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| **About this information** |

* On behalf of my family, I confirm that I have been given a copy of the plan, agree that it is correct and give my consent to be shared with other professionals participating in the TAF.
* It has been explained to me that a copy of this plan will be held by Brighter Futures for Children.

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| Signed: | *(If signature cannot be provided, please tick to confirm parent/carer has read and is happy with the information provided and provides consent)* 🞏 |

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| **TAF meeting** | | | |
| **Date of meeting** | Click or tap to enter a date. | **Location of meeting** |  |

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| **My Family** | | | | |
| **Name** | **Position in family** (parent/child/other) | **Education setting** | **Present at TAF** | **Contributed to TAF** |
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| **Professionals at the meeting** | | | | |
|  | **Name** | **Role/Agency** | **Contributed to plan** | |
| **Yes** | **No** |
| Lead Professional (chair) |  |  |  |  |
| Partnership Outreach Worker |  |  |  |  |
| Other professionals |  |  |  |  |
| Other professionals |  |  |  |  |

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| **What we need help with** | | | | | |
| Housing |  | Bereavement |  | Child development under 5’s |  |
| Parenting |  | SEND |  | Child development age 5+ |  |
| Parental relationships |  | Peer relationships |  | Health – adult |  |
| Finances |  | School attainment |  | Health – child |  |
| Mental health – adult |  | School attendance |  | Domestic abuse |  |
| Mental health -child |  | Relationships with school |  | Accessing community |  |
| Safety |  | Other |  | | |

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| **Any new or additional information since the assessment or last TAF?** |
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| Red | Action not started/ no progress made |
| Amber | Some progress made / work still to do/ on track to complete |
| Green | Completed – no further action |

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| **Family Plan** | | | | | | | | |
| **Needs**  **(Taken from list above)** | **Desired Outcome** | **Action** | **By whom** | **Date to achieved by** | **How will we know when the outcome has been achieved?** | **Date started** | **Date complete** | **RAG** |
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| **Brief summary of progress made since last TAF** | |  |  |  |  |  |  |  |
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| **Brief summary of progress made since last TAF** | |  |  |  |  |  |  |  |
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| **Family Plan** | | | | | | | | |
| **Needs**  **(Taken from list above)** | **Desired Outcome** | **Action** | **By whom** | **Date to achieved by** | **How will we know when the outcome has been achieved?** | **Date started** | **Date complete** | **RAG** |
|  |  |  |  |  |  |  |  |  |
| **Brief summary of progress made since last TAF** | |  |  |  |  |  |  |  |
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| **Brief summary of progress made since last TAF** | |  |  |  |  |  |  |  |
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| Child and young peoples’ views | | | | | | |
|  | | Poor | |  | Great | |
| How going for you at home right now? (Please rate 1-5 with 1 being poor, 5 being great) | | **1** | **2** | **3** | **4** | **5** |
| How are things going for you at school right now? (Please rate 1-5 with 1 being poor, 5 being great) | | **1** | **2** | **3** | **4** | **5** |
| Any other comments you’d like to make? |  | | | | | |