

Integrated Children's System Introduction to Guidance



Integrated Children's System: Guidance Package October 2009

Introduction

The Social Work Task Force has been established by the Secretaries of State for Children, Schools and Families, and for Health to advise the Government on a comprehensive reform programme for social work. They were asked to prioritise their advice in relation to the Integrated Children's System and recommended in May 2009 that:

"ICS should be reformed so that it supports effective recordkeeping and case management by social workers but should not seek to mandate a particular approach to front-line social work practice. There are a number of changes which we believe the Government can make quickly to make local systems easier to use. In the long-term we consider that Local Authorities need to take stronger ownership of local systems on the basis of simplified national requirements".

In response, Baroness Delyth Morgan, Minister for Children, Young People and Families, wrote in the summer to all DCSs and setting out new principles on which the future of ICS should be based. She made clear that the Government's role is to provide support, funding, guidance and challenge to Local Authorities in order that they can ensure that their systems meet these expectations, as part of their broader responsibilities for services which achieve good outcomes for children and families. The DCSF committed to working with local authorities and ICS users in order to drive improvements to ICS at local and national level, based on these principles.

This package of guidance is the first output from that work. It is designed to support local authorities to make decisions about the future of their local systems and how they can be improved, whilst recognising interdependencies within the system, and the need to ensure that practitioners and managers continue to work within the legal framework. It is aimed at senior managers, front line practitioners and managers, and those who have technical roles in relation to IT support for social workers. All of these people have important roles to play in local improvement and it is hoped that the package will be helpful to all of them.

As the first stage in supporting locally-led improvements to ICS systems the Department of Children, Schools and Families (DCSF) facilitated three ICS Improvement conferences for practitioners, their managers and IT leads. More than half of all local authorities participated in these conferences to identify the priorities for improvement and to explore options for tackling them. In addition, an Expert Panel of practitioners and managers, chaired by Steve Liddicott of the Association of Directors of Children's Services, has been appointed to provide advice and support in developing this guidance document which is intended to help local authorities to improve their ICS systems. The Expert Panel has drawn on experiences and examples from a range of authorities who have found ways to use ICS to support practice and to tackle those issues identified as problems.

In examining the issues, the Expert Panel and supporting conferences were very aware that experiences of ICS vary dramatically across the country, according to the systems in place and the local IT infrastructure. Individual practitioners' working practices, training and IT skills also have an impact. The best ways of improving the usability of ICS for front line practitioners will clearly vary between authorities and sometimes between and within teams, and local areas are obviously best placed to judge how to do this themselves.

One of the challenges noted by the Expert Panel has been the need to ensure close working between front line social workers and those managing technical and strategic changes to ICS. Some local authorities have overcome this issue by establishing an ICS Working Group which has representation from front line social workers, managers and technical staff, as well as a change lead. They have found it a helpful forum to agree changes, as well as to plan and deliver improvements to ICS. It can also help to make important links with local policies and procedures affecting front line practice, including those associated with record keeping, data protection and security.

The DCSF has already issued a usability tool which enables local authorities to identify the causes of usability problems in their particular local system. This process can be repeated following the implementation of any local changes to assess how well these have resulted in improvements for front line practitioners.

A procurement healthcheck tool has also been developed which can be used on request to undertake a short, targeted healthcheck of procurement and contract management processes for a local authority. This is particularly relevant for those local authorities who are thinking about making significant changes to, or procuring, an ICS system. The output of a healthcheck is a short report for the local authority, suggesting points for consideration to help them commission a local system which reflects and supports local practice and management.

DCSF will continue to support the development of Supplier User Groups, where required, and the Nominated Local Authority Representative Group (NLAR) to ensure they help local authorities to work together to improve issues such as usability.

Moving forward, the DCSF has been working with the Expert Panel to prioritise further issues where improvement guidance and support to local authorities would be helpful. A series of consultation events with front line practitioners and managers specifically on ICS, as well as feedback from the Social Work Task Force, have raised a number of issues. This first package of materials has focused on those areas that were seen as the most significant for immediate improvement. The Expert Panel has now worked to prioritise those

issues that are important for addressing next. These include guidance on planning and risk and on the data required for statutory returns and Ofsted inspections which ICS helps to facilitate. In light of feedback on the guidance on recording the Core Assessment, consideration will be also given as to what further guidance should be made available on the exemplars. We will also continue to actively support local authorities in developing skills and capacity in supplier management, continuing to work with supplier user groups to promote knowledge transfer.

The Expert Panel have agreed that a number of the issues raised by practitioners are specifically associated with practice and training rather than ICS. They have reported these back to the Social Work Task Force to be addressed as part of the wider programme of social work reform.

If you have feedback on this guide or on any wider ICS issues please contact the ICS Improvement Team at ProgrammeManagementOffice.IISaM@dcsh.gov.uk

For more information about the work and reports of the Social Work Task Force see www.dcsf.gov.uk/swtf

Integrated Children's System Guide for Practitioners & Managers



Getting the best out of your Integrated Children's System

Following the advice of the Social Work Task Force, the DCSF is leading a programme of improvement of ICS to reform it so that it supports effective record keeping and case management by social workers but does not seek to mandate a particular approach to front-line social work practice. This guide explains how front line social workers and managers can make the most of their current system, to support their professional judgment about practice and to ensure that they are meeting statutory requirements in relation to their work with children and families, and data collection.

It has been developed by an expert group of ICS users – the Expert Panel - which is also helping the DCSF to identify improvements which can be made to the system specifications to help local authorities and their suppliers make local systems easier to use. It is informed by the usability reviews which have taken place in many local authorities as a result of the Task Force's recommendations.

ICS systems are different in every local authority, and there are a number of different suppliers in the market, so not all of the concerns or solutions in this guidance will be relevant to all children's services departments. However, the Expert Panel hopes that it will help front line social workers and managers to work together and with their strategic managers and local IT departments to improve their experience of ICS.

This guide is supported by 4 Guidance Notes:

1. Recording the Core Assessment
2. Improving Narratives around the Child and Family
3. Copying and Cloning in ICS Systems
4. Improving Outputs from ICS Systems

1. Using social worker time wisely

The acid test for any IT case management system must be that it acts as a tool to support day to day practice with children and their families. Where ICS systems work well they can:

- support single data entry wherever this is in the best interests of the child;
- allow social worker access to the parts of the child's pathway that best meet the child's needs at any given time; and
- support easy access to information by practitioners, other agencies and children and young people and their families.

In authorities where ICS systems are working well, ICS can support effective practice in the following ways:

- 1) Better storage and retrieval of information.
- 2) Increased ability to share information widely and rapidly.
- 3) Increased ability to link family members and access relevant files rapidly.
- 4) Both team managers and case holders can be notified when there are tasks due.
- 5) Alerts can also be used on individual cases where there are known dangers (for example, animals or people who have behaved aggressively in the past, or whether there are people associated with a household who are known to be at risk of harming children).
- 6) Information can be extracted in a number of ways for analysis so that the needs, service delivery and outcomes for the children being served by the local authority are better understood.
- 7) Common information such as name, date of birth, address, family members, religion, culture, address of the school the child attends, GP and any involved professionals only needs to be entered into the main system once. It will then populate the rest of the system whenever that information field is found.
- 8) Providing a clear picture of assessment, planning, intervention and review for all children and young people.
- 9) Promotes professionals sharing responsibility and having ownership of their decision making process.

However, these benefits are not being realised across all authorities. To continue to improve ICS, managers and practitioners need to be involved in developing a clear sense of local priorities and find ways to work with the IT supplier to ensure that the system is fit for purpose.

Practitioners across the country have fed back a number of issues with their local ICS systems that can make them difficult to use and prevent them being an effective support tool in delivering services to children and families. Below is a table that captures some of the issues that have been raised by practitioners and managers in a number of forums including through the consultation by the Social Work Task Force, the DCSF ICS conferences, and consultation with the Expert Panel. The table is not intended to be exhaustive. The DCSF Usability Report provides local authorities with an overview of any usability issues in their system, categorised in relation to the following 3 areas:

- 1) Local IT infrastructure.
- 2) Your ICS product/version.
- 3) The national specification.

Each issue in the box below has been categorised across these areas; and possible solutions are suggested.

1.1 Common concerns raised about ICS

Issue	Some solutions	Who can tackle this?
<p>The computer program does not reflect the way we practice.</p> <p>Usability category: <i>Product/version</i> <i>National specification</i></p>	<p>Practitioners and managers can work together to build 'maps' of their day to day practice with children and their families (which of course must reflect statutory requirements). These maps can then be shared with the IT supplier and either the software can be re-configured locally or the supplier user group can be approached to request a change across the whole software system.</p>	<p>ICS Champion, the practitioners group, the DCSF Usability guide, the software user support groups.</p>
<p>Chronologies and genograms cannot be done on the system.</p> <p>Usability category: <i>Product/Version</i></p>	<p>Some systems allow entries from the diary sheet to be 'pulled through' into chronologies. These can then be edited by the practitioner. Phase IC amendments are supporting further development of this functionality. Some practitioners are continuing to create these outside the system as word documents and scan them into the electronic file.</p>	<p>User support group, 1C amendments, the DCSF Usability guide.</p>

<p>Printed forms are not user friendly – they are hard to read.</p> <p>Usability category: <i>Product/ version</i> <i>National specification</i></p>	<p>As long as records capture the information your organisation requires to make safe evidence based decisions, reports can be re-designed to fit the purpose/remit of each local authority. (see '<i>ICS Guidance Note 1 – Recording the Core Assessment</i>' for further guidance).</p> <p>Social workers and team managers can work together to draft forms that assist them to communicate the work they are doing with children, young people and their families. (See case studies below from Wandsworth and Cumbria.)</p>	<p>Local practitioner and manager user groups working alongside IT and Suppliers to improve their product</p>
<p>Too many 'mouse clicks' from one area to another</p> <p>Usability category: <i>Product/version</i></p>	<p>This may be to do with how many tasks or individual actions are required within one episode. You will need to discuss with your ICS lead to simplify this process.</p>	<p>ICS lead, mapping practitioner processes, User support group.</p>
<p>It does not copy forward enough information.</p> <p>Usability category: <i>Product/version</i> <i>National specification</i></p>	<p>Systems should enable single data entry on each child wherever this is in the child's best interests. If your local system does not have all the copy forward functionality that is required the strategic team, alongside the front line managers and practitioners, should map their requirements to present to the supplier for improved functionality.</p> <p>(See '<i>ICS Guidance Note 3 - Copying and Cloning in ICS Systems</i>' for further guidance.)</p>	<p>ICS lead, business mapping, user support group.</p>
<p>Tasks like putting on new addresses, contacts or making a meeting are onerous and could be carried out by business support staff</p> <p>Usability category:</p>	<p>Addresses and essential personal information on service users should always copy forward on ICS. If you have difficulties with this, notify your ICS lead. If adding new addresses is time consuming, the senior management team can look at the role of business support in</p>	<p>Strategic Management, ICS lead, practitioners and managers group.</p>

<i>Product/version</i>	maintaining basic demographic information.	
Workflow is too prescriptive. Usability category: <i>Product/version</i> <i>National specification</i>	Work with your ICS lead to develop a simpler workflow where there are not so many 'episodes' in the workflow that have to be completed. This is not always straightforward and will require careful consideration of what information your organisation really needs to capture for what purpose.	ICS lead, practitioner group business mapping, User support group.
Too many forms to record in for the one event Usability category: <i>National specification</i>	As requirements about the format of records have been relaxed it may be appropriate for some forms to be re-designed so that they are less repetitive. (see 'ICS Guidance Note 1 – Recording the Core Assessment' and 'ICS Guidance Note 2 – Improving Narratives around the Child and Family' for further guidance)	Local practitioner and manager user groups working alongside IT and Suppliers to improve their product.
The timelines and the tasks do not always reflect the child's needs Usability category: <i>Product/version</i> <i>National specification</i>	Work flow in the system can be turned on or off. If your local authority decides your ICS system is too prescriptive, request modifications from your supplier through your user group.	Strategic managers, Team managers and practitioners identifying simplifications through mapping processes and working with suppliers to alter functionality.
Inability to move from one task to another until the task is authorised means delays. Usability category: <i>National specification</i>	Some authorities have self authorisation for some tasks, others have a duty team manager work tray. It may also be possible to de- link certain tasks from the authorisation workflow depending on the legislative requirements.	Strategic managers, Team managers and practitioners identifying simplifications through mapping processes and working with suppliers to alter functionality.
Unable to undo mistakes and correct an error. Usability category: <i>Product/version</i>	This facility is available on some systems. It is one of the short term priorities for improvement in most supplier groups.	ICS lead, practitioner group business mapping, User support group.

Not enough computers. Usability category: <i>Local IT infra structure</i>	This could be the subject of a conversation with finance about the priority of purchasing more PCs. However it could also be about prioritising usage, scheduling where and when people need to use PCs/laptops.	Strategic management supported by information from the DCSF usability toolkit completed by practitioners and front line managers.
Takes too long to log on and then you are logged out again too quickly. Usability category: <i>Local IT infra structure</i>	This may be due to the size/capacity of the server. You may need to discuss with your ICS lead the need to up-grade IT. If this improvement reduces the time social workers spend in front of PCs waiting for data to upload this may well be cost effective.	Strategic management supported by information from the DCSF usability toolkit completed by practitioners and front line managers.
The IT equipment is not good enough. Usability category: <i>Local IT infra structure</i>	Report clearly what the issues with the IT are. A rolling program of PC replacement for up-graded PCs, laptops and other mobile equipment is one approach for authorities that need to replace their infrastructure.	Strategic management supported by information from the DCSF usability toolkit completed by practitioners and front line managers.
Poor IT training. Usability category: <i>Local IT infra structure</i>	Think about deploying 'floor-walkers' or 'super-users' to assist workers in situ. Learning in a work/real-time environment often makes more sense for practitioners.	ICS lead, practitioner group.
Not enough IT help desk support. Usability category: <i>Local IT infra structure</i>	Your organisation may need to think about developing schemes that promote 'super-users' in each team that can be a reference point for practitioners who have specific problems with processing data.	Strategic management supported by information from the DCSF usability toolkit completed by practitioners and front line managers.
The system crashes or times out frequently. Usability category: <i>Local IT infra structure</i>	This may be related to the capacity of your server. Does it need to be up-graded? Remember it may well be more cost effective to invest in a server with capacity than to waste valuable social worker time waiting for 'crashes' to rectify.	Strategic management supported by information from the DCSF usability toolkit completed by practitioners and front line managers.
The exemplars can feel repetitive with too many tick boxes to fill in.	The evidence based statements - 'tick boxes' - should be for guidance/prompts. They do not all need to be completed unless they are	Local practitioner and manager user groups working alongside IT and Suppliers to

Usability category: <i>National specification</i>	relevant to the specific child. If the use of tick boxes is mandatory in your authority, front line managers and practitioners need to represent their views and possible solutions for providing evidence to their senior management group for consideration within the context of the Assessment Framework guidance. <i>(see case study from Wandsworth below.)</i>	improve their product.
Planning formats are difficult to understand and repetitive. Usability category: <i>National specification</i>	Formats can now be altered to reflect the priorities and best practice ideals of each local authority, taking into account the statutory guidance on planning for child protection and looked after children. Check the data copying functionality to ensure that the right information is feeding through the child's record to the plans and reviews. <i>(see example from Islington)</i>	Local practitioner and manager user groups working alongside IT and Suppliers to improve their product, practice training

1.2 Working together to get the best out of your ICS

Many authorities have been working hard with their practitioners to support them to get the best out of their ICS. By contributing to post implementation evaluations, the Usability toolkit and other surveys, they have developed practice guidance and strategies to get the best from their system. By developing strong partnerships and lines of communication between the social work practitioner, the front line manager and the strategic management group within Local Authority, the ICS can be shaped as a tool that will serve local need.

This section begins with a case study that illustrates how front line managers, in consultation with practitioners, in one local authority have begun influence improvements to their ICS and then discusses using ICS to support recording, assessment and planning.

CASE STUDY: Milton Keynes ICS Managers Group

The primary objective of the ICS Team Manager Group is to empower Team Managers and hand over responsibility for ICS changes from the ICS Project Team back to the business. The introduction of ICS, as a technology, meant that new communication channels needed to be established between practitioners, managers, business support, ICS helpdesk and senior managers to discuss, agree and progress anything in relation to ICS. It was clear that ICS should be seen as 'mainstream', as an essential Social Work tool and we should therefore utilise existing hierarchy to achieve our communication goals.

The ICS Team Managers Group is held fortnightly in Milton Keynes, usually for a couple of hours at a time, dependent on the agenda items. The group consists of the ICS Project/Change Lead, all Team Managers, their Deputies, the Conference and Review Leads as well as the Business Support lead. Since this is such a large group it is accepted that Team Managers and their Deputies will alternate attendance. For larger Local Authorities you could replicate this group format at locality level, so that the group remains more manageable and effective, ensuring a single link exists between the groups for consistency, probably most appropriately, the ICS Project/Change Lead.

The group meets to ensure the following

- Agreement of all business process in relation to ICS
- Monitoring of the data quality spreadsheet
- Data collection requirements for statutory statistical returns
- Requests for Business Objects operational reporting or management information
- Product Change Requests of the supplier
- Bite size training on particular areas where managers or practitioners are experiencing difficulties
- ICS issues raised by practitioners at their individual Team Meetings
- Information Sharing from DCSF, Regional Groups, Supplier Groups, Senior Management Team and other Directorate Departments
- General open forum discussion in relation to use of ICS – usually lead to business process change, product change, a report, systems configuration change etc
- ICS Upgrades – Review the release notes, establish training requirements, recruit testers and agree the upgrade plan

The group is well established and attended, with delegated responsibility to agree decisions involving ICS.

As the ICS becomes more embedded into mainstream social work, the frequency of this group could be reviewed. A monthly or quarterly meeting in the future may be all that is required and/or the group may decide widen to their scope to include other technologies.

The next case study shows how a practitioners group has been set up to feed into the managers group, completing the communication loop.

CASE STUDY: Stockport Practitioner User Group

The purpose of this group is to provide a forum for a representative group of practitioners that have been involved in roll out of electronic working through the implementation of 2 government initiatives; the Integrated Children's System and the Electronic Social Care Record. The group is chaired by an operational team manager and provides the opportunity for practitioners to come together to discuss areas of the recording systems that need further development to ensure the recording tools support practice and act as an advisory group. The practitioner group is chaired by an operational team manager from Early Intervention and Family Support Service and support provided by a strategy & performance manager/ staff development officer on request:

1. The membership of the group includes practitioner representatives of all social care services working with children and young people
2. Key support staff join the group by invitation
3. The group acts as a conduit for requests for training/ workshop topics/ systems practice & guidance
4. The group distinguishes between system and practice issues and takes forward issues via appropriate mechanisms.

The objectives of the group are to:

- Consider areas of the recording systems that can be improved to better support operational practice within the guidance provided by DCSF and Stockport policy.
- Engage with key support staff e.g. system developers/ trainers to progress any actions as needed.
- Act as a social care practitioner advisory group.

The Practitioner user group is accountable to the Social Care & Health Senior Management Team and the group minutes are made available to all practitioners via the practitioner group intranet webpage.

Setting up front line consultation groups that act to develop and improve ICS in partnership with their strategic leads allows authorities to develop systems that are best placed to support practitioners to deliver good outcomes to children. The DCSF are supporting this process through the Usability toolkit that enables each authority to capture and analyse and respond to issues raised by practitioners about their local systems.

This next case study demonstrates how feedback helped improve usability:

CASE STUDY: Lincolnshire County Council

Lincolnshire County Council (LCC) started work on improving ICS usability, based on their ICS users' feedback, and this commenced before publication of the DCSF Usability Tool. Working with both their ICS provider and their own in-house developers, they used the following sources of information to make system changes:

- Local ICS users' group
- ICS Help Desk log
- Issues raised during training
- Workshops with practitioners
- Floorwalkers feedback
- Team Managers in-house usability questionnaire

The areas that raised most concerns were:

- The Child Protection Module
- Exemplars (i.e. Child Protection Conference report, Chronology, etc)
- System Performance

On receipt of the DCSF Usability Tool, the questionnaire was issued to a small sample of practitioners from teams around the county working with children in a variety of settings (Children in Need, Child Protection, Looked after Children). The aim of this exercise was to assess the way the tool worked and to establish the usefulness of its findings. 20 questionnaires were issued and 18 returned.

The preliminary findings of this tool indicated Exemplars and Performance to be particularly problematic areas for the practitioners. This confirmed the earlier work, and indeed LCC had already started work on reviewing the outputs as a response to users' initial feedback.

At their first workshop to review/develop ICS exemplars, they concentrated on the Child Protection exemplars; new exemplars are being developed and will be reviewed in light of the revised guidance on Working Together to ensure they reflect the new legal requirements. Based on these preliminary findings, the Usability Tool will be used further, with all practitioners being invited to complete the questionnaire. The complete results are expected at the end of October 2009.

It is fully anticipated that LCC will re-run the Usability Tool at a later date, in order to demonstrate the improvements made to their ICS system.

2. Moving forward

It is important for each authority to own their ICS solution and to find ways to work within the legislative and regulatory framework to meet the needs of the children and families in need within their local area. Nationally, the picture of local ownership of systems is uneven, with a number of different elements impacting on the ability of the authority to have a user friendly ICS.

This section includes case studies, approaches and recommendations from the Expert Panel, and authorities who have developed strategies to improve their systems that may be able to be used in other authorities.

2.1 Using ICS to support the task of recording

One of the biggest complaints about ICS relates to the use of 'exemplars'. In some systems the exemplars in the national specifications have been translated directly into records/forms which have large numbers of tick boxes or specific prompts about practice. Practitioners and managers have found that this approach makes it difficult for them to use the records in ways which support their professional judgement about what needs to be recorded.

The Expert Panel is working with the DCSF to issue guidance about simplifying the exemplars which clearly identifies the items for which there are legal recording or mandatory data collection requirements and showing how other elements can be simplified. This work has started by looking at the Core Assessment and other exemplars will be addressed in turn. Many authorities will make changes to the exemplars over the coming months, using this guidance. Some authorities have already done so. Below is some guidance from Wandsworth on how to use the Core Assessment document:

Wandsworth on how to use the Core Assessment document:

Wandsworth have removed the 'tick boxes' from the Core Assessment Exemplars, whilst still making them available as tools for practitioners to help structure an assessment. They are called Evidence Statements and are 'hidden' behind the imbedded Core Assessment Exemplar. These statements are prompts to key issues and areas which social workers will need to consider in terms of the child's development, how the parent is responding to the child's needs and also issues in respect of the third side of the triangle – the wider family, family functioning and environmental factors.

Practitioners in Wandsworth are increasingly finding that the evidence statements are helpful prompts; some are indicating that they want to use them more directly and to attach them as an appendix to their core assessment. The purpose would be to create an evidence tool that would indicate how each issue is affecting the child (either positively or negatively) at the time the assessment was undertaken. This could be a useful 'snapshot' or measurement in time which provides indicators of the child's welfare– a measurement which can be re-visited at a later date rather than revisiting the entire core assessment.

2.2 Recording Case notes in ICS

One of the concerns raised is around how much time practitioners spend recording. Some authorities have worked with their staff to understand where particular tasks, like recording notes, are absorbing large amounts of social workers' time. Practitioners often raise the issue of falling behind on their case recording. It can be helpful for practitioners and managers to work together to develop guidance on the expectations of case recording.

Here are some factors for both managers and practitioners to consider regarding the role of case notes in recording:

- How will the case note be headed for storage and retrieval? Will it be found under date, type of note, topic or subject? Consistency in approach will enable the IT system to sort and collate the case notes in meaningful ways.
- Auditing of case notes – are all case notes to be signed off by managers? How often? How long after carrying out the task should a case note be recorded?
- What can managers do to encourage and support practitioners to schedule time to record on ICS?
- Can managers and practitioners develop guidance on where and how evidence and analysis and professional opinion should be recorded?

- Can the use of chronologies from the beginning of social care involvement with a child be supported and encouraged?
- Is it clear for both managers and practitioners that practitioners only fill in sections of forms that are relevant to the assessment or plan for the individual child and their family?
- Are there forums for managers and practitioners to share examples of good recording practice within teams?

For further guidance and assistance on the writing of Case Notes please visit the “Write Enough” website at www.writeenough.org.uk

2.3 Using ICS to support the task of analysis

Carrying out a robust analysis of all the information that is collected during the assessment process is one of the most important professional tasks a social worker is required to complete. The ICS system should be able to support the practitioner in this task by providing good visibility of all information collected over the whole period of social care interaction with the child and family. It should be able to support good recording of the issues that focuses on the impact of the child.

For example, Cumbria on how they have worked with their practitioners to support them to show their workings out in the ICS system. They have a practice programme based on a simple needs-based approach to analysis which can be used by any practitioner, from any agency, to assess needs and formulate desirable outcomes in any childcare situation, ranging from CAF assessments to planning for looked after children, and this approach has been reflected in Cumbria’s ICS system.

2.4 Using ICS to support the task of planning

Some ICS systems have been more successful than others in interpreting needs led plans for children into user friendly formats. Practitioners have expressed concerns that the current planning format is not easily understood or accessible by children, families or other professionals.

Islington have supported practitioners within their authority by developing guidance that addresses both the practice and recording element. Below is an example of that guidance.

Needs/Strengths	Outcomes	Services
<p>Needs are clearest when they are stated as the current situation. Say what is happening for that child at the moment. This maybe a difficulty/problem or a positive strength (<i>see the examples given</i>). It can also be useful to write the context of how the child arrived in that situation (<i>see CHILD B example</i>).</p> <p>Needs are often incorrectly written as either:</p> <p>(1) the service e.g. <i>The child needs therapeutic support</i> Or</p> <p>(2) the outcome e.g. <i>The child needs consistent boundaries</i>.</p>	<p>The outcome is what you want to achieve for the child. If the need is a problem then the outcome is what you want to change. If the need is a strength, then the outcome is for this to be maintained.</p> <p>The most important aspect of the outcome is that the SMART principles are applied. The outcome must be: Specific, Measurable, Achievable, Relevant, Timely</p> <p>Assessing and planning for each child's developmental needs will enable all children to achieve the 5 outcomes outlined in ECM:</p> <p>Stay Safe Be Healthy Enjoy and Achieve Economic Wellbeing Making a Positive Contribution</p>	<p>Services are better thought of and expressed as 'Actions' i.e. Who is doing what and by when, in order to achieve the outcomes and meet the child's needs.</p> <p>This should not be a list of agencies or teams that are going to deliver a service. It is a series of tasks/actions (sometimes very specific) that individuals are going to be responsible for undertaking. This includes the child, parents and other family members as well as professionals.</p>
<p>Need 1</p> <p>A good plan ay have more than one outcome attached to each need and certainly is very likely to have several services attached to each need and outcome.</p>	<p>Outcome 1</p> <p>Outcome 1a</p>	<p>Service 1</p> <p>Service 2</p> <p>Service 3</p> <p>Service 1a</p> <p>Service 1b</p>

Each column has a status bar showing whether the need is:

Unmet

Partial

Met

Likewise outcomes can be:

Unachieved

Partial

Ended

And services can be:

Current

Partial

Achieved

If you enter a need and give it the status of being met it will not copy forward into following versions of the plan or other reports, because being met, it is assumed to be no longer relevant. Even if you state the need as a strength e.g. *The child is healthy* it does not need to be met, because the child will need to continue to be healthy in the future. Most needs can remain partially met, so that they copy through, only specific events need to be met.



Supporting practitioners to put their practice into ICS

ANNEX ONE

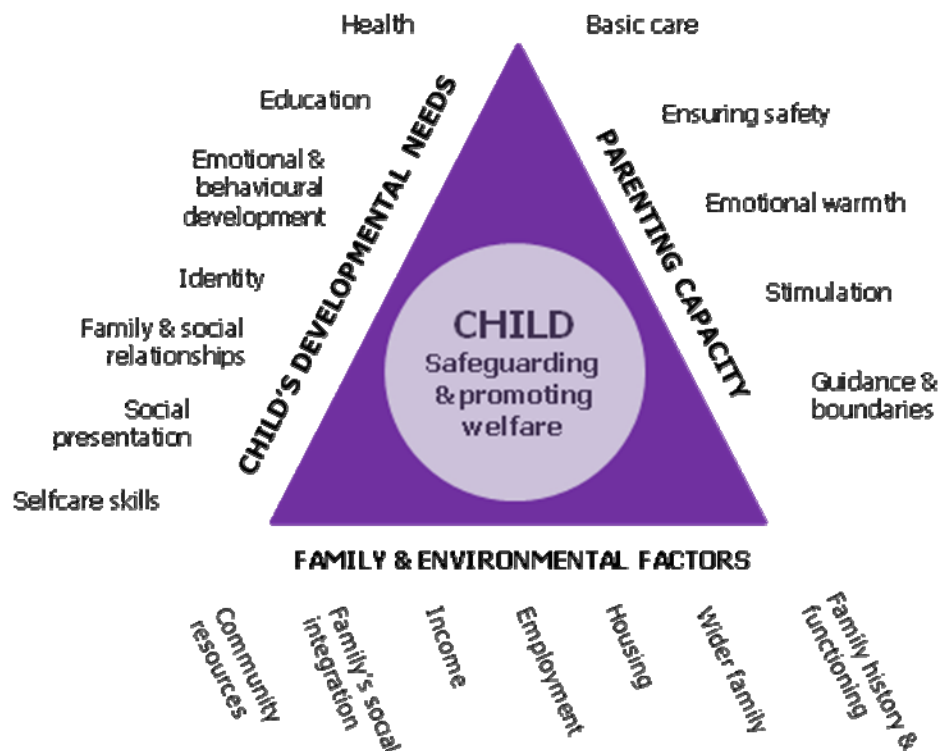
This section of the guide has been designed by practitioners and managers on the Expert Panel to support frontline practitioners to use the Integrated Children's System in delivering services to children and their families. It is based on their experience of successful use of ICS systems to support practice which meets the requirements of legislation, Working Together and the Assessment Framework for Children in Need.

It is not intended to be a document that tells you what to do. Rather you can use the sections that are most relevant to you at the time. We hope that it will prove a useful aide memoir and that over time you will add to it and develop your own local version.

1. The ICS practice framework

The Assessment Framework (below) supports social workers to identify children, including those requiring protection from harm, in need of services under S17 of the Children Act 1989 through a case management process. The assessment of the child's needs is structured around the seven developmental dimensions that have been shown to be important for all children to achieve to thrive and grow up in order to enter adulthood successfully.

This framework is supported by an electronic case management system (ECMS). The framework and the ECMS are two of the key components that make up the Integrated Children's System (ICS).



2. Achieving child-centred recording in ICS

2.1 Case notes

The case note is used as a running record of daily activity stored in the child's file. It should be factual and evidence based. The case record should reference relevant observations and agency decision making. Case notes should not be overly long and the writer must always be aware that they are writing so that others can follow the developments within the child's life in a clear and accessible manner. Case notes can be used to quickly establish key facts and clearly highlight key issues and concerns.

2.1.1 Some examples of ways in which ICS case notes can be used by practitioners

- An index of where to find: significant events; information gathered and being used for assessment, planning and review purposes; and the location of information not on the electronic file such as x-rays, occupational therapy plans or reports that cannot be scanned.

- A task and time sheet of work undertaken by the practitioner on the case including: telephone calls that were unanswered; home visits where the family was not home; meetings where professionals and family members did not attend; any travel undertaken; and consultations with managers, team members and other professionals regarding the case.
- Storage for any scanned hand written notes made during assessment, home visits and other observations.
- To show workings out: notes containing any hypothesis currently being tested about the case and all the outcomes of that testing.
- Use of bullet points as means of summarising key issues/concerns and as way of allowing other readers to quickly access important themes/actions/decisions.

This is not intended to be a definitive list and it is up to each authority to make a decision on how case notes are utilised by the practitioners. Many authorities have developed clear practice guidance to support their practitioners in understanding the purpose and format case notes should take. Below is a list of the some of the areas that may need clarification in your authority:

- What is the purpose of the case note? Is this the best place for this piece of information or can it be placed elsewhere (in the chronology, or assessment record)?
- Who is the audience? Who will have access to the case notes section of the file? How often and for what purpose?
- How will the case note be headed for storage and retrieval? Will it be found under date, type of note, topic or subject? The IT system will not be able to sort and collate the case notes into any meaningful pattern if the entry is not coded properly.
- Style of case note recording – does management expect verbatim notes of any interviews, or are case notes expected to be short entries pointing to other documents? Are these expectations documented within authority guidance?
- Auditing of case notes – are all case notes to be signed off by managers? How often? How long after carrying out the task should a case note be recorded?

2.2 Chronologies

A chronology lists, in date order, all the major changes and events in a child's or young person's life. It is a key tool for assisting practitioners and their managers to assess cause and effect patterns to support analysis and decision making in assessment. In order for local authorities to fulfil statutory requirements, their IT systems must be able to assist the practitioner in generating a chronology as part

of the functionality. Both the practitioner and the technology contribute to a successful chronology.

- Chronologies must only include key/significant events or developments for the child/family. They should not replicate the Case Note entries.
- Chronologies should allow workers to evidence key themes/concerns in the child's life.

It is the practitioner, not the technology, who makes sense of lists of dates and patterns of cause and effect and who uses their professional judgement to use past history to inform decisions about future interventions. A computer cannot do this and no chronology that is entirely computer generated will have the depth of meaning that a practitioner needs for it to become a useful tool to aid the decision making process. The ICS IT system can, however, ensure that all events entered into the computer are listed in the correct chronological order. This is important as it frees the practitioner from relying on their memory or on incorrectly filed information. But, it does not sort the relevant from the irrelevant or make any other types of patterns unless it is programmed to do so. It can only sort into categories (such as Health, Education, Social Care, Relationship) if the entry has been coded correctly from the pick list or tick box.

2.2.1 Building a chronology in ICS

- Start the chronology when the case is allocated.
- Consider whether the information should be recorded as a case note or whether it can go straight into the chronology as a significant event and if it needs to be recorded in a number of places.
- Be clear about what types of events should be recorded in chronologies. The child's chronology is not intended to hold social work tasks. For example, it is not significant to a child that a meeting has been held about them, however, a decision made in the meeting may have a significant impact on the child and that decision should be recorded.

Note: all systems have differing capacities but it is possible for an Electronic Social Care Record management system to create a list of dates and events to form a chronology.

2.3 The forms

The same record can be used for a number of different purposes and needs to communicate common meaning across a number of different disciplines. The forms were intended to provide a framework for practitioners, children and families, and their partner agencies to record the key events of assessment,

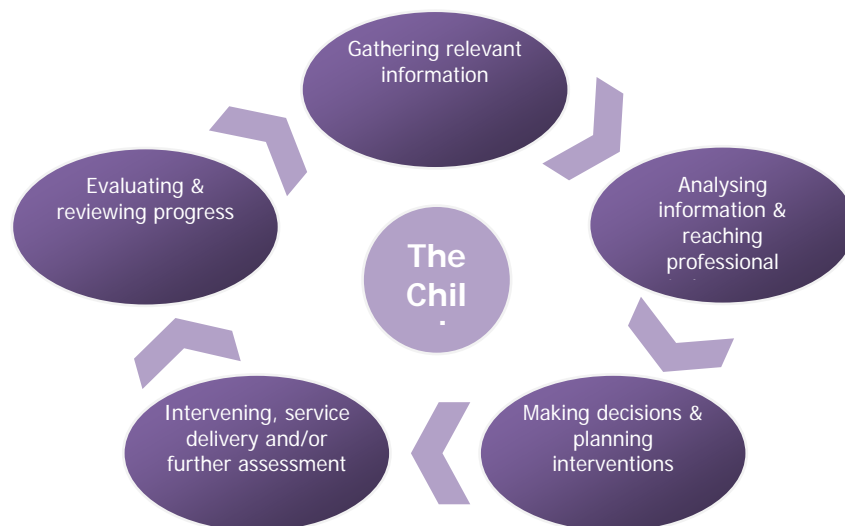
planning, intervention and review in a way that promoted common understanding.

In adapting and amending the forms to better meet the needs of the child, the family, the practitioner and their partner agencies, it is useful to re-visit the under-pinning conceptual framework that supported the recording tools.

Printed outputs are an important part of creating a successful and usable record. When adapting and amending forms it is important to think about both the child's and the family's needs for clear, understandable records that are meaningful to them.

3. Using ICS to support assessments

Practitioners working with children and families will be familiar with the case management model of continuous assessment and intervention.



This model emphasises the fact that work with families cannot be static. All plans and interventions need to be reviewed and evaluated on a regular basis involving all participating agencies. The ICS can support this model.

3.1 Collecting and recording evidence

- Use the frameworks provided in ICS to support the collation and recording of evidence. For example, when a case is allocated for an initial assessment, open the form and enter in all known information as a first step.
- Where information is unknown, type in questions, sources of information or actions to be carried out.
- The record can become your work plan, to be printed off and taken out into the field to support conducting interviews or information gathering.

- Each time you obtain new information place it straight into the form. This allows the picture to build up around the child and family over the period of the assessment.
- Any record that is designed to record the findings of your assessments can be used this way.

3.2 Analysis

The Assessment Framework helps you sort the vast quantity of information received by practitioners into coherent areas. It acts as a prompt in areas where there is no information.

The Assessment Framework was never intended to be applied as a rigid question and answer exercise, with all domains and dimensions being treated as mandatory questions. Practitioners should use their professional judgment to decide which areas are applicable to the child they are focusing on, using the framework to support their analysis. Here are some ways in which practitioners are using ICS to help support their analytical practice.

- Use the Analysis section of the form to ‘show your workings out’ – in other words to take the reader step by step through the presenting concerns as evidenced within dimension and summary boxes. State what it is that you think is occurring for the child as a result of this and what decision you have come to around intervention and support.
- Use the summary boxes in the form to sum up whether harm has occurred or is likely to occur to the child (i.e. the risk of harm) as well as the resilience and protective factors for child at the end of each section. Being clear about both the needs and the strengths in each section assists with planning. There should be no new information in this section.

4. Continuing assessment

The conceptual framework underlying the ICS promotes continuous assessment as the child develops and their needs change. Once the document is signed-off, the planning and review documents contain the ongoing assessment of change for the child/young person and family through successful intervention.

Planning is a dynamic process which should be seamless with assessment. Any assessment that concludes with a recommendation for further intervention by any agency should progress to a plan for the young person.

The plan will form part of a developing sequence in which the objectives of the plan and the current needs and strengths of the child are reconsidered on the basis of changing circumstances and fresh experience (Grimshaw and Sinclair, 1997).

Wherever possible, it should be a process which fully involves the child or young person and relevant family members and contributing agencies. They should be in agreement with the plan of action when it is drawn up and their commitment to it secured.

5. Ways in which ICS can be used to support the task of planning

- Plan the assessment prior to beginning work with the child/young person and family. By entering what you know and what you are going to do into the record prior to beginning interaction with the family, it supports clarity about what you are trying to achieve in each visit, and planning to test the evidence you gather to ensure time spent on assessment is focused and productive. The record then becomes part of the tools you use to support your hypothesis, analysis and professional judgment and supports developing a needs-led plan.
- Use the summary sections relating to a child's developmental needs, parenting capacity, corporate parenting and family and environmental factors, to develop the plan. The plan should reflect the findings from the assessment/reviews, and drawing on knowledge about effective interventions across agencies and age ranges.
- Record plans in such a way that it makes it possible to see whether planned action has occurred and to identify the effectiveness of interventions. Use the form to record the named person that will carry out each task, including the frequency and duration of that involvement.
- The plan must maintain a focus on meeting the child's needs, even though services may be provided to a number of family members as part of the plan. All targets/goals must be achievable with acceptable timescales.
- The complexity or severity of the child's need will determine the scope and detail of the plan. The child's circumstances will determine whether the Initial plan, the Child Plan or the care plan for a looked after child should be used.

6. Example plan entries

Child / Young Person's Developmental Needs

Health

Needs/Strengths	Outcomes	Services
This section should always be about the child – use their name	This section should be the specific improvements you would expect to see should the child's needs be met	This section should have specific information about person providing the service including the parents. It should have the frequency and duration of service as part of the plan.
Sarah has very limited sight in her left eye following an injury caused by falling from her bicycle when she was 5 yrs old.	Sarah to have special glasses that allow her to see adequately in her left eye.	Parents to take Sarah to her optician a minimum of twice a year, for her eyes and prescription to be reviewed.
Jack is 4lbs underweight, as a result of some feeding difficulties.	Jack to gain 4lbs within the next month.	Miss Smith (Mother) to feed CHILD C at 4 hourly intervals, 3 ozs of baby milk. Mrs O'Donnell Health visitor (Weston Park Clinic) to monitor and weigh Jack weekly Miss Smith Parent to present Jack at clinic weekly. To act on advice given by the Mrs O'Donnell Health visitor & Terry Parks, social worker and if they have difficulties maintaining this routine they are to discuss with SW or HV as soon as possible.

Taken from Islington Guidance on writing plans V2

7. Using ICS to support the task of planning in relation to young people

The ICS system normally generates a pathway plan for a young person in care just before they turn 16 years of age (15 years and 11 months). The pathway plan process is very important in promoting children and young people's independence and supporting them to begin to think about how they would like to live their lives as adults. During the formulation of the pathway plan, it is important to consider the young person's transition from being child looked after to achieving good semi-independence skills, which will form the basis of their eventual successful adult living. Practitioners on the behalf of the local authority can plan the pathway plan functionality on ICS in order to:

- Focus on all issues covered through the pathway plan: education, sexual health, employment, income, accommodation, family relationships, issues around substance misuse, support. Identify specific needs throughout the assessment process.
- Identify appropriate services and supports for the young person to assist them in building up their independence skills.
- Clearly record measurable outcomes and services that have been identified to meet the needs of the young person.

8. Using ICS to support reviewing

It is important to distinguish between reviewing as a process of continuous monitoring and reassessment, and the review as an event when a child's plan may be considered, reconfirmed or changed, and such decisions agreed and recorded.

In the Integrated Children's System, the review focuses on the child's developmental needs and progress and how this information relates to the planned objectives set out in the current plan, as well as any changes in the child and family's circumstances since the plan was made.

The Assessment and Progress record within the system is intended to provide a continuous assessment process for looked after children. It builds on the baseline information provided by the Core Assessment at point of entry to care. It acknowledges the fact that looked after children are changing and growing and that the issues and needs they presented with when first coming into care, will also change. It records the information which parents hold in their heads about their own child but which is easily lost in a corporate parenting context where responsibilities are shared and children move placements frequently. It is this process that feeds into the review process and supports further planning to build resilience and independence for children who are looked after. Young children in care should have their assessment reviewed each six months and older children on a yearly basis, unless the practitioner judges it needs to be more frequent.

The Review documents within the electronic ICS can be accessed as soon as the outcome of the last review has been completed by the Independent Reviewing Officers and the care plan has been updated. This means that they can be used to hold the details of significant changes or on-going assessment evidence, or identification of new needs during the period of the review. In this way they can be built upon and remain in draft, assisting the practitioner to view the child holistically over time.

The Review documents within ICS for pathway plans can be accessed at any time for young people leaving care before the 6 month statutory timescale for review and, therefore, the form can be used as an ongoing assessment tool. Unmet need can be monitored alongside service provision and effectiveness in terms of outcome. This can lead to improved commissioning of services for children which enables frontline practitioners to provide more targeted services to children and their families.

9. How practitioners can add value to the information management gathering cycle

- Become familiar with the information fields in each record that are collecting information and know what it is used for.
- Be conscious of choosing the fields that accurately reflect the world of the children and families you work with.
- Ask your manager to bring information about commissioning and improved outcomes in terms of service provision to children and families to your team meetings.
- Always document unmet needs in the planning and review processes so that it is captured and can be fed up to the senior management teams.

10. Further Resources

Tools that support to the Integrated Children's System

Statutory Guidance:

- Framework for the Assessment of Children in Need and Their Families (2000) Department of Health, Department for Education and Skills & Home Office, London, The Stationery Office
- Working Together to Safeguard Children (2006), HM Government, London, The Stationery Office.

Practice Guidance

- Assessing Children in Need: Practice Guidance (2000), Department of Health, London, The Stationery Office.
- The Child's World: The Comprehensive Guide to Assessing Children in Need, 2nd edition (2009), Ed Horwath.J, London, Jessica Kingsley Publishers.
- Children's Needs, Parenting Capacity: The Impact of Parental Mental Illness, Problem Alcohol and Drug Use and Domestic Violence on Children's Development (1999), Cleaver.H, Unell, I & Aldgate. J, London, The Stationary office, 1999 (currently being updated as part of the Staying Safe: Action plan)
- The Developing World of the Child (2006), Eds, Aldgate.J, Jones.D, Rose.W, & Jeffery.C, London, Jessica Kingsley Publishers, 2006.

Practice Tools

- Family Pack of Questionnaires and Scales (issued with the Assessment Framework, (2000) Department of Health, Cox A. and Bentovim B., London, Stationery Office).
- The Family Assessment: assessment of family competence, strengths and difficulties (2001) Bentovim A and Bingley Miller L, London, Pavilion Publishers.
- The HOME Inventory: home observation and measurement for the environment (2002), Cox A & Walker S, Brighton, Pavilion Publishers.
- Implementing the Integrated Children's System: Training pack (2004) Stephen Walker, Jane Scott, and Hedy Cleaver, DfES, www.gov.uk/ics
- Putting Analysis into Assessment, Undertaking assessments of need – a toolkit for practitioners (2007), National Children's Bureau, London, NCB.
- Safeguarding Children – a shared responsibility. Multi-Agency Training Resources (2007), London, NSPCC.

Recording tools

- Write Enough (Walker et al, 2002) has been developed to assist social work practitioners to record effectively. It is available on www.writeenough.org.uk and has been distributed to those with children's social services training responsibilities.

Using these tools in conjunction with the Assessment Framework will support practitioners to carry out assessment under the Assessment Framework within ICS.

Integrated Children's System ICS Guidance Note - 1



Recording the Core Assessment

1. Introduction

The Core Assessment was prioritised by the ICS Improvement Conferences and the Expert Panel as one of the key priorities for work to make ICS easier to use.

High quality assessments that are fit for purpose are pivotal to a Local Authority meeting its statutory requirements under the Children Act 1989 and for producing good outcomes for children. However, feedback from practitioners suggests the manner in which the current ICS Core Assessment formats have been translated and facilitated by some IT systems, are often hampering social workers in recording the information gathered during the assessment and cannot be easily used for making sense of the child within their family environment. This Guidance Note has been produced in consultation with the Expert Panel to assist local authorities in considering the potential options for Core Assessment implementation and towards simplification to enhance usability.

It is for local authorities to ensure that all those working with children in need carry out assessments in accordance with the statutory framework and good practice. This Guidance Note does not advise on how best to do this but sets out options, based on consultation, for how local authorities can simplify practitioners' experience of ICS in recording the Core Assessment if they wish to, with particular attention to possible changes to recording in accordance with the domains and dimensions, guidance notes, 'tick box' statements and age bands. This is intended to assist local authorities in assessing the inherent strengths and weaknesses of the various potential approaches.

Local Authorities may also wish to consider issues covered in 'Guidance Note 2 – Improving Narratives around the Child and Family' when looking at their options for the Core Assessment.

2. Which parts of the Core Assessment are essential?

A Core Assessment is an in-depth assessment of the child's needs where his or her circumstances are complex. It addresses the central or most important aspects of the child's needs, and the capacity of his or her parents to respond appropriately to these needs within the wider family and community context. The information gathered through the Core Assessment should be used to inform the plan most appropriate to the child's

needs and circumstances, including decisions about which interventions are most appropriate to the particular child and family. This includes plans for a child living with his or her family, where the child has been made the subject of a child protection plan and for a child who needs to be looked after. The evidence gathered during the Core Assessment process is also used for decision making as to whether the child is suffering, or is likely to suffer, significant harm. It therefore plays a central role in identifying evidence of significant harm (i.e. risk of harm) for presentation in family court proceedings.

The Core Assessment is undertaken in accordance with the statutory guidance 'The Framework for Assessment of Children in Need and their Families (2000)'. The Assessment Framework has been incorporated into all statutory guidance relating to different types of children in need – those living at home, those subject to a child protection plan, looked after children, care leavers, family court applications and those being or who have been adopted. It is also used for assessing and providing services for privately fostered children.

Annex A sets out an item-level deconstruction of a Core Assessment. It sets out the origin of each item in relation to legislation, regulation, guidance, research findings and best practice and whether these are mandatory or non-mandatory for capturing within the Core Assessment. Both the mandatory and non-mandatory elements and the options and relative merits for approaches to them are discussed later in this paper.

3. Options to make Core Assessment recording simpler and easier.

In considering options to make Core Assessment recording simpler and easier, local authorities will need to take into account a range of local issues and may wish to discuss with their supplier the ramifications of any intended changes. As local configuration will differ from local authority to local authority and from supplier to supplier, there is no single 'right' or 'best' approach. However, the Expert Panel suggested that local authorities should pay specific regard to:

- How information flows in their ICS system.
- Whether any changes that are made in any one area of the system may impact on the pre-population of data in other parts of the system.
- How local configuration impacts on statutory, statistical or local management data collection, e.g. whether any such information is being gleaned from or directly populated by information collected or entered at specific points or structured data fields within the ICS system.

4. Domains and dimensions

The Core Assessment was designed to support assessments undertaken in accordance with the statutory guidance 'The Framework for Assessment of Children in Need and their Families (2000)'. The domains and dimensions within the Core Assessment follow the structure of the Assessment Framework (Fig 1 below). Local authorities may find it useful to reproduce the Assessment Framework 'triangle' at the front of the Core Assessment. This may assist social workers in understanding why the information is structured in this particular manner, and in completing the assessment and explaining/sharing its contents to the child/young person/family.

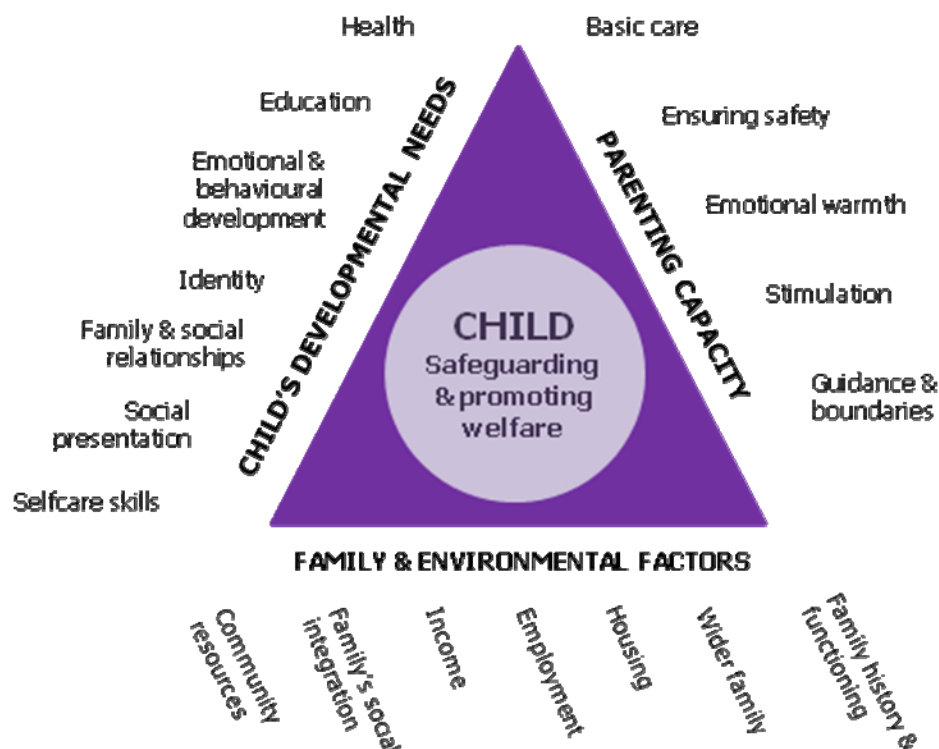


Figure 1

In the Core Assessment, the dimensions relating to the domain of Child Development Needs are addressed individually i.e. health, education, emotional and behavioural development etc. Following each individual dimension is a section addressing parental capacity to meet the child's needs in regard to that dimension.

The notes and evidence section within the parenting capacity section guide practitioners in how to address the dimensions relating to the domain of Parental Capacity, i.e. basic care, ensuring safety etc. Following this is a free text box for a social work summary. Similarly for the Family and Environmental Factors Domain.

5. Guidance Notes

Guidance notes are not mandatory. By stripping the Core Assessment of all guidance notes it is possible dramatically to reduce size as both an input and output document.

However, some local authorities, having reviewed the options, have chosen to retain practice guidance to assist social workers with producing assessments, and there are other ways of simplifying the presentation. Current guidance is, largely, shown in the far left-hand column under each section and the Expert Panel has suggested alternative approaches that could be taken, for instance:

- To show the guidance 'on screen' but not on the printed report (or to have an option as to whether this should appear on the printed report). See example B in the following section on 'tick box' statements;
- To show the guidance as a 'link' button 'on screen'. The advantage of this second approach is that on screen navigation will be easier, with a need only to access the guidance link when required.

'Guidance Note 4 – Improving Outputs from ICS Systems' discusses in more detail issues and options for dealing with guidance.

The content of the guidance notes in the system can also be modified. The present guidance notes are based on research findings but could be altered to meet local needs or tailored for specialist teams, e.g. for those working with children with disabilities.

6. 'Tick box' statements

Tick box evidence statements are not mandatory. These have been a highly controversial area of the ICS, especially in regard to the Core Assessment. The statements were intended to assist social workers in planning the assessment (i.e. to provide guidance on areas to consider), to identify gaps in knowledge (i.e. to show where there is no evidence either to support or negate a statement), to help in identifying areas of strength and difficulties in the child's development, and to assist with structuring and recording the evidence after it had been gathered. The statements are not intended to be used as questionnaires for work with children and families.

Example A below shows part of the Core Assessment from which both the guidance notes and tick boxes have been stripped. An exercise based on such an approach produced an uncompleted Core Assessment of seven pages.

Example A – Core Assessment stripped of guidance notes and tick boxes

Health: Child's developmental needs

Notes and evidence:

Health: parental capacity

Notes and evidence:

Social worker's summary:

If local authorities wish to retain the tick boxes, the Expert Panel suggested they could be presented in a more logical order i.e. on the right hand side of the record so that the 'notes and evidence' section occurs prior to the tick boxes. One potential illustration of this is shown in Example B below. Local authorities could work with suppliers to include the 'tick boxes' as a link or on the input screen, with an option as to whether to include these on printed reports. There is also an example of how Wandsworth have approached the Core Assessment 'tick boxes' in the 'Getting the Best out of ICS' guidance.

Example B – representation of 'tick box' statements

Health: Child's developmental needs

Notes and evidence on child's health needs.	Please record whether the following statement is true, using professional judgment regarding evidence gathered during the assessment. Please note that this section should only be completed following the gathering and recording of evidence.	Guidance to assist in the gathering of evidence.
	<p>Yes No</p> <p>H1. Child is generally well <input type="checkbox"/> <input type="checkbox"/></p>	<p>Taking into consideration any disability or chronic sickness, normally well is defined as <i>unwell for 1 week or less in the last 6 months.</i></p>

7. Age bands

Age bands are not mandatory. The Core Assessments were divided into age bands to assist social workers in understanding what appropriate development is for a child at a particular age and stage of development. The age bands are divided into the key developmental stages of children and were linked to ages where children generally enter school, further or higher education or employment. Statements and guidance notes are specific to the different age bands. These age bands enable more developmentally sensitive information to be presented and may assist in determining whether the health and development of a child is being impaired, in order to decide if the child is in need and if the child is suffering or likely to suffer significant harm.

Local authorities could choose to produce "generic" Core Assessments that have no age bands. This would have the advantage of facilitating a single Core Assessment record which could look simpler on screen, but the disadvantage of not being able to produce guidance notes and formats that are age-specific and appropriate to the child's

developmental stage. Another approach could be to develop input screens with age-banded specific guidance notes, but a single generic printed report document.

8. Parental/Carers' Attributes

The tick boxes in the section 'Parental / Carers' Attributes and the Impact on their capacity to ensure the child's safety from harm and to respond appropriately to his/her needs' are not mandatory. They were based on research findings about the areas that are most likely to affect parenting capacity. Their retention is optional, but some authorities have found them particularly useful in gathering evidence for decision-making as to whether the child is suffering or is likely to suffer significant harm. Local authorities will need to judge how best to use them (or not) to support local practice in delivering the statutory requirement.

9. Presentation of the domains and dimensions, summary boxes and child and parental views

The Assessment Framework uses a systematic approach to gathering and analysing information about children and is an approach that also discriminates effectively between different types and levels of individual need. It requires a thorough understanding of the developmental needs of children, the capacities of parents or caregivers to respond appropriately to these needs and the impact of wider family and environmental factors on parenting capacity and children. These are described as three inter-related systems or domains, each of which has a number of critical dimensions (see Figure 1 above). The interaction of these dimensions requires careful exploration during assessment, with the ultimate aim being to understand how they affect the child. The Assessment Framework is therefore a sophisticated approach for assessing, analysing and addressing the needs of children across a wide variety and complexity of individual circumstances.

It has been suggested that, in an attempt to replicate this approach, the ICS Core Assessment has flattened out and atomized the Assessment Framework. Consequently, practitioners have complained that entering information gathered during the assessment process can be repetitive and that the number of boxes that need to be filled out to cover the domains, dimensions, summaries of these, and the child's and parent's views on them, makes it difficult to see 'the wood for the trees'.

There are alternative ways for the domains and dimensions to be represented within the Core Assessment. The Expert Panel found that the individual summary box at the end of each dimension under the domain of Child's Development Needs can be over repetitive and may not assist in the overall flow of information presentation. In seeking to simplify the presentation local authorities could therefore consider:

- Having one summary box for the whole domain.
- Presenting the summaries for the dimensions at the beginning of the Core Assessment. Some practitioners may find this will help them to explain the outcome of the assessment and the report to families and in presenting key information in meetings – though there will still be a need to ensure the document is recorded in a logical order. Alternatively, it could be addressed as a printing issue i.e. to input in

the present order but to show the summary first on the printed report. 'Guidance Note 4 – Improving Outputs from ICS' discusses issues and options for printed reports in more detail.

- Presenting each domain with its associated dimensions as individual sections, with an overall summary box at the end. An illustrative example of this approach is detailed below (example C). However, such an approach may prove difficult for incorporating the current guidelines and statements, should the local authority wish to retain these.

The child's views and parent's views could be captured following each domain summary or (as in example C) at the end of the assessment in composite sections.

Example C - Core Assessment addressing individual dimensions with summary boxes for domains.

(This example shows only broad headlines, and gives some of the dimensions, for illustrative purposes. To see all the dimensions, please refer to Figure 1 above).

DOMAIN: CHILD'S DEVELOPMENTAL NEEDS
<ul style="list-style-type: none"> • Separate sections addressing each dimension – Health, Education etc
Social worker's summary of Child's Developmental Needs
DOMAIN: PARENTING CAPACITY
<ul style="list-style-type: none"> • Separate sections addressing each dimension – Basic Care, Ensuring Safety etc
Social worker's summary of Parenting Capacity
DOMAIN: FAMILY AND ENVIRONMENTAL FACTORS
<ul style="list-style-type: none"> • Separate sections addressing each dimension – Family History and Functioning (including Parent's / Carer's attributes and their impact on the child - physical illness, mental ill health, known history of violence and so on), Wider Family etc
Social worker's summary of Family and Environmental Factors
Child's wishes and feelings
Parent's views
Analysis of information in all 3 domains
Evidence of significant harm or likelihood of harm – where appropriate for the individual child
Decisions

10. Court Core Assessments

The Court Core Assessment was developed in order to improve the standard of documentation produced from the ICS for use in family court cases under the Children Act 1989. It was developed in consultation with local authority representatives, CAFCASS, the legal profession and the judiciary. The Core Assessment was approved by the President of the Family Division.

The approved Court Core Assessment follows the same outline structure as the original Core Assessment design so that it could be pre-populated directly from information entered into the ICS during the Core Assessment process. The dimensions relating to the domain of Child's Developmental Needs are addressed individually, followed by a section addressing parental capacity to meet the child's needs in regard to that dimension and finally a summary box. There is then a section dealing with parents'/carers' attributes, followed by a section addressing the domain of Family and Environmental Factors and the dimensions relating to this. There are also summary boxes at the end of each of these sections. The 'notes and evidence' statements have been retained throughout this structure and were included as the judiciary felt these were useful for evidential purposes.

In considering the potential options for local ownership and decision-making in regard to the Core Assessment, local authorities may wish to consider any resulting impact on their Court Core Assessment structure and any relevant agreement they have reached with the local judiciary.

Annex A

This annex sets out an item-level deconstruction of a Core Assessment. It sets out the origin of each item in relation to legislation, regulation, guidance, research findings and best practice. It also establishes whether items are required in the Core Assessment in order for the local authority to fulfil its legal responsibilities, including the requirements set out in statutory guidance issued under section 7 of the Local Authority Social Services Act 1970. We refer to these legal requirements as “mandatory” in the table below. Both the mandatory and non-mandatory elements, and the options and relative merits for approaches to them, are discussed earlier in this paper. The Core Assessment chosen for this sample deconstruction is that for a child aged 3 – 4 years.

ITEM	BASIS	STATUS (mandatory / non- mandatory)	COMMENTS
Family name, given name, DOB, Gender, Address, Postcode, Telephone Number CSSR case number	Statutory requirement	Mandatory	IT system likely to pre-populate from information gathered earlier in the case process e.g. at referral and initial assessment
Complaints procedure (date provided)	Complaints procedures under the Children Act 1989	Mandatory	
Information on access to records (date provided)	Complaints procedures under the Children Act 1989, Data Protection Act 1998	Mandatory	
Other relevant-available information (date provided)		Non-mandatory	
Date Child and Family Members seen-interviewed:			
Date	Statutory requirement	Mandatory	
Name	Statutory requirement	Mandatory	
Child seen during interview (tick box)	Statutory requirement	Mandatory	

ITEM	BASIS	STATUS (mandatory / non- mandatory)	COMMENTS
Agencies involved	Statutory requirement	Mandatory	May be partly pre-populated from information already known (e.g. gathered during the initial assessment)
Reason for the core assessment	Statutory requirement	Mandatory	May be pre-populated from "Reasons for Initial Assessment", with ability to amend/update
Date core assessment started	Statutory requirement	Mandatory	Required for DCSF statistical returns
Date core assessment ended	Statutory requirement	Mandatory	Required for DCSF statistical returns
Where a child-parent has a disability or specific communication need, what action has been taken to address this	Disability Discrimination Acts 1995 and 2005 Assessment Framework (2000), Working Together (2006)	Mandatory	
HEALTH: child developmental needs:	Statutory guidance issued under section 7 of the Local Authority Social Services Act 1970: Assessment Framework. Therefore addressing the domains and dimensions is required - Working Together (2006); CA 1989 Regs and guidance Vol 1 Court Orders 2008 and the Public Law Outline (2008); Adoption and Children Act 2002 guidance	Mandatory	Please note that it is mandatory to address the domains and dimensions of the Assessment Framework. However, it is not mandatory to present these exactly as set out in the original ICS exemplar. There is a discussion of other potential options for presentation earlier in this paper

ITEM	BASIS	STATUS (mandatory / non- mandatory)	COMMENTS
Left-hand column guidance	Guidance notes based on research findings	Non-mandatory	Assists in meeting CA 1989 duty to assess child's developmental progress and then decide on children in need status and on significant harm
H1 – H17 statements e.g. H1 Child is generally well	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
HEALTH: parental capacity:	Statutory guidance issued under section 7 of the Local Authority Social Services Act 1970: Assessment Framework. Therefore addressing the domains and dimensions is required - Working Together (2006); CA 1989 Regs and guidance Vol 1 Court Orders 2008 and the Public Law Outline (2008); Adoption and Children Act 2002 guidance	Mandatory	Please note that it is mandatory to address the domains and dimensions of the Assessment Framework. However, it is not mandatory to present these exactly as set out in the original ICS exemplar. There is a discussion of other potential options for presentation earlier in this paper
Left-hand column guidance	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
H9 – H19 statements e.g. H19 Child is given an appropriate, adequate and nutritious diet, including fluids	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development

ITEM	BASIS	STATUS (mandatory / non- mandatory)	COMMENTS
Social worker's summary		Non- mandatory	Summary may be useful in making sense of information gathered but do not necessarily have to be undertaken for each dimension There is a discussion of other potential options for presentation earlier in this paper
EDUCATION : child developmental needs:	Statutory guidance issued under section 7 of the Local Authority Social Services Act 1970: Assessment Framework. Therefore addressing the domains and dimensions is required - Working Together (2006); CA 1989 Regs and guidance Vol 1 Court Orders 2008 and the Public Law Outline (2008); Adoption and Children Act 2002 guidance	Mandatory	Please note that it is mandatory to address the domains and dimensions of the Assessment Framework. However, it is not mandatory to present these exactly as set out in the original ICS exemplar. There is a discussion of other potential options for presentation earlier in this paper
Left-hand column guidance	Guidance based on research findings	Non- mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
E1 – E6 statements e.g. E1 Child is making expected progress with speech and language	Guidance based on research findings	Non- mandatory	Assists in undertaking CA 1989 duty to assess child's health and development

ITEM	BASIS	STATUS (mandatory / non- mandatory)	COMMENTS
EDUCATION : parental capacity:	Statutory guidance issued under section 7 of the Local Authority Social Services Act 1970: Assessment Framework. Therefore addressing the domains and dimensions is required - Working Together (2006); CA 1989 Regs and guidance Vol 1 Court Orders 2008 and the Public Law Outline (2008); Adoption and Children Act 2002 guidance	Mandatory	Please note that it is mandatory to address the domains and dimensions of the Assessment Framework. However, it is not mandatory to present these exactly as set out in the original ICS exemplar. There is a discussion of other potential options for presentation earlier in this paper
Left-hand column guidance	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
E7 – E16 statements e.g. E7 Child has a range of toys-play materials suitable to his-her stage of development	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
Social worker's summary		Non-mandatory	Summary may be useful in making sense of information gathered but do not necessarily have to be undertaken for each dimension. There is a discussion of other potential options for presentation earlier in this paper
EMOTIONAL AND BEHAVIOURAL DEVELOPMENT : child developmental needs:	Statutory guidance issued under section 7 of the Local Authority Social	Mandatory	Please note that it is mandatory to address the domains and dimensions of the Assessment

ITEM	BASIS	STATUS (mandatory / non- mandatory)	COMMENTS
	Services Act 1970: Assessment Framework. Therefore addressing the domains and dimensions is required - Working Together (2006); CA 1989 Regs and guidance Vol 1 Court Orders 2008 and the Public Law Outline (2008); Adoption and Children Act 2002 guidance		Framework. However, it is not mandatory to present these exactly as set out in the original ICS exemplar. There is a discussion of other potential options for presentation earlier in this paper
Left-hand column guidance	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
B1 – B9 statements e.g. B1 Child is usually in a calm and contented state	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
EMOTIONAL AND BEHAVIOURAL DEVELOPMENT : parental capacity:	Statutory guidance issued under section 7 of the Local Authority Social Services Act 1970: Assessment Framework. Therefore addressing the domains and dimensions is required - Working Together (2006); CA 1989 Regs and guidance Vol 1 Court Orders 2008 and the Public Law Outline (2008); Adoption and Children Act 2002 guidance	Mandatory	Please note that it is mandatory to address the domains and dimensions of the Assessment Framework. However, it is not mandatory to present these exactly as set out in the original ICS exemplar. There is a discussion of other potential options for presentation earlier in this paper

ITEM	BASIS	STATUS (mandatory / non-mandatory)	COMMENTS
Left-hand column guidance	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assessing child's health and development
B10 – B16 statements e.g. B1 Parents respond readily to the child's emotional needs	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
Social worker's summary		Non-mandatory	Summary may be useful in making sense of information gathered but do not necessarily have to be undertaken for each dimension There is a discussion of other potential options for presentation earlier in this paper
IDENTITY AND SOCIAL PRESENTATION : child developmental needs:	Statutory guidance issued under section 7 of the Local Authority Social Services Act 1970: Assessment Framework. Therefore addressing the domains and dimensions is required - Working Together (2006); CA 1989 Regs and guidance Vol 1 Court Orders 2008 and the Public Law Outline (2008); Adoption and Children Act 2002 guidance	Mandatory	Please note that it is mandatory to address the domains and dimensions of the Assessment Framework. However, it is not mandatory to present these exactly as set out in the original ICS exemplar. There is a discussion of other potential options for presentation earlier in this paper
Left-hand column guidance	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development

ITEM	BASIS	STATUS (mandatory / non- mandatory)	COMMENTS
ID1 – ID6 statements e.g. ID1 Child generally has a positive view of self	Guidance based on research findings	Non- mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
IDENTITY AND SOCIAL PRESENTATION : parental capacity:	Statutory guidance issued under section 7 of the Local Authority Social Services Act 1970: Assessment Framework. Therefore addressing the domains and dimensions is required - Working Together (2006); CA 1989 Regs and guidance Vol 1 Court Orders 2008 and the Public Law Outline (2008); Adoption and Children Act 2002 guidance	Mandatory	Please note that it is mandatory to address the domains and dimensions of the Assessment Framework. However, it is not mandatory to present these exactly as set out in the original ICS exemplar. There is a discussion of other potential options for presentation earlier in this paper
Left-hand column guidance	Guidance based on research findings	Non- mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
ID7 – ID14 statements e.g. ID7 Child's clothes are clean: not soiled with urine, excrement or food.	Guidance based on research findings	Non- mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
Social worker's summary		Non- mandatory	Summary may be useful in making sense of information gathered but do not necessarily have to be undertaken for each dimension There is a discussion of other

ITEM	BASIS	STATUS (mandatory / non- mandatory)	COMMENTS
			potential options for presentation earlier in this paper
FAMILY AND SOCIAL RELATIONSHIPS : child developmental needs:	Statutory guidance issued under section 7 of the Local Authority Social Services Act 1970: Assessment Framework. Therefore addressing the domains and dimensions is required - Working Together (2006); CA 1989 Regs and guidance Vol 1 Court Orders 2008 and the Public Law Outline (2008); Adoption and Children Act 2002 guidance	Mandatory	Please note that it is mandatory to address the domains and dimensions of the Assessment Framework. However, it is not mandatory to present these exactly as set out in the original ICS exemplar. There is a discussion of other potential options for presentation earlier in this paper
Left-hand column guidance	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
F1 – F6 statements e.g. F1 Child shows attachment behaviour-is relaxed with main carers	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
FAMILY AND SOCIAL RELATIONSHIPS : parental capacity:	Statutory guidance issued under section 7 of the Local Authority Social Services Act 1970: Assessment Framework. Therefore addressing the domains and	Mandatory	Please note that it is mandatory to address the domains and dimensions of the Assessment Framework. However, it is not mandatory to present these exactly as set out in the original ICS exemplar. There is a discussion of

ITEM	BASIS	STATUS (mandatory / non- mandatory)	COMMENTS
	dimensions is required - Working Together (2006); CA 1989 Regs and guidance Vol 1 Court Orders 2008 and the Public Law Outline (2008); Adoption and Children Act 2002 guidance		other potential options for presentation earlier in this paper
Left-hand column guidance	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
F7 – F15 statements e.g. F7 Parent-carer loves the child unconditionally.	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
Social worker's summary		Non-mandatory	Summary may be useful in making sense of information gathered but do not necessarily have to be undertaken for each dimension There is a discussion of other potential options for presentation earlier in this paper
Parents/Carers Attributes:			
Parental Issues: Physical illness Mental illness Physical Disability Sensory Disability Sensory Impairment	Guidance based on research findings	Non-mandatory	These are factors that research has shown are most likely to affect parenting capacity. Gathering of information is important for when adults are considered to be or are likely to be posing a risk of significant harm and may be useful for evidential purposes for

ITEM	BASIS	STATUS (mandatory / non- mandatory)	COMMENTS
<p>Period in care during childhood</p> <p>Experience of being abused as a child</p> <p>Known history of abuse of children</p> <p>Known history of violence</p> <p>Problem drinking/drug abuse</p> <p>Other (please specify)</p> <p>Each attribute is followed by a yes-no tick box, space to record any professional/agency involved and space to record for whom the attribute is relevant and to record strengths and difficulties.</p>			decisions at child protection conferences and court hearings.
Social worker's summary		Non-mandatory	Summary may be useful in making sense of information gathered but do not necessarily have to be undertaken for each dimension There is a discussion of other potential options for presentation earlier in this paper
Family and environmental factors	Statutory guidance issued under section 7 of the Local Authority Social Services Act 1970: Assessment Framework.	Mandatory	Please note that it is mandatory to address the domains and dimensions of the Assessment Framework. However, it is not mandatory to present these exactly as set out in

ITEM	BASIS	STATUS (mandatory / non-mandatory)	COMMENTS
	Therefore addressing the domains and dimensions is required - Working Together (2006); CA 1989 Regs and guidance Vol 1 Court Orders 2008 and the Public Law Outline (2008); Adoption and Children Act 2002 guidance		the original ICS exemplar. There is a discussion of other potential options for presentation earlier in this paper
Left-hand column guidance	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
FE1 – FE2 statements on Family History	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
FE3 – FE7 statements on Family Functionality	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
FE8 – FE9 statements on Wider Family	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
FE10– FE15 statements on Housing	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
FE16– FE19 statements on Employment	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
FE20 – FE24 statements on Income	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and

ITEM	BASIS	STATUS (mandatory / non-mandatory)	COMMENTS
			development
FE25 – FE28 statements on Family's Social Integration	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
FE29 – FE30 statements on Community Resources	Guidance based on research findings	Non-mandatory	Assists in undertaking CA 1989 duty to assess child's health and development
Social worker's summary		Non-mandatory	Summary may be useful in making sense of information gathered but do not necessarily have to be undertaken for each dimension There is a discussion of other potential options for presentation earlier in this paper
Social worker's summary		Non-mandatory	Summary may be useful in making sense of information gathered but do not necessarily have to be undertaken for each dimension There is a discussion of other potential options for presentation earlier in this paper
Child's view of their own strengths and needs	Requirement to obtain children's wishes and feelings now enshrined in Children Act 2004. Section 53 amended sections 17, 20 and 47 of the Children Act 1989	Mandatory	Please note that it is mandatory to ascertain the child's wishes and feelings. However, it is not mandatory to present this exactly as set out in the original ICS exemplar. There is a discussion of other potential options for presentation earlier in this paper

ITEM	BASIS	STATUS (mandatory / non-mandatory)	COMMENTS
Parent's view of the child's strengths and needs	Assessment Framework statutory guidance	Mandatory	Please note that it is mandatory to address the parent's views. However, it is not mandatory to present this exactly as set out in the original ICS exemplar. There is a discussion of other potential options for presentation earlier in this paper
Summary of parental capacity: needs and strengths			
Social worker's summary		Non-mandatory	Summary may be useful in making sense of information gathered but do not necessarily have to be undertaken for each dimension There is a discussion of other potential options for presentation earlier in this paper
Child's view of their parents' strengths and difficulties and what impact they think they have on their own development	Requirement to obtain children's wishes and feelings now enshrined in Children Act 2004. Section 53 amended sections 17, 20 and 47 of the Children Act 1989	Mandatory	Please note that it is mandatory to ascertain the child's wishes and feelings. However, it is not mandatory to present this exactly as set out in the original ICS exemplar. There is a discussion of other potential options for presentation earlier in this paper
Parent's view of their own strengths and difficulties and what impact they think they have on their child's	Assessment Framework statutory guidance	Mandatory	Please note that it is mandatory to address the parent's view. However, it is not mandatory to

ITEM	BASIS	STATUS (mandatory / non-mandatory)	COMMENTS
development			present this exactly as set out in the original ICS exemplar. There is a discussion of other potential options for presentation earlier in this paper
Summary of family and environmental factors: needs and strengths			
Social worker's summary		Non-mandatory	Summary may be useful in making sense of information gathered but do not necessarily have to be undertaken for each dimension There is a discussion of other potential options for presentation earlier in this paper
Child's view of the strengths and needs in their wider environment and what impact they think they have on their own development	Requirement to obtain children's wishes and feelings now enshrined in Children Act 2004. Section 53 amended sections 17, 20 and 47 of the Children Act 1989	Mandatory	Please note that it is mandatory to ascertain the child's wishes and feelings. However, it is not mandatory to present this exactly as set out in the original ICS exemplar. There is a discussion of other potential options for presentation earlier in this paper
Parent's/carer's view of their own strengths and needs in the wider family and environment and what impact they think they have on the child's development	Assessment Framework statutory guidance	Mandatory	Please note that it is mandatory to address the parent's view. However, it is not mandatory to present this exactly as set out in the original ICS exemplar. There is a discussion of other potential options for

ITEM	BASIS	STATUS (mandatory / non- mandatory)	COMMENTS
			presentation earlier in this paper
Analysis of the information gathered in the assessment	Assessment Framework was issued under section 7 of the Local Authority Social Services Act 1970. Specifically mentions a requirement to make an analysis	Mandatory	
Decision following the core assessment: Initiate a strategy discussion Provision of S17 services Immediate legal action to protect the child Referral to other agency Commission a specialist assessment Other (please specify) Provide accommodation No further action		Mandatory	
Parents main carers report discussed with them: Yes/No/Refused If no when will this be done (date box) Parents given a copy of the report:		Mandatory	

ITEM	BASIS	STATUS (mandatory / non- mandatory)	COMMENTS
Yes/No If no when will this be done (date box)			
Parent's/carer's comments on the assessment		Mandatory	
Parental signature and date		Mandatory	
If Core Assessment not completed with 35 days why?		Mandatory	This is important to record for local and senior management and planning resources; also when submitting statistical returns to the DCSF
Name and signature of social worker completing the assessment		Mandatory	
Allocated to, team and date		Non – Mandatory	
Name and signature of team manager		Mandatory	

Integrated Children's System

ICS Guidance Note - 2



Improving Narratives around the Child and Family

1. Background and introduction

Social workers and other ICS stakeholders have provided regular feedback that it is hard to see the narrative about the child and their family using their ICS systems. This view is not universal (some authorities are content with the narratives of children and their families in their systems), but it is widespread.

According to social workers, the root of the problem is the way that information is stored and presented in some ICS systems: it is often scattered and fragmented both within exemplars and between different parts of a child's record. One social worker described this as "too much data, not enough information".

This problem is manifested in various ways:

- Within a single exemplar or screen, there can be too many boxes or pieces of information which break up the flow or narrative of the screen. The Expert Panel's view is that the 'tick boxes' which exist in many exemplars are partly the cause of this: they can reduce the process of assessing, planning and reviewing to a 'form filling' exercise, and break up the narrative.

The Expert Panel noted that those authorities that do not include tick boxes as data fields generally find it easier to follow the child and family narratives. They therefore recommend a flexible approach to the use of tick boxes (for example, including them as guidance notes rather than data fields in the system). More details are provided in 'ICS Guidance Note 1 – Recording the Core Assessment'.

- The presentation of information between screens / exemplars is often broken up. Social workers have said that exemplars are disjointed and do not let them see the whole story, and that the practitioner has to go to many places on the system to understand the full narratives.
- The difficulty in viewing the child in the context of the family. The ICS framework takes the child, rather than the family unit, as its focus for social work practice. The framework makes many references to parents and the family environment, but these are included as part of the record about the child (for example, in a family group with multiple siblings, the information about the family is often distributed across all the

sibling records). This can make it difficult for the social worker to see the family narrative.

Examples of the types of information that the Expert Panel would like to see in the child narrative are:

- Overview of the child and family's situation/dynamics, plus background information.
- Key events in the child's life.
- A summary of the main themes and issues faced by the child.
- Any previous involvements with services.
- Any changes to the child's legal status.
- Any other overarching issues which social worker considers relevant.

Regarding the family narrative, the key features which the Expert Panel would like to see are:

- Parents' employment status
- Previous interactions with social services (including periods when children have been subject to Child Protection Plans or Court Orders).
- Instances of substance misuse, mental illness and domestic abuse.
- Details of family history; 'pictures' of the adults.
- Parents' needs.
- Capacity for change and development in the parents.
- A view of the web of relationships that exists in the family group (parent to parent; parent to sibling(s); sibling to siblings).

The benefits of seeing narratives more clearly within ICS (as articulated by social workers) are:

- It will help in decision-making (the picture of the child and family will emerge more easily, and patterns will be easier to see, supporting decision-making in analysis and intervention).
- Time saving.

- Reduction in the risk of key information being missed at important points.
- Improved collaboration between different agencies and professionals working with the child (particularly in emergency and out-of-hours situations). At the moment, there is a risk that the overall picture or narrative about the child resides in the head of the social worker who works most with them.

2. How can the narratives about the child and family best be delivered using the ICS framework and systems?

The principal meaning of narrative is the ‘thread’ or story which runs through the life of the child and his or her family. The ICS framework is made up of different parts, each of which deals with the child’s life in a different way. For example:

- Standard information fields – *record biographic and demographic information about the child and family.*
- Chronologies – *record key events in the life of the child and family.*
- Case notes – *record key events in organisational involvement.*
- Assessment, planning and review forms – *allow the social worker to record evidence about different aspects of the child’s and family’s lives; to form analyses about them; and to plan and review progress.*

To see the narrative about the child, social workers need to consider all these different parts of the framework - there is no one place, or single data field, that can fully encapsulate all the details in the life story of a given child or family. The Expert Panel felt that social workers cannot hope to find all these details in a single place, and indeed that it might be dangerous to try and form a ‘quick view’ of the child / family, based on this.

Therefore, the child and family narratives are contained in various parts of ICS, and practitioners can use the different parts to gain a holistic appreciation of the narratives.

This is not to say, however, that a ‘summary’ or ‘overview’ of the child and the family cannot also be useful, and this is the second meaning of ‘narrative’ which the Expert Panel perceived. Such a summary is helpful in quickly and succinctly presenting the salient factors about the child or family. It might be useful, for example, in an emergency situation where decisions need to be taken quickly (particularly where an emergency or out of hours team is involved, and they don’t know the child / family well).

So, viewing the child and family narratives in these two senses – ‘thread’ and ‘summary’ – how can the ICS framework and systems best be used to deliver the narratives?

Firstly, regarding the narrative as a ‘thread’, the Expert Panel was unanimous that there is no need here to create new parts, data fields or screens in the system. There is also no

need to seek information that is not already referenced in the ICS data set. Existing parts of the framework are therefore sufficient to provide a narrative. However this is dependent upon:

- Flexibility being used in screen design and in the configuration of the system, for example in more flexible use of tick boxes.
- Social workers having the confidence, training, experience and support to use existing elements of the ICS to do this. This is the responsibility of each authority to encourage in its own area. For example, are social workers confident about what information to put in key fields and in striking the balance between information/evidence and analysis? Do they know where the principal places are on their system which contain the key views?

2.1 Narrative as a 'thread': improving the child narrative

The Expert Panel has provided views on where 'key views' of the child can be contained. The starting points are the assessment and review exemplars. The Core Assessment is an important exemplar in this context (in particular, the 'Reasons for assessment', 'Analysis and 'Child summary' fields. The 'Reasons for assessment' field can contain the child's background, and recent key events – "why are we working with this child? Why are we focusing on them now? What are our concerns, and what are the key factors?" The 'Summary' and 'Analysis' fields are where, having weighed up the evidence contained in other parts of the Core Assessment, the social worker can give their overall view of the child).

These fields can be flexibly used in the exemplars (for example, they can be moved to the top of the exemplar, and given greater prominence). Below is an example (taken from a real Core Assessment, but with names changed) of the 'Reasons for assessment'. It provides an overview of the child who is the subject of the assessment, of her history, and her family environment. This information could be pulled through to other parts of the system as an overview.

"Three year old Jody is the only daughter of Vivienne Gordon. Her father Leroy Phillips lives in Peckham with his mother.

Jody's mother is an intelligent, assertive young woman who experienced considerable emotional and physical violence as a child and was herself on the Child Protection Register. Vivienne was accommodated as a teenager and during her period in care Vivienne absconded frequently and was the subject of high levels of concern because of her use of cannabis, and many incidents of violence in the street. When she became pregnant with Jody a Child Protection Conference was convened and Jody's name was placed on the CPR because of concerns about Vivienne's capacity to meet her needs.

Social Services have continued to be involved with Jody since her birth, providing services to Vivienne to support her parenting. This a reassessment of Jody's needs and her mother's capacity to meet them".

Another local authority plans to add fields to their review documents to enhance their work:

In our Review (CP, CIN and CLA) documents we are inserting two free text boxes, one at the beginning and one at the end:

- Reason for CSS Involvement (revisits 'Reason for Core Assessment' and or 'Reason for Conference' or 'Reason for this accommodation')
- Analysis. This revisits the analysis at the end of the Core Assessment or Initial Conference Report.

Between these 2 text boxes we visit the plan as per the ICS model recording the

- Evidence in respect of the progress the child is making in respect of each dimension of Child Development and
- Issues affecting the Parent's capacity to meet the Child's needs.

We believe that this solution develops the best bits of ICS (rigorous review of outcomes-focused plans) with the maintenance of the whole picture.

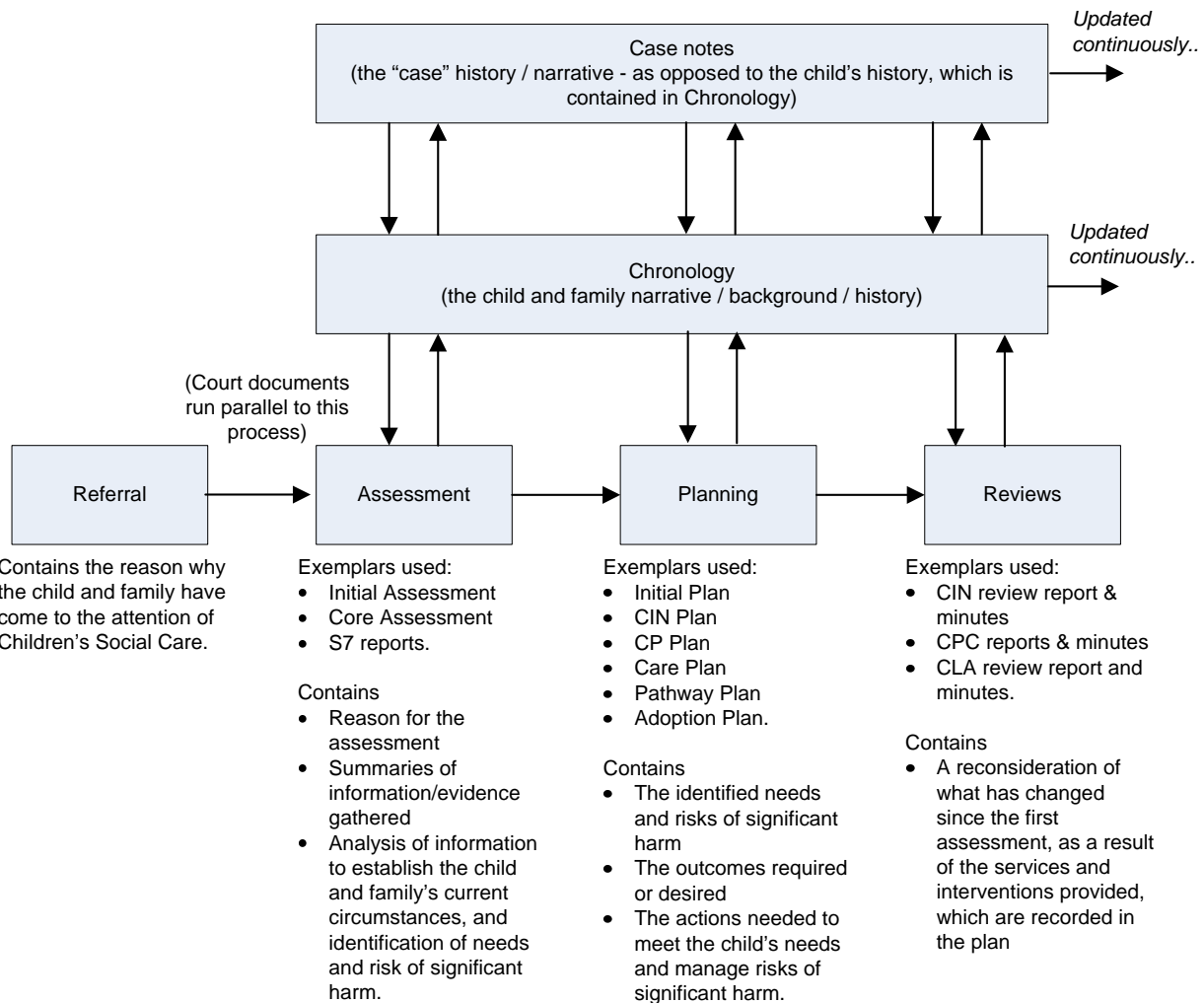
The key fields in the Assessment and Review exemplars can then be copied forward, reused and edited in other parts of the ICS (this depends on configuration of the system within the authority, for example 'copy forward' or 'auto-populate' functionality needs to be present and enabled). In the words of one Expert Panel member, "the child and family narratives are captured firstly in the chronology and Core Assessment record. They are then updated and maintained after the Core Assessment record is closed, by way of the records that represent the planning and review process i.e. the CIN, CP, CLA Plans and the corresponding review reports" (see diagram below).

Some of these key fields could also be pulled forward into a 'summary area' (for example, front screen) within the system. More is said on this below.

Overall, the narrative as a 'thread' is organic and dynamic: it grows and develops with the child, and is shown in various parts of the ICS. The following diagram shows this:

Narrative as a thread:

The child and family narrative as a “thread” is contained within this process and the corresponding exemplars.



In addition to the summary and analysis fields, case notes and chronologies are also important. They contain day-to-day notes and events, some of which will be significant in the narratives.

Local practice and guidance are key here. It may be helpful for authorities to agree with their practitioners what the key fields are on their own system, and how they should be used (for example, do authorities have a “map” of key areas in their system to record the narrative?).

2.2 Narrative as a ‘thread’: improving the family narrative

One of the key problems with the family narrative is that it can be fragmented across multiple child records. Recommended best practice from the Expert Panel is to use existing key fields (principally the summary and analysis fields in the assessment and review exemplars). For example, the ‘family and environmental factors’ in the Core Assessment is important here. Family information recorded in these fields can be copied forward, re-used

and edited in other parts of the child's record (please refer to 'ICS Guidance Note 3.- Copying and Cloning in ICS Systems').

Social workers' time can be saved by copying relevant family information across the records of different children – but it is important to be clear about what information is appropriate to copy, and what is not:

- a) **Family attributes.** These are features or attributes of the parents, the family and the family environment which are constant for all children in the family. Examples are employment status and previous interactions with social services. It may be appropriate to copy some family attribute information between children's records.
- b) **Parental capacity.** A parent's capacity to parent their children will vary from child to child. Copying information about parental capacity between siblings risks being inaccurate and irrelevant; it is important to capture parental capacity in relationship to each child in the family individually.

A flexible approach to copying family attribute information across sibling records will help the social worker to record and maintain the family narrative across the records. It is however recognised that issues may remain which are specific to individual systems: for example, difficulties in copying from one record to another, difficulties in having more than one window, or indeed more than one child record, open at any one time.

The guidance on tick-boxes that was given above and in 'ICS Guidance Note 1 – Recording the Core Assessment' will also help the family narrative to emerge more clearly.

The Expert Panel agreed that genograms will also offer significant help in improving the family narrative (this is functionality which shows, in diagram form, who is in a family group, how they relate, plus other key information. Genograms can also allow the user to "click through" to more detailed information in the system). The Panel noted, however, that different suppliers are at different stages in developing and offering this functionality.

2.3 Narrative as a 'thread': conclusion

Overall, therefore, the view of the Expert Panel was that solutions for the "narrative as a thread" are similar for children and families: key pieces of information are stored in various places across the ICS framework, and this information develops and accumulates with time. It is the combination of these different pieces of information which give the social worker the narrative thread about the child and the family's life. The problem can be exacerbated with families because, in most configurations of systems, they do not have a record to themselves; however with selective use of copying family attribute information across records, the family narrative can exist across multiple records. The Expert Panel however flagged the need here to consider data protection legislation and guidelines (particularly with reference to potential future subject access requests). Local authorities could discuss these matters with their local Caldicott Guardian.

2.4 'Summaries' of the child and family

As stated above, it can be helpful to have a summary of the child and their family at the front of the system. This can serve as a prompt to the lead social worker, and be invaluable in providing an overview to professionals who do not know the child / family well (for example in an out-of-hours or emergency situation). A number of suppliers already offer this functionality, and authorities who use it have found it beneficial.

The type of information which can be contained in a summary are likely to be similar to the key areas covered in the main ('thread') narrative (e.g. for children – overview, background, key events, involvement with services; for families – who is in the family, family history, involvement with services, etc).

Summary information about the child and family can also be juxtaposed to present a combined summary. The Expert Panel provided an example of what could be contained in such a combined summary (they summed up the requirement as - "what would I absolutely need to know if I were an out-of-hours worker?"):

- a) The child's basic demographic details - name, DOB, address, telephone number, ethnicity, language, disabilities etc.
- b) The family relationship structure: the genogram is part of this, also other carers' details (foster), and who does and does not co-reside.
- c) Case and legal status, eg is the case open or closed (dates) and is this child categorised as CIN, CP, or CLA? Is there any legal order the child is under?
- d) Background history of the child and family.
- e) The history of involvement of children's social care services.
- f) Reason for existing involvement and current situation.

Exactly what information goes into a summary area, and how that information is obtained (e.g. is it copied forward from elsewhere in the system, or is it free text entry?) is up to each authority to decide, working with their supplier. However, as further guidance on the above – d) could be a summary of the child's chronology; e) could be drawn from the chronology and from case notes; and f) could be copied forward from summary or analysis fields in assessment exemplars.

The Expert Panel also believe that future developments in ICS systems should make better use of the ability to convey information graphically rather than in a text-based form. Graphical, intuitive representations of a child's situation make appropriation and assimilation of information easier for the social worker (genograms are an example of this).

Conclusion

Close collaboration between practitioners and IT / project professionals at a local level is needed to develop the child and family narratives which meet local needs. Supplier user groups and regional or national fora are also excellent places to share best practice.

Integrated Children's System

ICS Guidance Note - 3



Copying and Cloning in ICS Systems

1. Audience

This document will be of interest to local authority ICS Champions, Integrated Children System IT teams, and the social workers and social work managers who work with them.

2. Purpose

This guidance note aims to help local authorities develop their ICS systems where necessary, to ensure they effectively support practitioners' day to day practice. It further clarifies the immediate simplifications outlined by Baroness Morgan in her communication of 22 June 2009, which stated:

"...the Government will shortly set out advice for commissioners and suppliers about how the following flexibilities maybe introduced into current systems, where local authorities wish to do so:

- *Requirement 1C/D7 relating to the copying of information between siblings on the 'Initial Assessment' and 'Initial Child Protection Conference Report' is expanded to allow information to be copied between siblings on any exemplar (except where it relates to information on a child or young person's development needs).*

This guidance supersedes the Phase 1C specification (1C/D7) which strictly limited the way in which copying and cloning should be used.

Ofsted will pick up on the inappropriate use of copying and cloning of data in their inspections – for example, to make sure that each child has an individual record. It is recommended therefore that local authorities review how this copying and cloning guidance relates to national legislation including data protection obligations, and update local policies and procedures to ensure good record keeping continues. Local authorities may wish to consult their local Caldicott Guardian for advice on these matters.

Much of this guidance will require updates to supplier products, and local authorities are advised to review their systems (in partnership with suppliers) before embarking on changes, to check which of the following functionality is already available. It is important

that local authorities work together within their Supplier User Groups to prioritise changes, to check they are practical for use on the front line, and to ensure that costs are kept to a minimum.

Local authority user group representatives should ensure there is close co-operation with practitioners before prioritising system changes. This will ensure that the most urgent changes are prioritised, and the solutions proposed genuinely improve front line work - please refer to the Milton Keynes Case Study in the guidance document: 'Getting the best out of your Integrated Children's System' for an example of how to set up a successful working group.

3. Guidance

In order to ensure this guidance is clear, it is necessary to distinguish between the copying forward, copying and cloning of information. The following definitions are applied in relation to ICS:

- I. *Copying forward (or pre-population)*: In order to minimise practitioner effort, systems already copy forward certain information automatically from one field to another so that it is re-used (where appropriate), but entered only once. Each local authority ICS IT team will have a document which articulates this information flow within the local ICS system.

For example, many systems are set up to copy forward the actions articulated in a Care Plan into the Care Plan Review when it is created, saving the practitioner from re-writing them, or indeed copying them. Once these fields have been copied forward, they should then be editable by the user.

- II. *Copying*: Copying data from a child's record¹ by selecting fields within that record to copy to a new or pre-existing record for the same, or another child. Once these fields have been copied, they should then be editable by the user.
- III. *Cloning*: Creating a copy of a record which can subsequently be edited by the user. An example is where a core assessment for one sibling has been completed and much of the recorded information is considered relevant to another sibling. By cloning the original core assessment (except where it relates to information on a child or young person's development needs) and then tailoring it to the other child, the practitioner will save time.

At Improvement Conferences and at the Expert Panel, practitioners outlined their wish to have greater flexibility to copy and clone data within their ICS system. The Phase 1C specification stated that copying would be limited to the Initial Assessment and Initial Child Protection Conference Report.

¹ It is important to define certain terminology relating to ICS data recording to ensure common understanding. In particular, there is an important distinction between the data inputted onto the system for a child: the record, and the information which is printed from the system: the report. In this document we use these terms rather than the word 'exemplar'.

This guidance confirms that systems should now allow practitioners to copy or clone information for children who are related for any data set, but must not do so where it relates to information on a child or young person's development needs. This will minimise the amount of time taken by practitioners to re-key information.

- Practitioners must be trusted to manage information in the correct manner and each individual social worker should be allowed to make the decision as to whether to copy or clone information – but under no circumstances should the system copy or clone information without the practitioner requesting it. The system should give the practitioner the option to select which fields to copy, but not to copy base data, for example a child's individual needs. Local authorities will want to ensure that it is possible for the practitioner to edit the copied or cloned information.
- The social worker's manager has a responsibility to ensure that where copying and cloning has occurred that it is quality assessed. Cloned records by definition will need some editing by a practitioner to accurately reflect a second individual, and managers must make sure this has taken place. Each ICS system should seek to make this review process as straightforward as possible for manager and practitioner by drawing attention to the copied or cloned text and make it clear when a record contains copied or cloned information.
- Furthermore, the Expert Panel recommends that local authorities ensure that clear quality assurance processes are in place to check that high quality, accurate outputs are produced and that this relaxation does not lead to a decline in the quality of reports produced. It may be appropriate to share best practice processes for quality assurance at Supplier User Groups.
- It is recognised that some ICS systems already allow users to copy and clone. However in some cases this copying and cloning functionality is poorly structured, hindering practitioners where it should help them. System providers should work hard to keep the number of mouse clicks and pages to be navigated to a minimum, and actively involve practitioners in developing functionality to ensure it is user friendly.
- Local authorities will want to ensure that systems have a clear audit trail of information that has been copied or cloned to ensure that when necessary the movement of information across a system can be traced.
- Special care should be given to the copying or cloning of a child's information whose long term plan is for adoption. There is a considerable risk that inappropriate information (for example birth parent details) may appear in a record unless proper policies and procedures are in place.
- It is vital that local authorities are clear about the implications of cloning functionality and take steps to mitigate risks. For example, there is a risk that if a record is cloned across siblings that information from a previous report for an individual is lost rather than copied forward.

Integrated Children's System ICS Guidance Note - 4



Improving Outputs from ICS Systems

1. Audience

This document will be of interest to local authority ICS Champions, Integrated Children System IT teams, and the social workers and social work managers who work with them.

2. Purpose

This guidance note aims to help local authorities develop their ICS systems where necessary, to ensure they effectively support practitioners' day to day practice, most particularly to improve both the outputs from printing, and the practitioner and families' experience of the ICS system itself. It further clarifies the immediate simplifications outlined by Baroness Morgan in her communication of 22 June 2009, which stated:

"...the Government will shortly set out advice for commissioners and suppliers about how the following flexibilities maybe introduced into current systems, where local authorities wish to do so:

- *DCSF will recommend to suppliers that new additional functionality and system refinement is developed to address some of the concerns raised during the May 2009 ICS Phase 1C regional workshops. DCSF endorses as a priority proposed changes to automatic-system generated 'alerts', the creation of 'dynamic' exemplars, and the introduction of 'auto-save' and 'undo' functionality."*

Aspects of this guidance note will involve updates to supplier products, and local authorities are advised to review their systems (in partnership with suppliers) before embarking on changes, to check which of the following functionality is already available. It is important that local authorities then work together within their Supplier User Groups to prioritise changes, to ensure they are practical for use on the front line, and to keep costs to a minimum.

Local authority user group representatives should ensure there is close co-operation with practitioners before prioritising system changes – please refer to the Milton Keynes Case Study within the Guide for Practitioners and Managers for an example of how to set up a successful working group.

3. Guidance

Practitioners using ICS systems say they often feel overwhelmed by the amount of information they are asked to provide, the number of alerts they need to respond to each day, and the regular loss of information within their ICS due to system failure or timeouts.

A clear message from the ICS improvement conferences is that practitioners spend a significant amount of time ensuring the information they record on their ICS system about a child is of high quality, but that the quality of the reports produced by ICS systems are often unacceptably poor.

The Expert Panel has agreed the following guidance, for implementation by local authorities with supplier support. If implemented, this guidance should help to improve the practitioner experience in day to day work, allowing the production of higher quality, more appropriate documentation for review with other practitioners, children or their families.

The Expert Panel also highlighted the importance of systems supporting a clear family narrative. This is a key concern, and is addressed in the Improving Narratives around the Child and Family guidance note.

System Alerts

1. Some systems already give individual local authorities the flexibility to switch off automatic alerts. It is recommended that local authorities conduct an evaluation, consulting practitioners and managers, to agree which alerts are most useful and should be retained.
2. An 'alerting' feature which can cause problems for practitioners is the 'inbox' which holds alerts. This can get full very quickly, and it is often difficult to differentiate between priority alerts and other system generated alerts. The Expert Panel recommends that local authorities work with suppliers to ensure that systems allow users to assign priority to alerts as well as a category, for example 'task deadline' or 'visit required'. These changes will enable practitioners to filter alerts more easily. The highest priority alerts should be available for the practitioner on login without having to navigate and filter. And the ability to close alerts in one go using 'select all' or check box functionality would make this activity less time consuming for practitioners.

3. In addition, it is recommended that systems incorporate work-tray functionality to enable practitioners and managers to see clearly any outstanding work. A work-tray will allow the user to see outstanding tasks alongside a complete list of the cases that are being worked on. Systems which have this available allow practitioners to manage their work more simply.
4. In some systems alerts indicate that a change has occurred within a particular record. The Expert Panel has suggested that in such instances it would be useful for the system to provide a link to the relevant part of the record so that the practitioner can review the change with a single click rather than spending time trying to track down the change.

Dynamic Records and Reports (Dynamic Exemplars)²

5. The ICS improvement conferences have emphasised practitioner sentiment that ICS systems are not nearly as flexible as they need to be. It is therefore recommended that systems become more 'dynamic', both in terms of what is printed from the system (reports), and in terms of the data the user is prompted to enter on the system, within the record.
6. Systems should allow the creation of 'dynamic reports' that allow practitioners to produce information for meetings which is appropriate both in content and quantity. Functionality may allow local authorities to select which fields are printed as standard and give practitioners the flexibility to choose any additional fields which are included. Systems should also give the option to automatically exclude blank fields from printing and allow the user to save any documents which are printed.
7. These options should be configurable locally for additional flexibility, with due care and attention being given to the individuals who will use the outputs, for example whether they will be reviewed by children or families. 'Dynamic records' functionality may also allow practitioners to re-order fields to allow key information to be drawn out at the front of a report and create reports which are practical for a family to refer to. This should be extended to generating plans, so that prioritised tasks may be re-ordered.

² It is important to define certain terminology relating to ICS data recording to ensure common understanding. In particular, there is an important distinction between the data inputted onto the system for a child: the record, and the information which is printed from the system: the report. In this document we use these terms rather than the word 'exemplar'.

Case Study: Dynamic Reports in South Tyneside

Dynamic reports have already been used to improve local systems. South Tyneside Council were concerned that the printed reports from their ICS system were very long and difficult for families to read. Using a method of selective printing, they are now able to print far more concise Initial Child Protection Conference reports so that they contain only relevant information. By ensuring that a relevant Core Assessment is linked, they now choose a subset of sections to include such as Basic Details, Family Details, Key Dates and Actions. By using this selective printing method, South Tyneside have been able to vastly improve the usability of their printed outputs, saving paper, time and effort for the parties involved.

8. Not all fields contained on the ICS system will be relevant to a particular child or young person. Where possible, when the practitioner has provided information that clarifies that other fields on the system are no longer relevant, these should be excluded automatically, to prevent a practitioner wasting time.
9. For example, within the Phase 1C specification new fields are recommended where there is an adoption involving a foreign element (in accordance with the Adoption and Children Act 2002, Adoptions with a Foreign Element Regulations 2005). If dynamic functionality were provided, these additional fields would only appear on the system once a box is ticked that confirms the case involves adoption with a foreign element.
10. The final area in which a dynamic element may be usefully introduced is in forming a family narrative from a series of sibling reports. This is covered within the Improving Narratives around the Child and Family guidance note.

Auto-Save Functionality in ICS Systems

11. Local authorities have stated in ICS improvement conferences that information entered into their ICS system is often lost, occasionally after some considerable work has been completed.
12. The Expert Panel has recommended the introduction of 'auto-save' functionality and the ability for a practitioner to 'save and continue'. During active use of the system by a practitioner, the system should automatically save a draft of the data captured to the server every few minutes. Once inactive, the system should still ensure data is 'auto-saved' (especially before timeout), but to comply with local security policies and to protect system performance, timeout should still be enabled. The practitioner will therefore be able to retrieve unsaved data when they log back in.

13. Where a system auto-saves, it should not interrupt workflow but should be a background process that does not cause a page to freeze, even temporarily. The regularity of the auto-save should also be configurable at a local level.

Undo & Spell-Check Functionality in ICS Systems

14. 'Undo' functionality (or 'back button') – the ability for practitioners to reverse previous instructions at the click of a button – is recommended. This will save practitioners significant time when correcting mistakes on a system.
15. 'Spell-Check functionality' should be set up so that it is practical for practitioners. Some systems currently allow practitioners to spell-check only box by box, therefore requiring multiple spell-check requests. It is recommended that systems allow the practitioner to request a spell-check once, and that this single request then applies to the entire report.