

CAF action plan



child or young person's name

CAF ID number

action plan date

version number



Need identified in assessment conclusions	Outcome what child/young person, family, practitioners want to achieve	Action what will be done to achieve this outcome for example: frequency, number of sessions and costs if known	Who will do this? name and contact details	When will this be done by? specify date

Remember to keep the action plan SMART

Specific **M**easurable **A**chievable **R**ealistic **T**ime-bound

Remember to consider needs across all three domains of assessment:

1. Baby, child or young person's development
2. Parents and carers
3. Family and environment

CAF action plan continued

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How will you know when things have improved?

Were there any other actions that would have been included in the plan if the service, resource or skills were available? If so, please describe

Does this action plan follow: a Common Assessment De-escalation of need from level 3 to level 2 other

Family, friends and practitioners invited to TAC multi-agency meeting **Lead professional appointed?** yes no

Name	Role and organisation	Contact details	Attended		Report sent	
			yes	no	yes	no

Lead professional name	Role	Organisation	Contact details

Planned review date Are there any other active agency or service action plans for the child or young person? yes no

If there are, please give details of how the plans are linked

Additional comments