

Family Common Assessment Framework

Assessment Form



Date assessment started:

Date assessment completed:

N.B.

Universal services to complete assessment within 35 working days

Other services to complete assessment within own service area specified length (less than 35 working days)

Ensure signed consent has been obtained

Information Sharing and Consent

For the assessor(s)

We need to make sure that family members are clear what will be done with their information. Please make sure that they are comfortable with what is said about them in this form. Where we need to share personal information to deliver services to individuals and families, please make sure that their consent (where given and necessary) is recorded below.

For the family

As the person helping you to complete this form has explained, we want to be able to provide services to you and your family. In order to do this your needs will be assessed. To do this efficiently, we will need to share some of the personal information you have supplied with services already working with you or that you may benefit from. The person helping you with this form will explain which information needs to go where. Please agree to this by signing below.

We are obliged to share information if there are clear reasons for doing so which are in the best interests of a child or for the purposes of reducing and / or preventing anti-social behaviour, crime and disorder.

I agree to the sharing of information between the relevant agencies and all family members including young people as appropriate. I understand that the information gathered regarding my family is recorded and will be securely stored and used for the purpose of providing services to my family and may also be used for monitoring and auditing.

Name	Signature	Date

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Is there any individual or agency you do not wish information to be shared with?	Yes / No (If yes please say provide details)
If appropriate, I agree to sending a copy of the Family CAF to my GP:	Yes / No (If yes please provide GP contact details)