

**TEAM AROUND THE FAMILY**

**(TAF) MEETING RECORD**

|  |  |
| --- | --- |
| Name of Targeted Help Coordinator |  |
| Contact Details |  |

|  |  |
| --- | --- |
| Date, Time & Location of (TAF) Meeting |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of Child/Young Person and DOB | |  | | |
| Name of Child/Young Person and DOB | |  | | |
| Name of Child/Young Person and DOB | |  | | |
|  | | | | | |
| Name | Family/Organisation/Agency | | Contact Details | Attended - Yes/No | |
|  |  | |  |  | |
|  |  | |  |  | |
|  |  | |  |  | |
|  |  | |  |  | |
|  |  | |  |  | |
|  |  | |  |  | |
|  |  | |  |  | |
|  |  | |  |  | |

|  |  |  |
| --- | --- | --- |
| **Home Fire Safety Check Required** | No  YES  Quote Ref: 156 | **0800 0502 999** |

|  |
| --- |
| **The Supporting Families Programme** |
| **The Supporting Families Programme** is the local response to the Government’s Troubled Families Programme. It aims to improve how families are worked with to achieve long term improvement in some of the more challenging areas of family life. The below criteria are the areas the Programme focuses on for support. The number of areas ticked will **NOT** affect whether support is offered but the information will help in putting together a robust family plan aimed at supporting the family to move forward. |

|  |  |  |  |
| --- | --- | --- | --- |
| **Supporting Families Criteria Checklist –**  Please tick all that apply and put the detail about each area in the sections below | | ✓ | Who in the family does this apply to? |
| **Health Concerns** | An adult or child in the family requires support for mental health concerns. |  |  |
| An adult or child in the family requires support for substance misuse. |  |  |
| Children under 5 are receiving Universal Plus / Partnership Plus support from the Health Visiting Team. |  |  |
| **Education** | A child’s attendance is less than 90% on average across the last 3 consecutive terms. |  |  |
| A child has received 3 or more fixed term exclusions in the last 3 consecutive school terms. |  |  |
| A child has had 1 or more permanent exclusions in the last 3 consecutive school terms. |  |  |
| A child has been accessing a part time education package due to behaviour for longer than 6 weeks. |  |  |
| **Children Who Need Help** | A child requires an Early Help or Targeted Help Intervention. |  |  |
| A child requires a CIN / CP intervention. |  |  |
| A child has been reported as missing to the police in the last 6 months. |  |  |
| A child has been identified as medium to high risk on the Child Sexual Exploitation Risk Assessment. |  |  |
| **Crime and Anti-social behaviour** | A child has committed an offence in the last 12 months that resulted in support from the Integrated Youth Support Service. |  |  |
| An adult has committed an offence in the last 12 months that resulted in a pre or post court disposal. |  |  |
| An adult or child has received a second letter as part of an anti-social behaviour intervention in the last 12 months. |  |  |
| An adult is currently subject to license, post sentence supervision, a community order or suspended sentence. |  |  |
| **Domestic Abuse** | An adult or child is currently experiencing domestic abuse. |  |  |
| A young person or adult has perpetrated domestic abuse in the last 12 months. |  |  |
| The police have been called to the family 3+ times in the last 12 months for domestic abuse. |  |  |
| **Home and Money** | An adult in the family is claiming out of work benefits. |  |  |
| A young person (aged 16-18) is leaving school and is at risk of being Not in Education, Employment or Training (NEET). |  |  |
| A young person is Not in Education, Employment or Training (NEET). |  |  |
| An adult in the household has unmanageable debt. |  |  |
| A 16 or 17 year old is at risk of homelessness. |  |  |
| The family have received a threat of eviction. |  |  |

|  |
| --- |
| **Discussion /Reason for meeting?** |
|  |

|  |
| --- |
| **What’s working well / gone well since last meeting?** |
|  |

|  |
| --- |
| **What are we worried about?** |
|  |

|  |
| --- |
| **What needs to happen? What is your contingency plan?** |
|  |

|  |
| --- |
| **Views of the child/children/ young person:** |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Actions from today’s meeting** | | | |
| What needs to be done? | By Whom? | By When | Outcome/ Completed |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| How do you feel your current family situation is affecting you?  Parent / Carers / Child/Young Person’s comments about the meeting | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
|  | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |  |
|  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| TAF meeting comments and scoring | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
|  | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |  |
|  |  |  |  |  |  |  |  |  |  |  |

|  |  |
| --- | --- |
| **Next TAF Meeting** | |
| **Date:** |  |
| **Time:** |  |
| **Location:** |  |

|  |  |  |
| --- | --- | --- |
| **Consent for information storage and information sharing** | | |
| In order to ensure that you and your family are provided with the most effective available support it may be appropriate to share personal information about you and your family between agencies / community groups, such as Children’s Services, the NHS and other health providers (including G.Ps), Department of Works and Pensions, police, probation services, schools and the Youth Offending Team.  This information may include details about your child/ren, you or other significant family member’s involvement with Children’s Services, police, courts and probation services, aspects relating to your employment, anti-social behaviour, violence in the home, substance misuse, educational attendance and behaviour and health issues.  This information may also be shared with the Department for Communities and Local Government under the national Troubled Families Programme.  In some circumstances, information can be shared between agencies without consent, for example where sharing information might prevent a crime or safeguard the welfare of a child or young person.  Even in these circumstances, it is normal practice to obtain consent where possible.  **If you have concerns about information being shared with particular agencies or individuals please give information overleaf.** | | |
|  | **Date** | **Signature** |
| Parent /Carer |  |  |
| Child/ Young Person |  |  |
| Targeted Help Coordinator |  |  |
| **COMMENTS** |  | |