CAF Awareness Session
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Multi-Agency Support Team (MAST)
(Early Intervention and Prevention Division, formerly known as BRSI Division)
Barnet’s Children’s Service
Objectives for CAF Awareness Session

- Learn about Early Intervention and Prevention and the CAF Process
- Decide when a common assessment would be helpful
Integrated processes and Tools

Improved outcomes:
- Be Healthy
- Stay safe
- Enjoy and achieve
- Make a positive contribution
- Achieve economic well-being
What is the Common Assessment Framework

- Designed for children aged between 0-19 years of age who have ‘additional needs’

- Early Intervention and identification tool

- A standard national approach to avoid duplication, support good multi-agency working and information sharing

- It is a key element of the ECM Agenda, as set out in the Children Act 2004, following the death of Victoria Climbie
The CAF Process

Consists of: Refer to flowchart

- A Pre-Assessment Checklist
- The new Common Assessment Form
- An action plan with built in review process
- The appointment of a Lead Professional
- Team Around the Child/multi-agency meetings
# Key Aims and Principles of the CAF

<table>
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<tr>
<th>A standard national approach</th>
<th>A <strong>process</strong> supported by a standard form</th>
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<td>Assessment to support earlier intervention</td>
<td>Holistic</td>
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<td>Improve joint working and communication</td>
<td>Focuses on needs and strengths</td>
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<td>Support the sharing of information</td>
<td>Simple and practical</td>
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<td>Rationalise assessments</td>
<td>Empowering and a joint process</td>
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<td>Support better referrals, where appropriate</td>
<td>CAF cannot guarantee service provision</td>
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When to undertake a common assessment

Undertake a common assessment when it will help the child to achieve one or more of the 5 priority outcomes.

**Designed for when:**
- There are concerns about progress
- Needs are unclear
- The support of more than one agency is needed

**Need not be done when:**
- Progress is good
- Needs are identified and being met
- Needs are clear and can be met by family/assessing agency

If, at any time, there are concerns that a child may be at risk of harm, then follow BSCB procedures without delay
Examples of Targeted Support needs:-

- Disruptive and antisocial behaviour
- Overt parental conflict or lack of parental support/boundaries
- Involvement in or risk of offending
- Poor attendance or exclusion from school
- Bullying
- Poor nutrition
- Post 16 not in education training or employment
- Ill-health
- Anxiety or depression
- Housing issues
- Pregnancy and parenthood
- Special educational needs
- Disabilities

Stages of intervention- the CAF in context

- Universal services (Children and families with low or no need)
- Targeted support services (Children and families with medium to low need)
- Targeted support services (Children and families with medium to high need)
- Statutory services (Children and families with high need)

Specialist Assessments & Statutory Intervention (Children in Care, Children with CP Plans, Young Offenders, SEN, complex health & disability)

CAF, with Lead Professional
Several agencies involved

Eg: SCHOOLS, HEALTH VISITING, CHILDREN CENTRES & YOUTH WORK (Time limited intervention)

CAF SOCIAL WORKER
The Role of the Lead Professional

- Act as a single point of contact for the young person and family.
- Act as a single point of contact for other practitioners to report back to.
- Co-ordinate the delivery of actions agreed in the CAF, and ensure that the package of support is regularly reviewed and monitored.
- Reduce any overlap and inconsistency in the services received.
- Support the young person and family to ensure that a careful ‘handover’ takes place if there needs to be a change in Lead Professional.
Consent

- Consent is key to successful information sharing
- Operating with consent is good practice

Consent:

- Must be informed
- Should normally be explicit but can be implied (written is preferable but can be verbal)
- Must be willing and not inferred from non-response
- Must be sought again if things change significantly
- Can be withdrawn

Practitioners must:

- Use clear accessible language
- Explain there are times when confidentiality can not be maintained
- Be aware of relevant legislation
- Follow local policies and protocols

*Important Please Note
All urgent referrals should be initiated by phone and followed up by writing within 24 hours. Telephone referrals need to be made 0208 3594066/4097

In some cases practitioners should not seek consent!
Benefits of the CAF

Child Benefits:

- Reduces need to do multiple assessments
- Encourages early identification of child and family’s needs
- Focuses upon needs and strengths – solution focus approach
- Empowering and joint process
- Identifies issues early before they become complex

Organisational Benefits:

- Improves joint working and communication across professional boundaries and between boroughs
- Reduces the number of assessments needed to be carried out
  A standard national approach which rationalise assessments
Benefits of the CAF

**Practitioner Benefits:**
- Creates a holistic view of a child’s needs
- Supports better referrals where appropriate
- Increases the transparency of work performed by other agencies
- Reduces the number of assessments needed to be carried out

**Financial Benefits:**
- Better targeting of existing services and resources around the needs of a child
- Reduction in the number of cases that develop into complex/acute needs, means the reduction of more costly services
The CAF Three Key Steps

1: Preparation
- Talk to child/parent, other staff/agencies involved
- Check if a common assessment exists
- With child/parent, decide if a common assessment would be helpful
- Use pre-assessment checklist to aid decision
- Seek consent to proceed

2: Discussion
- WITH child/parent
- Together in a child-centred way
- Work together to understand issues/develop solutions
- Focus on strengths and needs
- Consider needs of individual child
- Follow local procedures for recording

3: Delivery
- Concern resolved
- Actions: Assessor, child and/or parent
- Actions: Refer to other single agency – CAF to evidence need
- Actions: multi-agency (MAP or TAC):
  - Identify lead professional
  - Agree multi-agency plan
  - Broker access to services
- Monitor and review
- Close
Practitioners undertaking the CAF?

Practitioners undertaking CAFs as of 12/12/11

- PCT practitioners: 88
- Youth Support: 33
- CAF Teams: 89
- EWOs: 34
- HIST: 295
- Traveller Consultant: 13
- Pre-Sch Inclusion: 12
- Housing: 6
- CAMHS: 31
- Midwives: 48
- CAFCASS: 1
- CAFI: 19
- FFT: 8
- Other: 34
- Hosp based staff: 2
- DV Project Worker: 2

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Reasons for Initiating a CAF

Secondary Risk Factors

Number of CAFs with this Risk Factor

- Anti-social behaviour
- Domestic Violence
- Financial issues
- Housing issues
- Learning needs
- Loss / bereavement / separation
- Not in Education, Employment or Training
- Parental mental health condition
- Parenting issues
- Risk of school exclusion / exclusion
- School attendance issues
- Social isolation
- Substance misuse (child / young person)
- Substance misuse (parent / carer)
- Teenage Pregnancy
- Young carer
- Youth homelessness

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New Early Intervention and Prevention Developments

New ‘family’ CAF:
- Shorter in length
- Referral form
- Designed to assess siblings needs
- Parent Child Indicators

Extended CAF Duty Line:
- Monday to Friday 9am to 5pm

Projects:
- Family Focus Team
- Intensive Family Focus Team
- Safer Families Project
- Targeted Youth Service
- Early Years Panel
CAF- support available to practitioners in Barnet

‘Building Resilience, Supporting Independence’ through the Common Assessment Framework (CAF)

Visit www.barnet.gov.uk/caf-practitioner-info for all of the CAF local information and materials you need including access to the CAF forms.
CAF Practitioners Group Meetings (meets every 2 months)

Team of 4 x Multi-Agency Co-ordinators (MACs) within EIP Division for each of Barnet’s Learning Network areas

3 x CAF Social Workers, working alongside the Children’s Referral and Assessment Team (front-desk); the Child in Need Team (longer-term teams) and the local Police Public Protection Desk, to support the smooth transition of cases up and down the thresholds, between Social Care and the CAF arena

Presentations and information about the CAF can be delivered at staff team meetings/events

Central database of all CAFs undertaken in Barnet, so practitioners can check with their MAC if a CAF may already exist, or whether the child may have an allocated social worker, so beyond the threshold for a CAF
• Local CAF Practitioner Guidance

• Practitioners’ info page on Barnet Online
  http://www.barnet.gov.uk/caf-practitioner-info.htm

• Access to the CAF and Pre-Assessment forms via above page, as well as all local guidance and link to the national guidance

• CAF Leaflets available for parents/carers and young people

• Named CAF Leads in each team/service area/school

• CAF Steering and Implementation Board, with representatives from all key partners to monitor and audit quality and impact of CAFs
- Rolling programme of 1 day multi-agency CAF training
- ½ day refresher CAF training sessions
- Rolling programme of Lead Professional Training for Practitioners
- Rolling programme of Lead Professional Training for Managers
- Overview briefings for practitioners outside the children’s workforce, but who may need to signpost for a CAF
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CAF pages on Barnet Online:
http://www.barnet.gov.uk/caf
and: http://www.barnet.gov.uk/caf-practitioner-info.htm