

Effective Support and the use of the Common Assessment Framework (CAF) in Milton Keynes

Annual Report April 2011 to March 2012



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1. Introduction

This report is a summary of *Effective Support for Children and Families* activity through the Common Assessment Framework (CAF) process, and its impact, for the period from 1 April 2011 to 31 March 2012. The *Effective Support* document and windscreen was agreed by the then Children's Trust in November 2009 and informs the use of CAF across partners in Milton Keynes.

This document was updated in October 2011 with the Levels of Need Document which has been widely distributed among partner agencies and is a key document for all those working with children and their families across Milton Keynes.

The profile of CAF has continued to increase across Milton Keynes over the past year and in particular over the last six months following the introduction of a shortened local MK CAF form to replace the eCAF. In August 2011 the Government announced a consultation on discontinuing work on the National eCAF in light of Professor Eileen Munro's (2011) recommendations. The local response to this was swift and clear. The team responded by asking our partner agencies for their views. On the 1 February 2012, the MK CAF form was launched and was positively received.

2. Purpose of the service

Effective Support is a locally agreed approach to early intervention for children and young people and their families with additional and considerable needs (see *Effective Support* Windscreen and Levels of Need document). The CAF team supports the delivery of *Effective Support* and monitors the effectiveness of early intervention. The team supports practitioners in Milton Keynes to:

- Ensure earlier identification of needs
- Deliver a coordinated package of support that is centred on the child or young person
- Help to secure better outcomes for children and their families
- Share information effectively between organisations

The team also manages the information and data held on children and their families where a CAF has been undertaken.

The three CAF coordinators each cover an area and facilitate the *Effective Support* panels which are held fortnightly in central and east, south and west and north areas of Milton Keynes. The panel is multi-agency and has been in place since May 2010. The panel promotes the identification and development of flexible services which are responsive to children's needs. The panel will also ensure the appropriate level of intervention is available at the right time. The panel also identifies unmet needs so this can be considered in service planning and commissioning activity.

Panels have continued to develop through the second year. Of note is the recent expansion of the north panel, to include Stantonbury and Ousedale Schools Liaison groups. This panel had developed more slowly than the other two but is now functioning well. In the central and east and south and west panel membership remains stable. Fewer panels are held in these two localities. The CAF manager's assessment is that this is a result of the positive working practices to be found within some of the agencies, who have grown in confidence and experience.

Agencies, service areas and teams represented on panels include:

- Children's centres
- CAMHS
- Education psychology
- Education welfare service
- Housing
- Police
- Referral and Assessment Team (Social Care)
- Schools from the local area
- Universal child health services
- Youth services

There are no adult services represented at panel. This has and continues to be, an area for development. However MKAct (Women's Aid) are keen to work more closely with children's services and aim to attend two panels as members before the 2012 summer holidays.

Panel members, where possible, allocate resources from their own agencies/service areas and assist in developing creative approaches and recommendations to promote the best outcomes for children, young people and their families. This ensures that multi agency responses are delivered to meet the needs identified.

The CAF team ensures that clear arrangements for promoting the welfare of children are in place in Milton Keynes, as set out in Working Together 2010 'that the whole children and young people's workforce are aware of it (CAF) and how it is used and that there are enough people in the local area with the necessary skills, training and support to undertake a CAF' (Page 45).

3. Staffing

There has been a change in the staff team during the year. The CAF Manager resigned in August 2011 and an acting CAF manager is currently in post full-time. There are three CAF coordinators, covering north and rural, south and west and central and east and a vacant position for a business support assistant. The business support vacancy has impacted upon the team and has been noticed by panel members. This is being followed up with the council's administrative support provider.

The team has a clear focus and solid understanding of the CAF process and continues to work closely with our partner agencies. Working relationships are generally good and productive across each locality.

The roles of CAF coordinators and manager will be changed through the Council's Organisational Transformation Programme (OTP), which includes the development of a Children and Families Practice within each locality. The Children and Families Practices will establish a new operating model with a greater focus on local delivery and improved collaboration and coordination. A major part of this is the formation of three multi-disciplinary teams serving defined geographic areas. This will improve early help for children with additional and considerable needs. This is an exciting development, building on our work to embed the CAF and will further improve the co-ordination and delivery of early help.

4. Performance and activity in 2011/12

From a population in Milton Keynes of approximately 241,500, **64,200** are children and young people aged 0 to 19 years (mid-year population estimates for 2010, published June 2011).

There are currently approximately **545** children being supported through the CAF process. In the year 2011-2012, a total of **423** new CAFs were completed.

Since 1 February 2012, when the MK CAF was introduced, there has been a significant increase in the number of children being supported through CAF. For the purpose of this report, we are including family groups as one CAF.

The total number of completed CAFs is around **8%** higher than for 2010-2011, when **390** CAFs were completed. During 2010-2011 a CAF was routinely completed for one child. In 2011/12 a CAF was often completed for a sibling group, a family. This has resulted in **545** children receiving a common assessment and then receiving coordinated support, a **39.8%** increase.

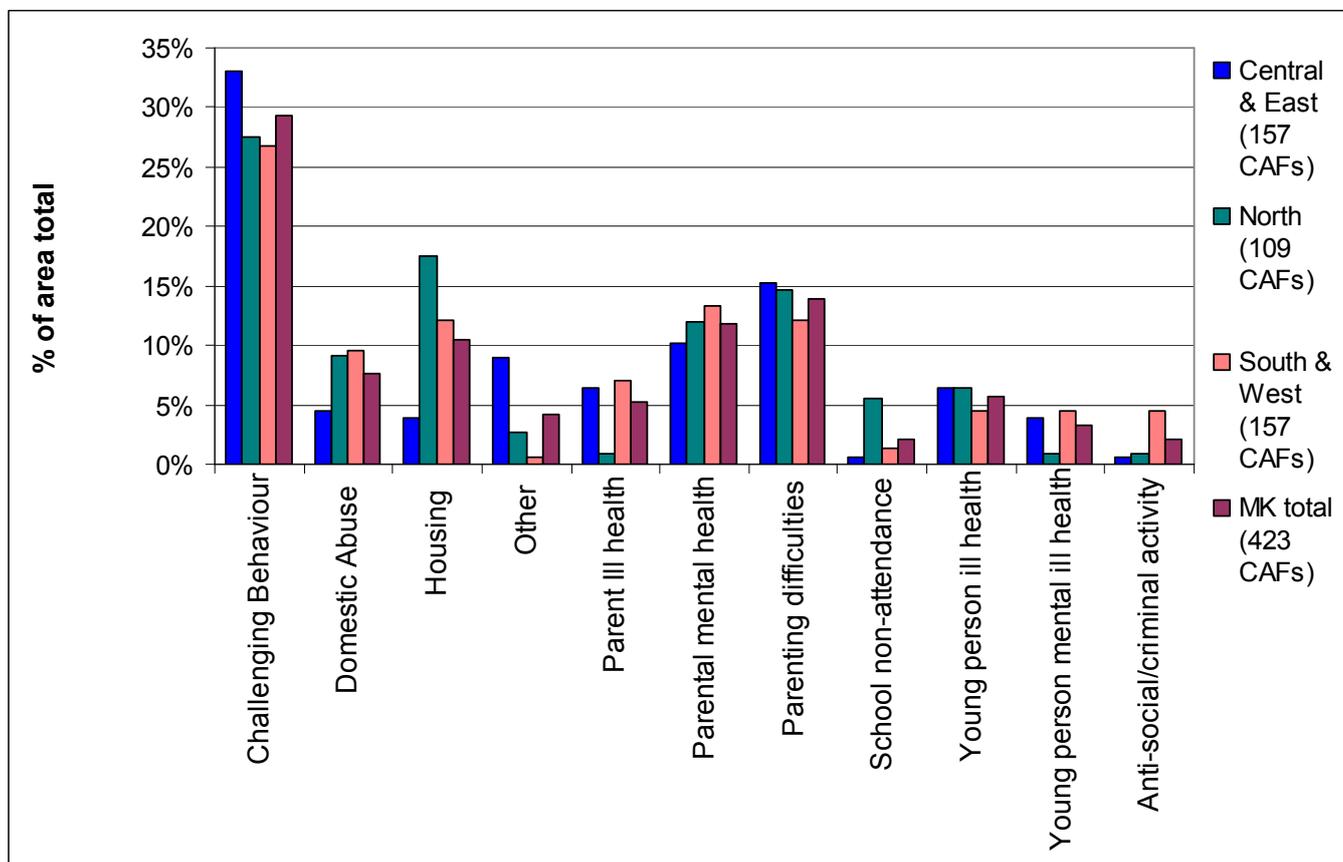
There are currently:

- 111 open CAFs in the central and east area supporting 179 children
- 126 open CAFs in the north area supporting 197 children
- 142 open CAFs in the south and west area supporting 169 children

Presenting Issues

In 2011-2012, the theme of CAFs being produced when a child was exhibiting challenging behaviour continued and this was a reasonably even picture across localities. Parenting issues were also identified alongside this need. In 2010-2011, these two areas accounted for the majority of CAFs. The 2011/12 figures show almost a 10% decrease in the number of children who exhibited behaviour that parents and/or school found challenging, whilst parenting difficulties have remained consistent.

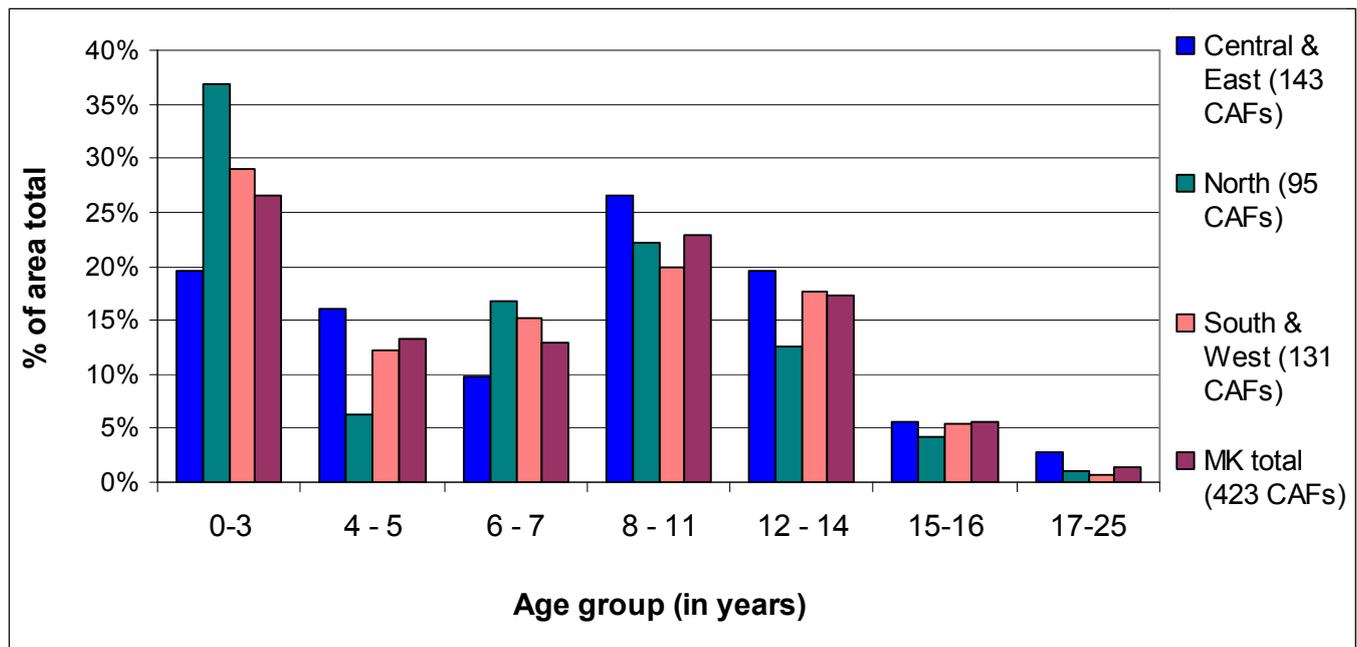
Figure 1: Summary of Presenting Issues



Age range

There has been a significant increase in CAFs for younger children, particularly 0-5 year olds. In 2010-2011, 124 children under 5 years old had a CAF. In 2011/12 166 children have a CAF, an increase of approximately 30%. This reflects the work done with health, Children's Centres and childcare and early years education provision to identify needs at an earlier stage. It also reflects the work being undertaken to encourage practitioners to include sibling groups where the identified needs are parental/environmental based, rather than considering individual children's needs in isolation.

Figure 2: CAF breakdown by age



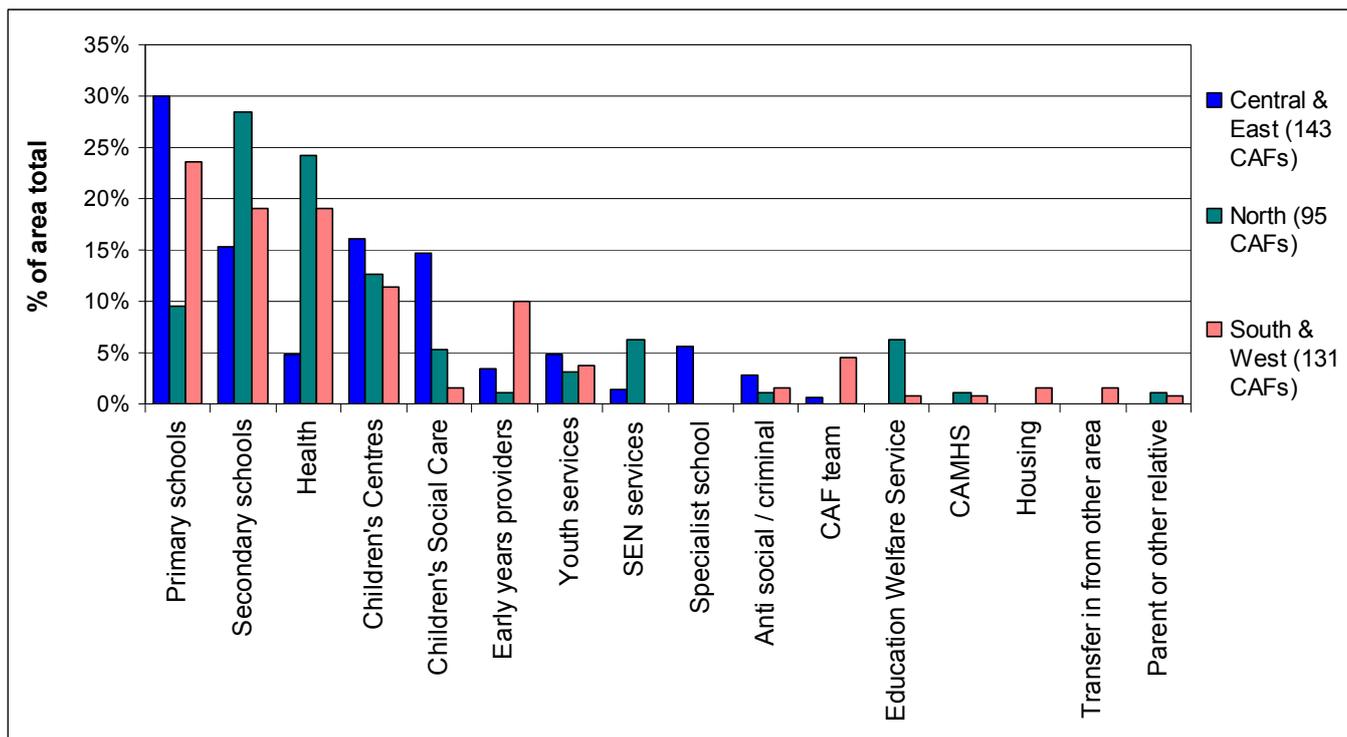
CAF Authors

More CAF authors are actively seeking out the engagement and responses of children and young people when completing CAFs. However for children and young people to benefit from being more closely involved in planning for their own needs we need to continue to encourage professionals to include the view of children and young people as part of the assessment and throughout the duration of the CAF.

Overall, the leading CAF authors are schools and health. Children's Centres have steadily increased their numbers, particularly in the final quarter of 2011/12 when we saw an increase from 10% to approximately 14%.

Colleagues within the council's housing team have completed a small number of CAFs. The data suggests that there is an increase in housing presenting as a family's primary or secondary need. Many CAFs highlight housing as a secondary need; the experience of working with families subject to a CAF is that a significant number of families are finding their life chances impacted upon by factors such as overcrowding and poor or unsuitable and insecure housing. This is an area where we are likely to see continued strain as changes to housing benefits and the new benefit cap begins to impact locally.

Figure 3: CAF Author agencies

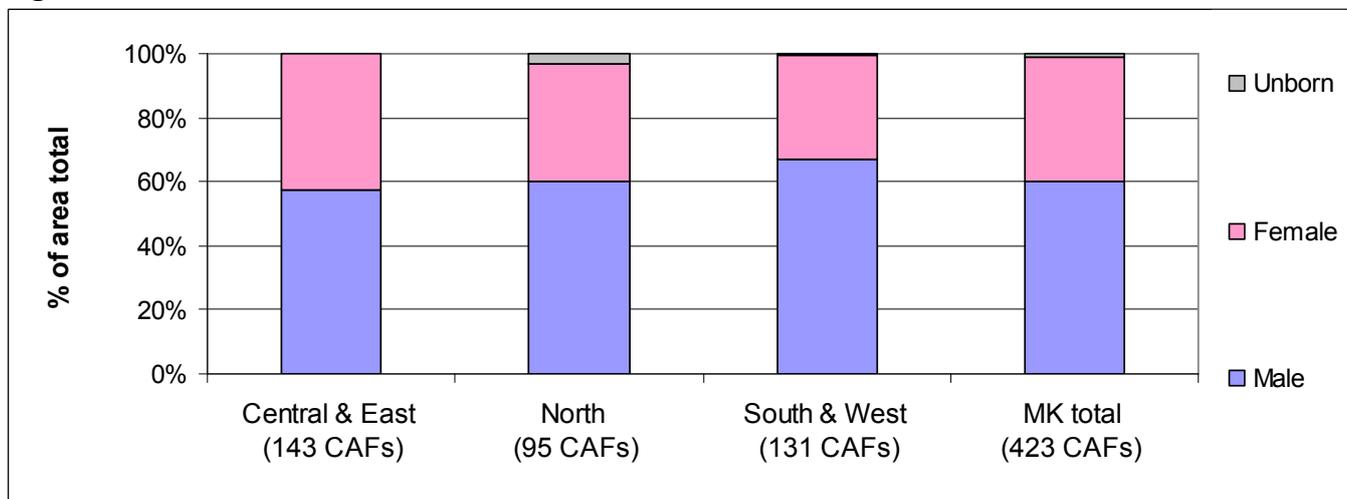


Details of author agencies were available for 369 CAFs.

Gender

60% of 2011-2012 CAFs were completed in respect of boys and 40% in respect of girls. This continues the trend seen during 2010/11. The largest number of CAFs continue to be authored for white British boys with behavioural difficulties and parents finding it difficult to manage. These figures remain consistent with the patterns for 2010-2011, which indicates that services and interventions around challenging behaviour and addressing parenting issues continue to need to be prioritised. New early help services have recently been commissioned to offer children and families support in the areas of parenting and mentoring, emotional wellbeing and community. These will be available from September 2012.

Figure 4. Gender breakdown

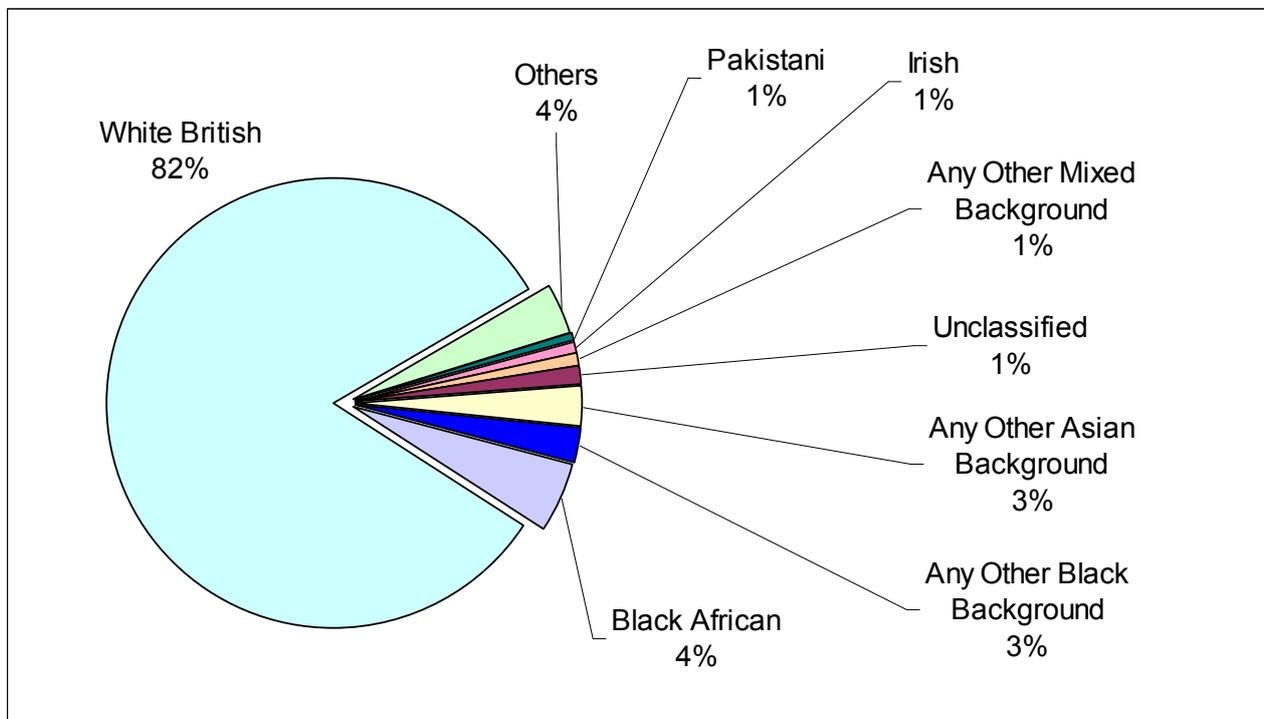


Gender data were available by locality for 369 CAFs.

Ethnicity

The number of white British children with CAFs continues to be by far the largest number, with an increase of 2% in 2011/12. Much as in 2010-2011, this is still not an accurate reflection of the local population.

Figure 5. Ethnicity breakdown



5. Evidence of engagement with children and families

Feedback forms were introduced from 1 January 2012 as a means of asking families for their views on the service they received through the CAF process. These have only been sent out to families whose CAFs have closed.

The response rate has been poor, but one parent commented that after completing the CAF, 'this has helped me and my children so much. We would not be where we are now if it was not for the CAF. Thank you millions'.

6. Developments during the year

There were a significant number of developments within the CAF team in 2011-2012.

The 2011-2012 data and team information indicates that a broad range of agencies (and, indeed, families) are aware that a CAF is a means to gain multi-agency support at a point when need becomes considerable, predominantly at Level 2 to 3 (Levels of Need Document 2011). The number of children who have been or are currently being supported through the CAF process continues to rise as agencies begin to embrace the approach. Whilst this is a real achievement, it is also clear that the process needs to be further strengthened to improve outcomes for children and their families within Milton Keynes.

The last annual report highlighted that the CAF form was too long. In direct response to this, in February 2012, the new MK CAF was launched and heralded the beginning of a new approach

to supporting families. CAFs are now authored with a whole family's needs much more in focus, bringing all agencies together right from the beginning to offer advice and support.

Panels remain a feature within CAF and have been key to the success of CAF within Milton Keynes. Panel membership has promoted and strengthened the concept within the sectors represented and all members have keenly and pro-actively played their part. The knowledge and experience of the panels will support the move into Children and Families Practices.

Milton Keynes Council tendered locally for three contracts focused upon parenting and mentoring, Community and emotional wellbeing. This tender has now been completed and contracts awarded. The newly commissioned early help services will be operational from September 2012.

An established system with children's social care now means that whenever a CAF is suggested to a family, the CAF team links with an agency working with the child or the family directly and follow up support is offered to agencies and families in the completion of CAFs. This aims to prevent children 'slipping through the net' and ensures prompt follow up to target the needs of children.

The Local Authority is also working closely with a local organisation as part of a Department of Work and Pensions project. The project provides mentoring support to individuals over 16 years old who are out of employment and are experiencing complex difficulties. Key to this programme is the concept that help back into work can be offered to all adult family members within a family who are not working. The service currently has 48 referrals, 5 with CAF involvement. The report of the Milton Keynes Child Poverty Commission 2012 states 'that it is clear that to have a real impact on poverty in Milton Keynes we need to reduce the number of households with children where no adult is working'.

The CAF coordinators have hosted a coffee morning/networking meeting in each locality. These occasions have offered time out for people working directly with families in their localities to meet each other, to get to know each other and their roles, and to talk. Each of these sessions has been successful and people have felt supported; there will therefore be a further networking meeting held before mid July.

The CAF data is part of the routine MKSCB (Local Safeguarding Board) dataset. This is regularly scrutinized and discussed by senior managers from partner agencies (see appendix 2 – sample data set).

7. Impact (outcomes) achieved

Two case studies are attached which highlight positive outcomes. These are active CAFs; names have been changed to protect identities.

Many of children and families need support over the long term, usually upwards of 6 months. Invariably, some families experience either an escalation in their needs or the CAF support does not evidence a sustained positive change for the children, in which case a high level statutory service intervention may be required. This is a similar profile to that seen within other local authorities. There are approximately 30 to 50 children at any given time whose complex needs are monitored by the CAF team.

8. Costs

The expenditure for the CAF team and CAF training in 2010-2011 was £172,350. Costs in 2011-2012 were £169,240.

9. Areas for development in 2012-2013

The recent focus of the CAF service has been to support the whole family through the CAF process, rather than looking at children individually. This is in line with national thinking around early help and in line with Professor Eileen Munroe's recommendations.

Following the introduction of the Common Assessment Framework, families in Milton Keynes have had access to integrated support providing early help. There have been challenges along the way and while many children and families have had positive outcomes and experiences of professionals working with them together, it has become apparent that the CAF process in itself will not always deliver positive outcomes for children and their families. The role of Lead Professional has presented challenges for many practitioners, as giving families the time they need has impacted upon their primary roles.

This, in turn, has impacted upon children and families as, without a Lead Professional available to coordinate support and work directly with families, change has been more difficult to achieve. Many agencies do offer this role to families, with good outcomes, and are actively involved; however, the approach can be inconsistent for a number of reasons including reduced workforces and reduction in services. Children and Families Practices are one solution to this; training is another.

Helping children and families to begin to make sense of their lives and to work as a family to make lasting positive changes is at the heart of early help. In 2011-2012, the CAF process was unable to offer families a family group conference, where the core principle is to give children and families a tool to help them help themselves. It is proposed that this service (currently available to families receiving social care interventions) be developed so as to be available as part of the early help offer to families, to prevent the difficulties they face becoming overwhelming them to such a point where statutory services may be required.

To support and widen the support for families it is crucial that links with adult services are formed and maintained. This has been a developing area over time and it is anticipated that Children and Families Practices will accelerate our work to develop these links.

An area where we know we need to make further improvement is in ensuring that the voice of children and young people is heard during the assessment process and that they are fully engaged and understand what is happening.

Sarah Green-Hurst
Acting CAF Manager
April 2011

“Moving on from Domestic Abuse” - CAF Team

“It’s been really helpful” (mother)

Overview

The CAF assessment was completed by a Social Worker from a family support team in respect of a 5 year old child and siblings. The case had been open to social care since 2008.

At the time the CAF was written, mum was starting a new relationship with a man living outside MK who had children of his own from another relationship.

Challenges

The assessment identified family issues following the breakdown of the mother and father’s relationship and contributory allegations. The situation affected all the siblings in the family of 4 children.

Key actions

The initial TAC meeting was attended by CAHMS, the school counselor, the Health Visitor, the Head Teacher, the CAF co-ordinator, Mum and her partner.

The plan has been running from November 2011 until the present day with some changes as issues developed and were resolved. The plan has extended to include additional services and support:

- Parents engaging with the Childrens Centre to attend a nurturing parenting course.
- Teachers being brought up to speed with issues for all the children in their respective schools
- Spare clothes being made available in school for the child subject of the initial CAF
- School counsellor to continue to offer service to the child subject of the initial CAF
- MK Housing being engaged to support the family
- Family Centre being brought in to offer family work/support for mum/children
- Eldest daughter being seen by CAHMS, possibly looking to extend to family therapy
- Support being sought from Shelter and Relate

Impact

There have been two further TAC meetings since the initial meeting. Mum has engaged with services well. Her relationship has now ended and she is managing the issues in the family and those for each of her children with the support of the plan. The services offered through the plan continue to be assisted by school, school counselor and CAHMS. The children centre is now also offering support and the youth service are taking a role in the support plan. The issues with housing have moved as far as possible. The next TAC meeting is arranged for July 2012.

“Family Support to Prevent Exclusion” - CAF Team

“It feels good to feel supported” (mother)

Overview

The School Inclusion Manager completed a CAF on a child aged 8 years old. The assessment was initiated due to concerns about the child’s behaviours, some of which were very challenging to staff, with the use of sexual and inappropriate language. The child would become very emotional when confronted about her behaviour.

Challenges

Conversations with mum identified that there were similar problems at home and that mum was also struggling with the behaviour. Mum highlighted that the child was experiencing disrupted contact with her birth father and that his parenting did not replicate the boundaries she set out in the home. Mum also had a new partner and baby, which had changed the family dynamics for the child.

Key actions

- The CAF was presented at the CAF Panel, who confirmed that there were no safeguarding issues and recommended a Team Around the Child meeting.
- The family were referred to the local children’s centre, who arranged for the parent to attend parenting classes.
- Mum and daughter were referred for Relate Family Counselling via the children’s centre.
- The Housing Officer agreed to follow up concerns about anti-social behaviour in the family’s locality and to liaise with housing repairs to improve the property.
- School agreed to refer to the Primary Behaviour Support Team to request that they observe the child in school and develop strategies for managing her behaviour.
- A Family Support Worker undertook some 1-1 sessions with mum to advise her on strategies for approaching dad and engage his support.

Impact

The CAF has been open for 18 months with regular TAC reviews. During this time, mum has grown in confidence in her own abilities to manage her daughter’s behaviour whilst at the same time putting into practice parenting techniques with her baby son.

The Family Counselling helped improve mum’s relationship with her child and school observed a continuing trend in improved behaviour.

Appendix 2: MKSCB (Local Safeguarding Board) CAF data set

COMMON ASSESSMENT FRAMEWORK	2010/11	2011/2012 Q1	Q2	Q3	Q4	11/12	target	RAG	Comment	
1. Number of CAFs in the period	390	80	54	93	196	423	600		<p>There has been a considerable increase in numbers since Q2, but the annual figure falls short of the target.</p> <p>Throughout the year "challenging behaviour" was consistently the most common reason for a CAF.</p> <p>Since Q1 CAFs for "parenting difficulties" have shown the greatest increase in numbers (from 5 in Q1 to 38 in Q4). There was also a considerable increase in the number of "housing" CAFs .</p>	
2. Summary of reasons for CAF in the period										
Anti-social/criminal activity		2	2	2	3	9				
Challenging Behaviour		23	16	38	47	124				
Behaviour Problems	154	Category no longer in use						-		
Domestic abuse	19	9	5	5	13	32				
Housing		3	3	6	32	44				
Other		0	0	3	15	18	-			
Parental alcohol misuse		1	0	0	6	7	-			
Parental drugs misuse		1	0	0	0	1	-			
Parental Substance Misuse	6	Category no longer in use						-		
Parental ill health	-	9	2	4	7	22	-			
Parental mental ill health	-	17	9	5	19	50	-			
Parent Health Issues: mental and physical	51	Category no longer in use						-		
Parenting difficulties	81	5	5	11	38	59				
School Non-Attendance	15	1	2	2	4	9				
Transferred in		0	0	1	0	1	-			
Young Carer (age 8+)	3	1	0	2	0	3				
Young person alcohol misuse		0	1	0	0	1				
Young person drugs misuse		0	0	0	0	0	-			
Young Person Substance Misuse	1	Category no longer in use						-		
Young person ill health		3	6	11	4	24	-			
Young person mental health		4	1	1	8	14				
Child Health Issues	43	Category no longer in use								
Young person pregnancy	17	1	2	2	0	5				
<hr/>										
3. Number presented at panel in the period	331	71	41	66	90	268	-		<p>This counts the number of presentations. A CAF might be presented more than once.</p>	
4. Number of CAFs successfully concluded in the period	38	3	2	41	41	87	-			

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