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**SUPPORITNG EVIDENCE AGINST THE KNOWLEDGE AND SKILLS STATEMENT FOR CHILD AND FAMILY SOCIAL WORK**

*This evidence log is to be completed by the ASYE, to provide evidence to support capability shown in each part of the knowledge and skills statement for child and family social work. Evidence should be shown from a wide range of sources and be cross referenced with evidence contained within the portfolio. This should support the Final Assessment Report, and should be provided prior to the final Review meeting.*

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| 1. Relationships and effective direct work

*Build effective relationships with children, young people and families, which form the bedrock of all support and child protection responses. Be both authoritative and empathic and work in partnership with children, families and professionals, enabling full participation in assessment, planning, review and decision making. Ensure child protection is always privileged.**Provide support based on best evidence, which is tailored to meet individual child and family needs, and which addresses relevant and significant risks. Secure access to services, negotiating and challenging other professionals and organisations to provide the help required. Ensure children and families, including children in public care, receive the support to which they are entitled.**Support children and families in transition, including children and young people moving to and between placements, those returning home, those being adopted or moving through to independence. Help children to separate from, and sustain, multiple relationships recognising the impact of loss and change.* |
| Source of evidence: |
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| 2. Communication*Communicate clearly and sensitively with children of different ages and abilities, their families and in a range of settings and circumstances. Use methods based on best evidence. Create immediate rapport with people not previously known which facilitates engagement and motivation to participate in child protection enquiries, assessments and services.**Act respectfully even when people are angry, hostile and resistant to change. Manage tensions between parents, carers and family members, in ways that show persistence, determination and professional confidence.**Listen to the views, wishes and feelings of children and families and help parents and carers understand the ways in which their children communicate through their behaviour. Help them to understand how they might communicate more effectively with their children.**Promote speech, language and communication support, identifying those children and adults who are experiencing difficulties expressing themselves. Produce written case notes and reports, which are well argued, focused, and jargon free. Present a clear* *analysis and a sound rationale for actions as well as any conclusions reached, so that all parties are well informed.* |
| Source of evidence: |
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| 3. Child Development *Observe and talk to children in their environment including at home, at school, with parents, carers, friends and peers to help understand the physical and emotional world in which the child lives, including the quality of child and parent/carer interaction and other key relationships. Establish the pattern of development for the child, promote optimal child development and be alert to signs that may indicate that the child is not meeting key developmental milestones, has been harmed or is at risk of harm.**Take account of typical age-related physical, cognitive, social, emotional and behavioural development over time, accepting that normative developmental tasks are different for each child depending on the interaction for that child between health, environmental and genetic factors. Assess the influence of cultural and social factors on child development, the effect of different parenting styles, and the effect of loss, change and uncertainty in the development of resilience.**Explore the extent to which behavioural and emotional development may also be a result of communication difficulties, ill health or disability, adjusting practice to take account of these differences. Seek further advice from relevant professionals to fully understand a child’s development and behaviour.* |
| Source of evidence: |
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| 4. Adult mental health, substance misuse, domestic abuse, physical ill health and disability*Identify the impact of adult mental ill health, substance misuse, domestic abuse, physical ill health and disability on family functioning and social circumstances and in particular the effect on children, including those who are young carers. Access the help and assistance of other professionals in the identification and prevention of adult social need and risk, including mental health and learning disability assessment.**Coordinate emergency and routine services and synthesise multi-disciplinary judgements as part of ongoing social work assessment. Use a range of strategies to help families facing these difficulties.**Identify concerning adult behaviours that may indicate risk or increasing risk to children. Assess the likely impact on, and inter-relationship between, parenting and child development. Recognise and act upon escalating social needs and risks, helping to ensure that vulnerable adults are safeguarded and that a child is protected and their best interests always prioritised.* |
| Source of evidence: |
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| 5. Abuse and neglect of children*Exchange information with partner agencies about children and adults where there is concern about the safety and welfare of children. Triangulate evidence to ensure robust conclusions are drawn. Recognise harm and the risk indicators of different forms of harm to children relating to sexual, physical, emotional abuse and neglect. Take into account the long-term effects of cumulative harm, particularly in relation to early indicators of neglect.**Consider the possibility of child sexual exploitation, grooming (on and offline), female genital mutilation and enforced marriage and the range of adult behaviours which pose a risk to children, recognising too the potential for children to be perpetrators of abuse.**Lead the investigation of allegations of significant harm to children in consultation with other professionals and practice supervisors. Draw one’s own conclusions about the likelihood of, for example, sexual abuse or non-accidental injury having occurred and the extent to which any injury is consistent with the explanation offered. Commission a second professional opinion and take legal advice where necessary.* |
| Source of evidence: |
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| 6. Child and family assessment*Carry out in-depth and ongoing family assessment of social need and risk to children, with particular emphasis on parental capacity and capability to change. Use professional curiosity and authority while maintaining a position of partnership, involving all key family members, including fathers. Acknowledge any conflict between parental and children’s interests, prioritising the protection of children as set out in legislation.**Use child observation skills, genograms, encompass, chronologies and other evidence based tools ensuring active child and family participation in the process. Incorporate the contributions that other professional disciplines make to social work assessments.**Hold an empathic position about difficult social circumstances experienced by children and families, taking account of the relationship between poverty and social deprivation, and the effect of stress on family functioning, providing help and support. Take into account individual child and family history and how this might affect the ability of adults and children to engage with services.**Recognise and address behaviour that may indicate resistance to change, ambivalent or selective cooperation with services, and recognise when there is a need for immediate action, and what other steps can be taken to protect children.* |
| Source of evidence*:* |
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| 7. Analysis, decision-making, planning and review*Establish the seriousness that different risks present and any harm already suffered by a child, balanced with family strengths and potential solutions. Set out the best options for resolving difficulties facing the family and each child, considering the risk of future harm and its consequences and the likelihood of successful change.**Prioritise children’s need for emotional warmth, stability and sense of belonging, particularly those in public care, as well as identity development, health and education, ensuring active participation and positive engagement of the child and family. Test multiple hypotheses about what is happening in families and to children, using evidence and professional judgement to reach timely conclusions. Challenge any prevailing professional conclusions in the light of new evidence or practice reflection.**Make realistic, child centred, plans within a review timeline, which will manage and reduce identified risks and meet the needs of the child. Ensure sufficient multi-disciplinary input into the process at all stages. Apply twin and triple track planning to minimise chances of drift or delay, being alert to the effectiveness or otherwise of current support plans.* |
| Source of evidence*:* |
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| 8. The law and the family and youth justice systems*Navigate the family and youth justice systems in England using legal powers and duties to support families, to protect children and to look after children in the public care system, including the regulatory frameworks that support the full range of permanence options. Participate in decisions about whether to make an application to the family court, the order to be applied for, and the preparation and presentation of evidence.**Seek advice and second opinion as required in relation to the wide range of legal issues which frequently face children and families involved with statutory services including immigration, housing, welfare benefits, mental health and learning disability assessment, education and support for children with learning difficulties.**Use the law, regulatory and statutory guidance to inform practice decisions. Take into account the complex relationship between professional ethics, the application of the law and the impact of social policy on both.* |
| Source of evidence: |
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| 9. The role of supervision*Recognise one’s own professional limitations and how and when to seek advice from a range of sources, including practice supervisors, senior practice leaders and other clinical practitioners from a range of disciplines such as psychiatry, paediatrics and psychology. Discuss, debate, reflect upon and test hypotheses about what is happening within families, and with children. Explore the potential for bias in decision-making and resolve tensions emerging from, for example, ethical dilemmas, conflicting information or differing professional positions. Identify which methods will be of help for a specific child or family and the limitations of different approaches. Make use of the best evidence from research to inform the complex judgements and decisions needed to support families and protect children.**Reflect on the emotional experience of working relationships with parents, carers and children, and consciously identify where personal triggers are affecting the quality of analysis or help. Identify strategies to build professional resilience and management of self.* |
| Source of evidence*:* |
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| 10. Organisational context*Operate successfully in a wide range of organisational contexts complying with the checks and balances within local and national systems which are a condition of employment. Maintain personal and professional credibility through effective working relationships with peers, managers and leaders both within the profession, throughout multi-agency partnerships and public bodies, including the family courts.**Act in ways that protect the reputation of the employer organisation and the social work profession, whilst always privileging the best interests of children. Manage the specific set of organisational tasks relating to lead responsibility for children with the support of an appropriately qualified supervisor and use of the multi-agency support network.**Contribute to the organisation’s role as corporate parent to children in public care, encouraging and advocating for organisational focus, resource and support so that children and young people can thrive and enjoy their childhood and move into independence with confidence in and ambition for their futures.* |
| Source of evidence*:* |
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