, learning or behavioural assessments completed?
- Give a sense of whether education is a good place for the child/young person and identify areas that may be a source of stress
- Consideration of the child/young person who may be learning in the home – home education and is the Local Authority aware and recently assessed to ensure this is appropriate?
- Are there books and toys in the home?
- In respect of children too young for formal education - consider the stimulation and engagement they receive within the family home
- What age appropriate toys are available?

### Emotional and behavioural development of the child

- How resilient or vulnerable is the child/young person? Are these age appropriate?
- What are their self-care skills? Are they age appropriate?
- Does the child/young person seem to be emotionally secure and attached?
- Has the child/young person witnessed domestic abuse? If so how does their behaviour reflect this?
- Consider the impact of physical and sexual abuse upon the child/young person's behaviour and emotional presentation
- Does the child/young person feel supported and do they have a supportive adult available to them?
- Does the child present with behaviours of concern?
- Is the parental response to such behaviour consistent or does it fluctuate?
- Does the child/young person present with different behaviours outside



- of the family home?
- Has the child/young person witnessed or been party to any traumatic experiences?
- If so, how has this affected their daily lived experiences?
- Have they had bereavements?
- Have they been the victim of assaults or witnessed such?
- Has the child been exposed to abuse?

#### Family and social relationships of the child

- Record full name and details of any adults within the household
- Who is the child/young person's network?
- Who is in contact with the child? Be clear on relationships
- What is the quality and extent of the child/young person's attachment to their wider family?
- Is the child taking on appropriate responsibility within the family environment – i.e. is the child a young carer?
- What is the family history, culture and values?
- Is the family a source of support and resilience?
- Has the family faced any traumatic or distressing events and how has this had an impact for the child?
- Does the family feel part of a community?
- Is the child/young person involved in any exploitative activity?

#### Identity and social presentation of the child

- What is the child/young person's role and involvement in their family?
- How are they valued and how is this demonstrated to them?
- Do they have a sense of belonging?
- Do they participate in any organised social activity outside the home?
- Who is the child/young person mixing with socially and is this appropriate?
- Do parents know where they are going and is this age appropriate?
- Are they experiencing bullying or is there anyone the child/young person is frightened of?
- Is their clothing clean and appropriate?
- Does the child have any friends they see regularly?
- Do they have a best friend?
- Does the child demonstrate appropriate stranger awareness?
- Does the child recognise their ethnicity in relation to their identity?
- Are there any language barriers that the child/young person faces?
- Is the child/young person's race, ethnicity and culture recognised by the family and what are the cultural practices within the family?

### **Parenting Capacity**

Ensure that you consider each parent/carer individually even when they live separately. This should also include partners to parents and their relationships

with the child/young person

Consideration needs to be given to an adults own history as to how this impacts upon their current parental ability now. This could also impact upon their ability to face and accept any difficulties, to use support and accept help, and their capacity for adaptation and change in their parenting response.

#### Basic care and wellbeing of the child

- Is the child/young person clean, washed and bathed regularly?
- Are they receiving regular meals?
- Is food regularly available and healthy?
- Are the child/young person's medical needs attended to in a timely way?
- Describe relevant information such as diet, smoking, use of alcohol and drugs (whether elicited or prescribed)

#### Ensuring the safety of the child

- Are there other adults coming into the house who may pose a risk?
- Use your professional observations – is it safe for a child/young person to be living here?
- Are there animals? Are they companion animals or for protection?
- Consider that if professionals feel threatened then what is the child/young person's lived experience?
- Is the child/young person given appropriate boundaries for their age and understanding?
- Is there domestic abuse ongoing in this household? If so we need to complete a DASH for the survivor?
- What is the domestic abuse safety plan?
- What are the perpetrator patterns of behaviour?

#### Emotional warmth for the child

- What is the quality of the child/young person and parent/carer relationship?
- Does the parent/carer respond appropriately when the child/young person is upset or distressed?
- Does the parent/carer give praise and encouragement?
- Do they demonstrate empathy with the child/young person?
- Does the child/young person experience age appropriate physical warmth?

#### Stimulation of the child

- Consider how each parent/carer is able to provide interaction and

- stimulation to the child/young person
- How does the parent/carer encourage and promote the child/young person to reach their full potential?
  - What opportunities are there for the child/young person to engage in age appropriate activities?
  - If the parent/carer has a learning difficulty how could this affect the child/young person?
  - Are others adults available to offer support as the child/young person as needed?
  - How does the interaction with the child/young person help them to learn and develop?

#### Guidance and boundaries for the child

- Consider whether the guidance and boundaries provided are age appropriate?
- Are there any routines in place for the child/young person?
- How does the parent/carer establish boundaries?
- What are the sanctions or rewards, and are they consistent?
- Is the parent/carer able to respond to and manage the child/young person's behaviour appropriately and safely?

#### Stability for the child

- How stable has the child/young person's life been so far?
- How many changes of care giver or address has the child/young person experienced?
- What steps has the parent/carer taken to make the child/young person's life stable despite difficulty?
- Is there a secure attachment to the parent/carer and how is this evidenced?
- Is the child/young person attached to others within the family or close social support?

### **Family and Environmental Factors**

It is key to remember that the development and care of children/young people does not take place in a vacuum, and will be affected by external influences. This includes family members, close friends and the support network, and the community where the family live.

#### Parent History

- Do both parents live with the child/young person?
- If not, what contact does each parent have with the child/young person?

- Are there any court orders relating to the child/young person which influence contact with either parent?
- What are each parent's life story/ history/background?
- Any criminal offences? History of involvement by any services (mental health, substance misuse, domestic violence, criminal justice)
- Is there any evidence of a cognitive and/or learning difficulty?
- History of learning difficulty (diagnosed or not)?
- Do the parent/carer have any specific health needs/disabilities and consider how these additional needs could impact their parenting
- What is the parent/carer experience of being parented?
- Were they brought up by their own parents or did they experience alternative carers (whether family or foster carers)?
- Did they experience bullying as a child/young person and what was their own experience of being at school?
- Were they abused as a child/young person?
- Did they witness any type of abuse when they were a child/young person?
- Was there any involvement from social care or other agencies?

#### Step parents and partners

- Be clear not to miss any hidden adult who may have contact with the child
- Are there any other adults in the house?
- Consider the potential impact of another adult being within the family home and whether they assume any level of parenting for the child/young person
- How did this family come together?
- Consider how and where did adults meet?
- Are there previous partners who share parenting?
- How do they find parenting this child/young person?

#### Social networks

- What is the influence of wider social networks upon the family?
- Are these strengths or weaknesses?
- Who are the adults who regularly visit the house and what are the positive/negative implications?
- Who is in the support network and what roles do they play?

#### Income

- Financial issues within a family can have far reaching implications for the care provided to the child/young person – what is the family income and where is it from?
- Is the parent/carer in employment – is this secure/casual/seasonal?
- Who in the household makes the financial decisions?

- Are the parents able to provide the child with any money of their own (pocket money) or fund social activities?
- Are financial issues a cause of strain within the family and does the child openly witness this?
- Are there any debts and how are these being managed?
- Have the family had any money/benefit advice and are they accepting of advice?

### Housing

- What is the condition of the property and who owns the property?
- Is there appropriate protection inside and outside of the house? (floor coverings, electrical safety, stair gates, garden gates)
- Does the child have access to their own private space?
- What are their sleeping arrangements and are they appropriate?
- How long have the family lived in the property?
- How many different homes have the family had of late?
- Do the family feel settled in their home?
- What do they like about their home and their area?
- What is problematic for the family in relation to their home situation?

### Community

- What is their relationship with the neighbours/local community?
- What is the neighbourhood like for the family and is it appropriate for the child/young person?
- Is there a safe outdoor space for the child/young person to play?
- What other sources of support are there in the family / community?
- Has anyone in the family experienced physical or verbal violence in the community? If so are they willing to disclose/discuss the subject?
- What forms of transport are available to the family?
- How easy is it for the family to access facilities such as shops, getting to work, doctors and health clinics, children's schools?

## **The child/young person and parent/carer voice**

Throughout the assessment the child/young person and parent/carer voice should be heard, taken in to account where possible and recorded. If it is not possible to follow through with their wishes and feelings then there should be a clear rationale for this provided as explanation.

The social worker should encourage and facilitate the child/young person and parent/carer to reflect upon their relationship with each other and what they mean to them. This can be especially important when relationships are fractious. Empower a child/young person and parent/carer to consider their strengths, as well as where they can identify the need for further support.

The written assessment should also include information about how and when the child/young person and the parent/carer were engaged in the information gathering process. It is particularly important to note any areas of disagreement between the child/young person or the parent/carer and the social worker's conclusions. All such discussions should be fully recorded and where this is a narrative of the family wishes and feelings, this should be verbatim.

#### **4. Analysis and Judgement**

Once you have gathered all your facts and other evidence for your assessment you will need to analyse them. Social workers are often unsure about analysis, therefore to simplify this all you are doing is trying to make sense of the evidence you have gathered. What is it telling you? What is working well and what do we remain worried about? What are the risks? What might happen if no action is taken? What must it be like to be a child/young person in this family home? What are their lived experiences and what needs to change to bring about improvements?

When we are analysing information we need to ensure that fact, opinion and judgment remain distinct. We need to present facts first, and then analyse these facts to show why we have concluded with our judgement. There are cases whereby you will need to use professional opinion as the facts (evidence) may not be clear cut. In these instances we need to "show the working out" – how have we got from A to B to C. In doing so, you might want to consider the following questions:

- Does the evidence confirm the original reason for the assessment – and have any other issues been brought to light?
- What impact on the child/young person does the evidence suggest? Make clear why you think that
- What are the risks if things do not change?
- Is there any research you can draw on that backs up your observations and thinking?
- How is the research specifically relevant for this family – do not just copy and paste quotes into the assessment
- Do the parent/carer/child/young person (as appropriate) and wider family take on board the concerns raised throughout the assessment?
- Have you explored all options?

#### **5. Decisions**

Having collected the evidence, analysed the information and offered a professional judgement, the final stage is to make a decision about what to do. Social workers need to offer their own decision based upon their professional judgement, and then it is the responsibility of a Senior Fieldwork Manager to offer their oversight and either endorse or offer an

alternative decision.

Decisions need to be clear and offer the rationale for why the decision is being reached. It might be simply “no further action is required” or it might be a very complex and time consuming range of things that need to be put in place or happen. In offering a decision, we are in essence, saying what needs to happen to make the child/young person safe, or to ensure that they reach their full potential. In doing so, you might want to consider the following questions:

- Is there a clear, logical flow from the facts to the analysis, judgment, and to the decision?
- Do you “own” the decision? Are you prepared to defend it to your manager and others?
- What do we know from experience that works and what does research tell us?
- Is the plan simple, understandable and workable? What does the family/child/young person think?
- What resources can we use and what specific outcomes will they be aimed at achieving?
- Are timescales realistic and achievable?
- Are different people and agencies involved? If so, is everyone clear what their role is and what they are trying to achieve?

## **6. Management Oversight**

From the point of transfer of the assessment from the Sheffield Safeguarding Hub (SSH) to the fieldwork team, the Senior Fieldwork Manager (SFM) will offer management oversight over the assessment via a manager action plan. When allocating the assessment an initial review date will be set of no more than 10 working days from the start of the assessment and there will be clear priorities and tasks outlined.

The SFM will ensure that the social worker arranges a visit to see the child within 5 working days of the start of the assessment and within 24 hours if there are section 47 concerns.

Some assessments will be expected to be completed and endorsed by a SFM at the 10 working day point. However in other cases, a management review will take place at a maximum of 10 working days. The review is to ensure that the trajectory of the assessment is on track and remains in the child/young person’s best interests based upon the evidence gathered to date. SFM’s will have the flexibility to increase the assessment timescale from 10 working days to 45 working days where it is felt that this would benefit the child/young person and family.

The maximum timescale for an assessment is 45 working days from the start of the assessment. As part of undertaking a longer assessment it is expected that there should be a minimum of three visits completed to the child/young person and parent/carer. If this cannot be achieved this should be recorded with a clear rationale by the SFM in supervision.

If an assessment exceeds 45 working days the SFM should record the reasons for this on the electronic file, with a further timescale of when the assessment will be completed. This should be only in exceptional circumstances and should be clearly communicated to the family.

To prevent drift and maintain management oversight of the assessment, a management review date is specified within each assessment on the electronic recording system. This review is scheduled for 10 days after the start of the assessment, and the first visit should have taken place by this time to ensure that appropriate decisions can be made as to whether to progress to a longer assessment and for the implementation of any support.

## **7. Updating Assessments**

Where a child/young person is already in receipt of a service and is allocated to a social worker, there are times when an updated assessment will be required. This could be due to a change in circumstance, or to review a package of support offered (for example such as with short breaks). In this instance the assessment may be more focused on the specific issue which is being reviewed.

A SFM can make a decision at any time that an updated assessment is required and will record on a manager action plan the need for this, the priorities and tasks required, and with clear timescales.

Practice Standards also inform when updated assessments are required and should be read alongside this document. Practice Standards can be found at; [Local Resources](#)

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