

KSAF

Family Outreach Programme

Professional Referral Prospectus

2026 edition

For professionals and partner organisations across Kent

A clear guide to KSAF pathways, referral suitability, safeguarding governance and family outreach support.

This prospectus is for	Schools, local authority colleagues, Early Help partners, health and wellbeing professionals, community organisations, councillors and other professionals who may identify attendance, wellbeing or family support concerns.
It should be used to	Understand when KSAF may be suitable, what pathway could apply, what information is needed for safe triage, and how safeguarding oversight remains visible during involvement.
Contact	01795 504355 info@ksaf.uk safeguarding@ksaf.uk www.ksaf.uk/family-outreach

Kent Safeguarding and Attendance Forum CIC	Making Attendance Everyone's Business
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A letter from our Founder

Thank you for your interest in the Kent Safeguarding and Attendance Forum CIC Family Outreach Programme. This prospectus is designed for professionals and partner organisations considering whether KSAF is the right early help route for a child or family.

Across Kent, professionals are seeing increasingly complex presentations linked to attendance, emotional wellbeing, unmet need, family stress and safeguarding. Patterns of absence are rarely just about a child not attending education. Behind persistent absence, severe absence, lateness or disengagement there may be anxiety, low confidence, SEND-related barriers, disrupted routines, parental overwhelm, relationship strain, hidden harm or a family that no longer knows where to turn.

KSAF was developed to help bridge the gap between home, education and community support before concerns become entrenched or escalate unnecessarily. Our role is not to replace statutory services, the safeguarding procedures of any organisation, or the professional judgement of a Designated Safeguarding Lead or safeguarding practitioner. Instead, we provide an additional layer of voluntary, consent-based support that helps families feel heard, helps professionals understand context, and helps children remain visible within a clear safeguarding framework.

The pathway model gives referrers three clear routes. Pathway 1 offers early advice, reassurance and signposting through the Support and Advice Line. Pathway 2 provides structured five-week targeted family intervention, supported by a Case Manager and Family Outreach Practitioner. Pathway 3 supports families into more suitable services where another organisation is better placed to meet the level or type of need identified.

This approach is deliberately practical. We focus on the everyday barriers that often sit underneath attendance and engagement concerns: routines, mornings, sleep, boundaries, emotional regulation, communication, parental confidence and the relationship between the family and the services around them. Small changes in these areas can make a significant difference to a child's sense of safety, belonging and readiness to engage with education.

Safeguarding remains central to every pathway. Concerns are recorded and monitored through CPOMS, reviewed by the KSAF Safeguarding Team, and discussed through our safeguarding oversight structure. Where risk increases, information changes or thresholds appear to be met, KSAF will act proportionately, share information appropriately and support timely escalation in line with safeguarding responsibilities.

By referring or signposting a family to KSAF, professionals are not simply requesting an intervention. They are inviting a partnership approach that values professional curiosity, accurate information, consent, clear communication and shared responsibility. The quality of the information provided matters because it helps us understand the family story, identify strengths and risks, and make safer decisions about the most appropriate pathway.

Our commitment is simple: KSAF will work respectfully with families, communicate clearly with referring professionals, record concerns professionally, keep safeguarding oversight visible, and support timely next steps where additional services are required.

We are grateful for the trust placed in KSAF and for the shared commitment across Kent to improving outcomes for children. Our aim is earlier help, clearer pathways, safer decision making and stronger relationships between children, families, education settings and partner organisations.

Warm regards,

Joshua Morgan
Director and Head of Safeguarding | Kent Safeguarding and Attendance Forum CIC

Our commitment

Earlier help, clearer professional pathways, safer decision making and stronger relationships between children, families and the professionals supporting them.

Purpose, scope and principles

The Family Outreach Programme is a voluntary, consent-based early help model for families where attendance, routines, wellbeing, communication or low-level safeguarding concerns are affecting a child's engagement with education.

<p>The programme is designed to support</p> <ul style="list-style-type: none"> - Children of compulsory school age across primary, secondary, AP, SEN and inclusion settings. - Families where attendance, punctuality or engagement is beginning to deteriorate. - Parents or carers who need practical support with routines, boundaries, communication or confidence. - Cases below statutory thresholds where early help may prevent escalation. 	<p>The programme is not designed to replace</p> <ul style="list-style-type: none"> - Children's Social Care, police, health services or emergency response. - A setting or organisation's own safeguarding procedures, DSL decision making or attendance duties. - Clinical mental health assessment, therapy, diagnosis or crisis intervention. - Specialist domestic abuse, exploitation, offending or high-risk safeguarding services.
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Core position	KSAF treats attendance as a safeguarding indicator. Patterns of absence, lateness or disengagement may reflect unmet need, emotional distress, family pressure, SEND-related barriers, routines, relationships or emerging risk.
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Our principles

Child centred	The child's safety, voice, wellbeing and educational engagement remain central.
Family led	Support is offered with consent, respect and practical understanding.
Professionally connected	KSAF works alongside education settings, local partners and professional networks where appropriate.
Safeguarding informed	Concerns are recorded, reviewed and escalated when required.
Outcome focused	Intervention is time limited, purposeful and reviewed.

Good referral fit	Attendance, routines, wellbeing, communication or parenting confidence are affecting engagement with education, and the family is willing to take part in early help support.
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How KSAF keeps the work safe	KSAF uses consent, clear triage, factual recording, safeguarding oversight and proportionate escalation. Where the presenting issue moves beyond early help, we support onward signposting or escalation rather than holding risk inappropriately.
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Professional judgement	This prospectus supports decision making but does not replace safeguarding procedures. Professionals should always act on immediate risk and use their own organisational escalation routes where necessary.
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Who can refer?

KSAF aims to make early help easier to access while keeping safeguarding, consent and information quality clear. Different referrers may access different parts of the pathway depending on their role, the information available and whether informed consent has been obtained.

<p>Education settings</p> <ul style="list-style-type: none"> - Primary, secondary, AP, SEN and inclusion teams can make referrals where consent is in place. - Best route for Pathway 2 targeted family intervention. 	<p>Parents and carers</p> <ul style="list-style-type: none"> - Can contact the Support and Advice Line for early advice, reassurance and signposting. - KSAF may advise whether school or professional liaison is needed. 	<p>Local authority and Early Help colleagues</p> <ul style="list-style-type: none"> - Can discuss whether a family may be suitable. - Can support a consent-led referral route where appropriate.
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<p>Health and wellbeing professionals</p> <ul style="list-style-type: none"> - GPs, social prescribing, wellbeing and community health colleagues may signpost families to KSAF. - KSAF is not a clinical mental health service or crisis route. 	<p>Community organisations and CIC partners</p> <ul style="list-style-type: none"> - Voluntary sector partners can raise early concerns and support families to access advice. - Joint working may be considered where safe and proportionate. 	<p>Councillors and community representatives</p> <ul style="list-style-type: none"> - Can signpost constituents to the Support and Advice Line. - Useful where attendance, routines or family stress are affecting children.
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<p>Referral standard</p>	<p>Formal outreach referrals should include informed parental consent, clear child and family details, attendance information, the reason for referral, safeguarding context and details of support already attempted.</p>
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<p>Before referring, please consider</p> <ul style="list-style-type: none"> - Is there immediate risk? If yes, follow safeguarding procedures now. - Has the parent or carer understood what KSAF is and consented? - Is there enough context to make a safe triage decision? - Is the family likely to engage with voluntary support? 	<p>When a referral may not be accepted</p> <ul style="list-style-type: none"> - The concern requires emergency or statutory safeguarding action. - The presenting need is clinical therapy, crisis mental health intervention or specialist domestic abuse support. - Another service is already the appropriate lead. - There is insufficient consent or information for safe triage.
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<p>Professional signposting</p>	<p>Where a professional cannot complete a full referral, they may still signpost the family to Pathway 1 for early advice, provided this is safe and appropriate.</p>
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<p>Information needed by referrer type</p>	<p>Education settings should provide attendance data and school action already taken. Health and wellbeing partners should provide presenting concerns and consent position. Community partners should provide context, family wishes and any safeguarding worries known to them.</p>
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Family Outreach at a glance

The pathway model helps professionals decide what support is needed, what outcome is likely and how safeguarding oversight remains visible.

Pathway 1 Support and Advice Line	Pathway 2 Targeted Family Intervention	Pathway 3 Multi-Agency Support
For families, professionals and others who want early guidance, reassurance or signposting during KSAF operational hours.	For families requiring structured outreach. Each intervention lasts five weeks and is supported by a Case Manager and Family Outreach Practitioner.	For families whose needs are better met by another service. KSAF supports onward referral and maintains oversight until acceptance is confirmed.
Typical outcome Earlier advice, clearer next steps and less drift.	Typical outcome Practical progress against agreed goals and clear professional updates.	Typical outcome A safer transition into a more suitable service or organisation.

What has changed	Professionals now receive clearer pathway-based triage, more informative referral guidance, explicit safeguarding oversight information, and clearer communication around allocation, intervention progress and next steps.
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How cases move through the model

1	Early conversation	A concern may begin with a parent, professional, education setting or partner organisation.
2	Advice or referral	Some families only need Pathway 1 advice; others require a formal referral for initial assessment.
3	Assessment and triage	KSAF reviews need, consent, risk, strengths, suitability and capacity.
4	Support or onward route	The case moves to advice, targeted intervention or multi-agency support.
5	Review and closure	Progress, concerns and next steps are recorded and communicated appropriately.

Professional coordination	Where more than one professional is involved, KSAF will seek clarity on the lead contact, consent position and information-sharing expectations so communication remains safe and proportionate.
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Pathway 1: Support and Advice Line

Pathway 1 is the first point of access for early advice. Families, professionals and others can call 01795 504355 during KSAF operational hours to discuss worries about a child or young person.

<p>Who can use Pathway 1</p> <ul style="list-style-type: none"> - Parents and carers worried about attendance, EBSA indicators, routines or emotional wellbeing. - Professionals seeking early guidance around a family presentation or pattern of concern. - Community partners wanting signposting or a safeguarding-informed conversation. - Others who are concerned but unsure what support may be appropriate. 	<p>What can be discussed</p> <ul style="list-style-type: none"> - Attendance concerns, persistent absence or worsening patterns. - Lateness, routines, sleep, mornings or home structure. - EBSA indicators, anxiety-related barriers or low confidence. - Parenting stress, relationship strain or communication breakdown. - Low-level safeguarding indicators and thresholds for next steps.
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What happens after a call

Explore	KSAF listens to the concern, asks proportionate questions and helps clarify the presenting issue.
Advise	The caller may receive advice, signposting or guidance on what information to gather.
Move forward	If direct outreach appears suitable, KSAF can advise on consent and referral into initial assessment.

Safeguarding note	If risk appears significant, the caller is advised to follow safeguarding procedures immediately. KSAF is not an emergency helpline or crisis intervention service.
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Expected outcome	Earlier help, clearer next steps, reduced drift and better informed decisions for families, professionals and education settings.
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Useful information to have ready	Attendance pattern, presenting worry, what has already been tried, consent position, immediate safeguarding concerns, and any professionals already involved.
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<p>Pathway 1 is helpful when</p> <ul style="list-style-type: none"> - A professional needs early discussion before deciding next steps. - A family needs reassurance, advice or signposting. - The issue appears low-level and suitable for voluntary early help. 	<p>Pathway 1 is not enough when</p> <ul style="list-style-type: none"> - A child is at immediate risk. - A statutory threshold may already be met. - The presenting need requires crisis, clinical or specialist intervention.
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Pathway 2: Targeted Family Intervention

Pathway 2 is KSAF's structured outreach route for families where attendance, wellbeing, routines, relationships or parenting challenges are affecting a child's engagement with education.

Pathway 2 standard	Every Pathway 2 intervention lasts five weeks. Families are allocated a Case Manager and a Family Outreach Practitioner. Support is goal focused, consent based and reviewed.
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Intervention menu

Attachment	EBSA
Focus: Strengthens parent-child connection, co-regulation and emotionally secure responses. Length: 5 weeks	Focus: Explores anxiety-linked non-attendance, barriers to school and reintegration planning. Length: 5 weeks
Positive Parenting	Positive Reinforcement
Focus: Builds calmer routines, clearer expectations, consistency and confidence. Length: 5 weeks	Focus: Uses praise, motivation, small goals and success planning to build engagement. Length: 5 weeks
Boundaries	Emotional Wellbeing
Focus: Develops calm, predictable boundaries that support safety and structure. Length: 5 weeks	Focus: Supports emotional regulation, coping strategies, confidence and resilience. Length: 5 weeks
Routines	Tailored support
Focus: Builds healthier sleep, morning, homework and home routines that support attendance. Length: 5 weeks	Focus: Prioritises the intervention most likely to improve safety, attendance and engagement where needs overlap. Length: 5 weeks

How intervention is selected	Referral information and initial assessment are used to identify the main presenting need. The intervention can be adapted to the child's age, family context, SEND profile and professional information.
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Professional involvement	Referring professionals may be asked to provide context, update KSAF on changes in risk or attendance, attend review conversations where appropriate, and continue any existing support plans alongside KSAF outreach.
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Pathway 2 delivery and professional updates

Pathway 2 is deliberately time limited. The aim is not to replace education setting support or statutory services, but to provide a focused period of family outreach that helps identify barriers, strengthen routines and improve engagement.

During the five weeks, KSAF will usually	Professionals can expect
<ul style="list-style-type: none"> - Complete an initial assessment and agree key goals. - Develop a short Family Support Plan or goal summary. - Deliver weekly family outreach contact where appropriate. - Support practical changes linked to routines, boundaries, communication and attendance. - Record engagement, progress, concerns and actions through CPOMS. 	<ul style="list-style-type: none"> - A named KSAF contact once allocated. - Updates on engagement, progress, barriers and relevant concerns. - Prompt communication where safeguarding concerns emerge or escalate. - A completion summary with progress, recommendations and next steps where appropriate. - Clear signposting if further or alternative support is needed.

Five-week delivery rhythm

Week 1	Initial assessment, consent confirmation, family story and goal setting.
Week 2	Practical support begins and barriers are explored in more detail.
Week 3	Routines, communication or agreed intervention focus is strengthened.
Week 4	Progress is reviewed and adjustments are made with family and professional context.
Week 5	Completion summary, next steps, onward signposting or closure planning.

What helps intervention work well	Accurate referral information, consent, timely professional communication, continued education-setting support, realistic goals and shared safeguarding awareness.
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Important	A five-week intervention is not a guarantee of improved attendance on its own. Impact is strongest when family, KSAF and relevant professionals work together and information is accurate.
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Completion outputs	Where appropriate, KSAF will provide a concise completion summary covering engagement, progress against goals, barriers identified, safeguarding concerns, recommendations and suggested next steps.
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Pathway 3: Multi-Agency Support

Pathway 3 is used where a family's needs are better met through another service or organisation, or where a more specialist level of support is required than KSAF's outreach model can provide.

What Pathway 3 means	<ul style="list-style-type: none"> - KSAF supports the family and professional network to identify a more suitable service or organisation. - KSAF can help with onward referrals, liaison and information sharing where appropriate and with consent, unless safeguarding duties require otherwise. - As a safeguarding measure, KSAF stays alongside the family until confirmation is received that the family has been accepted by the next organisation. - This reduces drift, keeps supportive oversight in place and helps ensure the family is not lost between services. - Once a safe transfer is confirmed, KSAF closes or steps down the case appropriately.
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Examples of onward support	Usually not suitable for KSAF outreach
<ul style="list-style-type: none"> - Early Help and family support services. - Mental health or emotional wellbeing services. - SEN, inclusion or specialist education support. - Parenting or community support services. - Statutory safeguarding services where threshold is met. 	<ul style="list-style-type: none"> - Immediate safeguarding danger or emergency risk. - Active Child Protection where statutory planning is leading. - Domestic abuse as the presenting safety issue. - Exploitation, gang involvement, serious youth offending or crisis intervention. - Situations already open to a more appropriate lead service.

Professional role	Professionals may be asked to support information sharing, consent discussions, onward referral information, risk updates and safe handover to the most appropriate service.
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Safeguarding reminder	Where there is immediate or significant risk, professionals should follow their safeguarding procedures and contact the appropriate statutory service without delay.
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Safe transition standard	Pathway 3 should reduce drift, not create delay. KSAF will not wait passively where safeguarding risk increases; escalation will be considered at any stage where information indicates this is required.
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The referral process

The referral process helps professionals understand what happens from consent through to pathway decision, allocation, intervention and closure.

1	Refer and obtain consent	The professional identifies the need, discusses KSAF with the parent or carer and obtains informed consent where required.
2	Complete referral information	The referrer provides accurate, contextual information through the appropriate KSAF referral route.
3	Initial assessment	KSAF reviews the information provided and considers family need, risk, strengths and suitability.
4	Triage decision	KSAF triages the referral to Pathway 1, Pathway 2 or Pathway 3.
5	Allocation	Where appropriate, a Case Manager and Family Outreach Practitioner are allocated.
6	Intervention and updates	KSAF updates the relevant professional contact on engagement, progress, concerns and next steps throughout involvement.

Triage approach	KSAF triages referrals based on presenting need, safeguarding information, family consent, suitability for the outreach model and operational capacity. Where a concern is urgent or high risk, professionals should follow their own safeguarding procedures immediately.
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What professionals should do before referral

Explain KSAF	Speak with the parent or carer and explain the service clearly.
Gain consent	Obtain informed consent for information sharing and support where required.
Gather context	Provide attendance data, professional context, known risks, strengths and support already attempted.
Name a contact	Identify a named professional contact for communication during KSAF involvement.
Non-school referrals	Where the referrer is not an education setting, KSAF may need additional attendance context from the family or school before a Pathway 2 decision can be made.

What the referral form asks for

The Family Outreach referral form is designed to help KSAF understand the child, family context, attendance picture, safeguarding considerations, protective factors and support already attempted.

Child and family details	Child name, date of birth, year group, education setting, address, parent or carer names, contact details and household context.
Attendance information	Current attendance percentage, absence patterns, lateness, persistent or severe absence and recent changes.
Reason for referral	Presenting worries, attendance barriers, emotional wellbeing concerns, family context and desired outcomes.
Safeguarding and context	Known concerns, relevant history, professionals involved, risks, vulnerabilities and protective information.
Strengths and protective factors	What works well, positive relationships, interests, trusted adults, family strengths and education-setting strengths.
SEN, medical or additional needs	Diagnoses, suspected needs, adjustments, sensory needs, strategies and relevant professional information.
Support already attempted	Interventions attempted, meetings held, attendance plans, pastoral support, family support and strategies already used.
Consent and contact	Parental consent status, named professional contact, preferred communication route and any limits to consent.

Referral quality matters	The more accurate and contextual the referral information, the stronger the triage decision and the clearer the support plan. Vague referrals can delay decisions or result in signposting where more information is needed.
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<p>Helpful detail</p> <ul style="list-style-type: none"> - Specific attendance patterns and dates. - What has already been tried. - Parent or carer views and child voice where available. - Known risks, protective factors and professionals involved. 	<p>Avoid</p> <ul style="list-style-type: none"> - Only writing "attendance is poor" without context. - Submitting without consent where consent is required. - Leaving safeguarding history blank if relevant. - Omitting SEND, health or family context that affects engagement.
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<p>Useful attachments or supporting information</p>	<p>Attendance summaries, relevant meeting notes, existing plans, agreed adjustments, professional involvement, and a concise explanation of the family view can all support safer and quicker triage.</p>
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Safeguarding, data and professional standards

KSAF is a safeguarding-led organisation. Attendance is treated as a safeguarding indicator, and family outreach work is underpinned by clear recording, professional curiosity, proportionate information sharing and timely escalation where risk increases.

<p>KSAF Safeguarding Team</p> <ul style="list-style-type: none"> - Joshua Morgan - Director and Head of Safeguarding. - Donna Johnson - Co-Director and Deputy Head of Safeguarding. - Danni Jeffery - Deputy Director of Family Outreach Services (Kent). - Elle Walling - Safeguarding Officer. - Jess Routley - Director of Family Therapeutic Services. - Sabneet Kambow - Safeguarding Officer (Probationary). - Safeguarding email: safeguarding@ksaf.uk. 	<p>Safeguarding oversight</p> <ul style="list-style-type: none"> - All concerns, case notes, professional logs and relevant contacts are recorded and monitored through CPOMS. - The Safeguarding Team reviews patterns of concern, emerging risks, family engagement and agreed actions. - Concerns are shared with professionals or external agencies where lawful, proportionate and necessary. - Families remain visible through structured case management and recorded decision making.
<p>Recording and CPOMS</p> <ul style="list-style-type: none"> - CPOMS is used as KSAF's safeguarding and case recording system. - Records include referrals, family contact, professional updates, concerns, actions, decisions and next steps. - Logs support continuity, accountability and safer handover. - Information is recorded factually and proportionately. - KSAF staff and volunteers are expected to record concerns factually and escalate without delay. 	<p>Escalation and information sharing</p> <ul style="list-style-type: none"> - KSAF does not replace the DSL, Children's Social Care, police, health or emergency services. - If risk increases, KSAF will consider whether professional contact, Early Help, SPA or MASH consultation or emergency action is required. - Information is shared on a need-to-know basis where it supports safeguarding, welfare or safe service transition. - Where a family moves to Pathway 3, KSAF keeps oversight until acceptance by the next organisation is confirmed.
<p>Professional standards</p>	<p>Safeguarding-led decision making, confidentiality, appropriate information sharing, accurate CPOMS recording, clear audit trails and child-centred, family-led, trauma-informed practice. KSAF aligns practice with current statutory safeguarding and attendance guidance.</p>
<p>Important</p>	<p>KSAF does not replace statutory safeguarding action. Where threshold is met, or where a child may be at risk of significant harm, professionals should follow safeguarding procedures immediately.</p>
<p>Record quality standard</p>	<p>Records should be factual, clear, proportionate and child-centred. Opinion should be separated from observation, and any decision to share, escalate or close should be recorded with rationale.</p>

Working with professionals and partners

KSAF works best where families, education settings, professionals and outreach staff share accurate information, maintain clear communication and keep safeguarding responsibilities visible.

What professionals can expect from KSAF	What KSAF asks from professionals
<ul style="list-style-type: none"> - A clear pathway-based response to referrals or signposting queries. - Named contacts and professional communication once allocated. - Updates on engagement, progress, concerns and next steps where appropriate. - Safeguarding-led, trauma-informed practice. - A completion summary or onward recommendations where appropriate. 	<ul style="list-style-type: none"> - Accurate referral information and informed parental consent where required. - A named contact for professional communication. - Attendance and contextual information where relevant. - Timely responses to safeguarding or professional queries. - Updates if risks, attendance or family circumstances change.

How to refer or signpost

1	Gain informed parental consent where required.
2	Complete the Family Outreach referral form or contact KSAF for Pathway 1 advice.
3	KSAF completes initial assessment and triage.
4	Support begins through the relevant pathway, or the family is signposted to a more suitable service.

Call	01795 504355
Email	info@ksaf.uk
Safeguarding	safeguarding@ksaf.uk
Web	www.ksaf.uk/family-outreach

Final reminder for professionals	KSAF is an early help and family support service. We are not an emergency helpline, crisis intervention service, statutory safeguarding agency or replacement for professional safeguarding procedures. Where a child may be at immediate risk, follow your safeguarding procedures without delay.
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Contact expectations	To keep communication safe, KSAF will usually communicate with the named professional contact unless safeguarding duties or consent arrangements require another route.
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Version control	Professional Referral Prospectus 2026 Owner: Kent Safeguarding and Attendance Forum CIC For professionals, local authority colleagues, education settings and safeguarding partners.
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