



Consultation on Integrated Working Resources

Report to the Children's Improvement Board

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Contents

Executive Summary	3
Introduction	4
Methodology	5
Stage 1: Scoping and Set Up	7
Stage 2: Policy Workshop	8
Stage 3: Focus Groups and Wider Engagement	8
Stage 4: Synthesis and Reporting	10
Findings	10
1. Policy implications	10
2. Section 1 Where is the sector now?	12
3. Section 2 Feedback on the CWDC resources (long list and a short list)	16
4. Section 3 Gaps and what further support is needed	25
Key Messages	39
Appendices	40
Scoping Interview guide	40
Organisations attending focus groups and online survey	41

Executive Summary

The Children's Improvement Board (CIB) commissioned the Springboard Consortium to consult with practitioners and stakeholders in the sector, policy colleagues in government departments about a range of resources produced by the Children's Workforce Development Council (CWDC). The intention was to identify which integrated working resources continue to be of use to the sector; which resources should be revised or discontinued; and to identify any additional resources needed to help the sector to become more effective in implementing sector-led improvement.

Methodology

In the first instance we held initial conversation with CIB to explore the existing resources and data about the resources held, and identifying key stakeholders such as government officials. We also agreed a project plan and approach to regular client liaison.

During this stage it was agreed that we would focus on a number of core documents which were developed by CWDC and have been handed over to CIB. These include a brief overview of a 'long list' of documents and a more detailed enquiry of a 'short list' of documents.

We conducted a small number of telephone interviews to scope out the key issues with policy leads in central government. In particular, we were looking to understand how current national drivers might impact integrated working and to get a sense of which key stakeholders should be approached during the consultation.

We went on to plan and facilitate six workshops which were held across England. The workshops addressed the following questions:

- What need does the sector have for each of the resources at the present time?
- Which documents should be discontinued (if any) and which should be revised?
- What changes are required to update the documents to ensure they meet current need and are congruent with policy changes?

The workshops were attended by 93 people from 64 organisations. Out of the total number of councils in England, 35% attended a focus group or submitted a response to the online survey.

A separate workshop was held with policy colleagues at the Department for Education.

A separate consultation process was undertaken with members of the National Children and Young People's Workforce Partnership.

In addition, an on-line survey was conducted to complement the workshop consultation. This was advertised through the Local Government Association Knowledge Hub. 68 responses were received.

Key Findings

- The resources provided a useful starting point, but most areas have developed their own materials.

- The resources would be more helpful if streamlined and updated, in particular, linking them to other policy areas, such as the early intervention and safeguarding agendas.
- Awareness of the 'long list' was limited. The exceptions to this were the 'review of evidence' and the 'multi-agency toolkit' which were felt to be useful.
- The short list had been well used but now has limited value in supporting further developments.
- Most areas now use their own local guidance regarding the Common Assessment Framework / Team around the Child/Family. However, reference is still made to aspects of the CAF resources.
- Some use is made of the 'Team Around the Child' and 'Lead Professional Managers and Practitioners' Guides.
- There is some use made of the induction workbook but it is not popular and would benefit from stream-lining.
- The Common Core is used extensively and is popular.
- More guidance is needed on information sharing. This is still seen as a barrier to integrated working, especially in relation to working with health partners.
- Further guidance on workforce development, measuring impact and measuring cost effectiveness would be helpful.

Key Messages

- The existing resources do not need to be updated and there is not an appetite for new or further guidance or reports.
- Future support needs should focus more on face to face, case studies and regional networks as ways of learning
- Specific areas for future support from CIB identified include supervision, voice of family and impact case studies
- How to support the sector move towards delivering effective early help including developing the culture and processes to support this approach. This is particularly relevant given the proposed multi-agency inspection of child protection where the effectiveness of early help will be a primary judgement.

Introduction

The Children's Improvement Board (CIB) commissioned the Springboard Consortium to consult with practitioners, policy colleagues in government departments and stakeholders about a range of resources produced by the Children's Workforce Development Council (CWDC) regarding integrated working.

The context for this project is the changing policy agenda, as well as changes in organisational and delivery structures at regional and local levels which will impact on the children's services workforce. The impetus for integrated working in children's services started with Every Child Matters in 2004 but continues, for example through the implementation of the Munro report. The key area of development is supporting the

workforce, especially frontline practitioners in implementing integrated working practices. Tools to support this integration at the frontline include the use of a Common Assessment Framework (CAF), developing a Team Around the Child (TAC), the Lead Professional (LP) role and effective induction for staff across a wide range of settings.

The need to review existing resources to support integrated working and identify demand for further new resources is particularly important given the changing legislative and policy pressures and associated organisational restructures and service re-designs. The changes about the role of Children's Trusts and the creation in some areas of People's Departments may dilute the ability of children's services professionals to prioritise their work to other partners and work in an integrated way. Recent legislation such as the Health and Social Care Act, the Localism Act and the Open Public Services White Paper are changing the landscape of local partnerships and how agencies are resourced and structured. Bearing in mind the financial pressures on the public sector, the need for high quality, focused resources to help children's services professionals that meets their development needs is crucial at this time.

It should be noted that there is a specific unique policy issue in relation to the Induction Standards document. The current position is that the DfE National Minimum Standards (NMS) for Foster Care and Children's Homes set out a requirement for local authority fostering services, independent fostering agencies, voluntary fostering organisations and those employed in local authority and independent Children's homes to complete the CWDC induction standards. They are only mandatory for the Social Care Workforce, for example those working in Children's Homes and Fostering services. Ofsted review whether the national minimum standards have been met, including the requirement for induction, when carrying out their inspections. The Induction Standards have never been mandatory for the whole workforce but are considered good practice.

It had been originally intended to undertake a specific consultation exclusively with this workforce on the Induction Standards as part of the broader consultation exercise. However it was agreed with policy colleagues in Department for Education that they would produce an interim statement which confirmed the current position for this part of the workforce and that further clarification would be provided in due course.

Methodology

The enquiry was conducted using a range of methods: desktop research, individual interviews, the design and facilitation of stakeholder workshops and an on-line survey. The following table summarises the approach taken to the consultation:

Requirements	Methods
Establishing need for resources	Focus groups across the country Wider engagement activity including email, Knowledge Hub and online survey
Advising on changes and	Focus groups across the country

Requirements	Methods
discontinuation of resources	Wider engagement activity including email, Knowledge Hub and online survey
Identify changes required and specifications for changes	Focus groups across the country Wider engagement activity including email, Knowledge Hub and online survey Policy workshop
Work with key policy colleagues	Policy workshop
Identification of any additional resources	Desk research Policy workshop Focus groups across the country Wider engagement activity including email, Knowledge Hub and on-line survey
Options appraisal report	Desk research Analysis and reporting
Wide range of locations and organisations involved	Focus groups across the country Wider engagement activity including email, Knowledge Hub and on-line survey
Consultation with those who have working knowledge of existing resources	Focus groups across the country Wider engagement activity including email, Knowledge Hub and on-line survey
Reducing the burden of Participation	Liaison with regional brokers to build on existing regional activity and working through existing contacts Focus groups across the country Wider engagement activity including email, Knowledge Hub and online survey

The project was carried out in four distinct stages which will be described in further detail below:

- Stage 1 Scoping and Set Up
- Stage 2 Policy Workshop
- Stage 3 Focus Groups and Wider Engagement
- Stage 4 Synthesis and Reporting.

Stage 1: Scoping and Set Up

We started the work by holding an initial conversation with CIB to explore the existing resources and data about the resources held, key stakeholders such as government officials. We also agreed a project plan and approach to regular client liaison.

During this stage it was agreed that we would focus a number of core documents which were developed by CWDC and have been handed over to CIB. These include a brief overview of a 'long list' of documents and a more detailed enquiry of a 'short list' of documents.

The 'long list' contained:

- CAF form in full
- CAF form: consent statement only
- CAF form: Delivery plan and review only
- CAF form large print version
- CAF form without delivery plan and review
- CAF form in other languages
- Explaining the CAF to children leaflets
- Explaining the CAF to parents
- Explaining the CAF to young people
- Inductee guidance
- Induction standards certificate of completion
- Building and implementing an effective local workforce strategy
- Building and implementing an effective local workforce strategy
- Embedding integrating working - slide pack
- Impact on outcomes
- More for less - slide pack
- Securing Buy In and Engagement - how to guide
- Securing buy in and engagement - slide pack
- Strategic buy in and engagement
- Strategic buy in and engagement - how to guide
- Vision, values and behaviours - slide pack
- Barriers to engaging with the CAF process – executive summary
- Barriers to engaging with the CAF process – full report
- Integrated working: A review of the evidence
- Multi-agency working toolkit - managers
- Multi-agency working toolkit - practitioners

- TAC research executive summary
- TAC research full report

The 'short-list' included:

- CAF Managers Guide
- CAF Practitioners Guide
- Lead Professional – Managers Guide
- Lead Professional – Practitioners' Guide
- Induction Standards Workbook
- The Common Core

We conducted a small number of telephone interviews to scope out the key issues with policy leads in central government. In particular, we were looking to understand how current national drivers might impact integrated working and to get a sense of which key stakeholders should be approached during the consultation. The Appendix contains the interview schedule used and gives more detailed information on the nature of the interviews.

During this first phase desktop research was conducted to ensure that the project team was fully conversant with policy area, the content of the materials and the relationship between the two.

Stage 2: Policy Workshop

In Stage 2 we facilitated a policy workshop with policy leads from central government which reflects the fact that integrated working cuts across a whole range of policy areas. The workshop took the form of a facilitated conversation with the purpose of:

- Identifying the role of policy and practice guidance in achieving improved integrated working.
- Identifying changes required to update the resources to ensure they meet current need and are congruent with policy changes.
- Identifying gaps in the resources or support required in the sector.

The workshop was attended by 10 civil servants from across the Department for Education. The workshop invitees included policy leads from government from Partnerships and integrated working, Sure Start and Early Intervention, Improvement and Workforce, lead on national ecaf and information sharing, Fostering Policy, Child Protection, Early help and assessment, Children in Care, Local Improvement Unit, Troubled Families etc.

Stage 3: Focus Groups and Wider Engagement

Workshops

In this stage we designed and organised six workshops across the country. They were aimed at practitioners and managers from across children's services, with a particular focus on those who already have a working knowledge of the resources.

The focus of the workshops was the following questions:

- What need does the sector have for each of the resources at the present time?
- Which documents should be discontinued (if any) and which should be revised?
- What changes are required to update the documents to ensure they meet current need and are congruent with policy changes?

The workshops were attended by 93 from 64 organisations (the list of organisations represented are listed in the appendix). In the main, the participants were middle and senior managers from local authorities across England. There was some representation from the NHS, parent and voluntary sector groups, and independent companies. Out of these four were health organisations, six from provider organisations and three from other networks or groups.

Roles included:

Multi-agency support manager	Programme Director, Disabled Children
Integrated Service Manager	CAF Team Leader
Practice Manager Early Intervention and Targeted Support	Learning and Development Adviser
Assistant Director, Vulnerable Children & Children's Social Care	WellChild Children's Nurse Specialist
Integrated Working Manager, Intensive Family and Youth Support	Safeguarding Improvement Manager
Area Prevention Commissioning Manager (East Central)	Head of Prevention and Early Intervention Services
Workforce Strategy Lead	Interim Head of Service - Stronger Communities
Head of Children's Assessment and Early Help Children's Services	Group Manager Community Services 0 -19
Children's Workforce Development Team	Service Manager for Connexions
Service Manager for Children's Social Care	Lead Officer for Social Inclusion
Manager for Education and Early Years	Troubled Family Project Officer
Manager - Children's Centre Services and Sure Start	

The focus groups were structured by focusing discussion on the three questions listed above. However, participants were encouraged to engage in a through and wide ranging discussion of relevant issues.

On-line Survey

To complement the consultation conducted through workshops, we designed and promoted an on-line survey powered by our in-house SNAP software. SNAP supports both free text questions and a wide range of closed question, including multiple choice, drop down and grid style questions.

We advertised the survey through the LGA Knowledge Hub. We extended the window of time for submission of responses to the survey to maximise engagement with the sector. We received a total 68 responses to the survey. A list of organisations who responded to the online survey is listed in the Appendix (those who submitted this information n=38). Of these 79% were from Local Authorities.

Wider Engagement

We also consulted with the National Children and Young People's Workforce Partnership hosted by DfE which includes representatives from voluntary organisations, children's

workforce organisations and officials from the DfE. As well as collating feedback from attendees at this group, as a result of this feedback, the survey response time was extended for a week and further engagement opportunities offered and undertaken with organisations.

Stage 4: Synthesis and Reporting

This report draws together the findings from the focus groups, survey, policy workshop and desk top research. The rest of this document presents an analysis and discussion of the findings, drawing out conclusions and suggested actions.

Findings

1. Policy implications

1.1. Key findings from the DfE policy workshop

1.1.1. General observations

The materials were felt to be out of date in relation to terminology, statutory requirements and policy direction. The DfE has issued little new guidance on integrated working and delivery so it will be useful to get a sense from sector whether this approach is relevant and effective in delivering outcomes. There was a feeling that new and future policy should provide the 'what, not how' of practice – consequently there will be no need for statutory guidance. It would also be good to focus on evidence-based practice in any potential re-write of materials.

The Common Core is linked with qualification development so if there is a suggestion to amend or discontinue, then this has implication for training providers, qualification design and delivery. There was also a question about how a Troubled Families Qualification will relate to the Common Core?

Schools and Academies need to be drawn into the discussion, especially around CAF, what it is and how it's used.

1.1.2. Gaps

It would be useful to further develop a common language; for example, what is currently meant by 'integrated working' and how does it relate to the efficiencies agenda? What is early intervention, prevention in a post-Munro world?

Case studies could be developed on the evidence of effective governance arrangements now that many Local Authorities are moving to People's Directorates and Children's Trusts are less prominent.

There needs to be clarity about the age-range in scope e.g. SEN incorporates wider age span than, for example, schools.

It may be helpful to look into the impact of personalisation and personal budget holding and share any existing case studies.

There is a gap in guidance on commissioning skills and capacity, for example in carrying out a needs analysis.

1.1.3. Wider agenda

There is a need to link to other policy agendas e.g. information sharing (DWP and MoJ), troubled families and other cross-Whitehall policy. Also LA Research Consortia has reported on CAF, Think Family Reports, Troubled Families Report, previous CWDC reports on integrated working.

There is also a need to link with other consultations e.g. CAF, SEN green paper, Working Together

1.2. Views on the national policy backdrop from the focus groups

1.2.1. Need for stability in policy agendas

One Local authority are said that they felt a bit 'bereaved' initially without CWDC. They said:

"It was good to be forced to do your own thing, to a degree, but you do need that central bank of support to go back and make sure you are sticking to the main principles, however you are actual doing it locally."

A voluntary sector participant said that it takes time to set up relationships with agencies and work with families. But because government and local priorities keep changing, this work can get interrupted before you can make, and demonstrate, progress. Voluntary sector organisations have their own charitable objectives which don't always work with centrally-driven targets.

There was some reluctance to get too attached to certain pieces of guidance, because practitioners are always wondering what will come next from government.

"It takes time for government priorities to trickle down from the centre – then it changes!"

But, even when you would like to make more use of some of these tools, there is always other policy agenda to follow, some of which has funding attached to it.

There is a view that the government says it wants to not be directive – but conversely the Troubled Families agenda is very directive. Frontline practitioners also become very distracted and unsettled by targets, *"so they can't focus on the family they are working with."*

There was strong appetite to promote early intervention through better integrated working. However:

"The reality is that with the cuts etc the thresholds will be higher now. Integrated working may not have the impact that was originally hoped in early intervention as this is now not totally possible given the cuts. "

However, an overwhelming message from participants was that lots of work had gone into implementing the CAF with change starting to happen, but **"don't stop now"**.

2. Where is the sector now?

2.1. Assessment and referral including family CAF

Some practitioners said that feedback they have had on CAF is that families valued the process, felt they owned it and that it was making a difference.

There are multiple designs out there now for the CAF. Lots of regional development has taken place to produce tailored documents that serve the purpose better. In many of the places represented the CAF form had been used to develop a local version of the form. This was driven by a perception that the original CAF form was complicated and long, leading to revisions to simplify it. Local versions of the CAF have grown organically from the original CAF template. The local CAFs tend to be slimmed down versions of the original and simplified but still cover the same information. This was because shorter forms are less daunting for front line staff to use. Often the process used to develop a local CAF was done through working groups across the local authority.

“It is long, burdensome etc in it’s original form – it can end up quite lengthy and doesn’t always tie together. [Our] version looks at whole family but there are sections for each child.”

People were clear however that although altering the CAF for local needs is helpful, teams must be careful not to cut out information that is important to other professionals – *“Instead it should just be simplification and removal of duplication.”*

There were a small number of areas where duplication was highlighted where other partners were not using the CAF process for assessment, with health partners using their own form that covers similar areas, as well as some separate social care assessments. One area has a system where they can attach the CAF so people do not have to re-enter the data for the social care assessment or practitioners use the CAF as the initial assessment.

A couple of areas plan to move to single assessments, for example looking at other assessments that would overlay CAF with a view to a standard delivery plan – a Universal Needs Assessment. One of these areas said that *“health want their own form, but it is hoped that everyone will accept CAF, because it’s very useful when it’s completed fully and properly.”*

The Pre-CAF signposting was thought to be very useful and in some cases the pre-assessment checklist has been incorporated into a local CAF.

In the overwhelming majority of areas, there is movement towards or a desire to move towards a Family CAF to replace a CAF. One area highlighted their family support model that is now embedded fully and have developed their own CAF system which focuses on assessing the family not just children. Linked to this, practitioners are now commonly referring to a Team Around the Family, not Team Around the Child, and this TAF covers a wide age range of 0-19. Many areas are looking at developing family CAF forms which are modular (family, child, adult sections then analysis and planning). Some are using outcomes star approach to assess the family against the criteria and builds a picture of the functioning of the family.

2.1.1. Purpose of CAF

People felt that it is important the CAF is seen and used as an assessment tool and not just a process to be followed. There was lots of discussion about whether CAF is being used as a referral form (to social services) or if it is a holistic assessment tool. We heard examples of it being a requirement for step down provision (as well as step up).

The differences between FIPs and CAFs are becoming blurred, and with the increased focus on troubled families, it is clear that there are different views on what the term means for different agencies which makes it difficult to know the best way to meet the required indicators.

Currently, many practitioners are not comfortable asking questions that they are not experts in, but needs to be whole family assessment. So CAF is sometimes used as a prompt for the areas that practitioners should ask about when doing an assessment.

2.1.2. Embedding of the CAF process

Many areas said that they had found it difficult to embed integrated working.

“We have CAF but it ‘hasn’t worked at all’ – perhaps because it was set up as being a new resource but in fact was the same as what people had already been doing but with more forms - that’s how people perceived it. And because of this negative connotation, it can’t be used now. So we are looking at different ways of assessing, including distance travelled. We’re keen to do away with a referral form at all, because it takes so long - referral should be via a professional conversation instead.”

Part of the process of embedding integrating working involves work with professionals to ensure they are comfortable with it and have enough training to use it correctly. There is a difference in approach between areas that have a forced approach to embedding and areas that have made it voluntary. For one area the voluntary nature of the system and the CAF form meant that professionals are forced to work better with parents to support them to identify what they think their key priorities are. Another area embedded integrated working by ensuring it had support at the strategic level and they said to schools, nurses, midwives, ‘you can only get additional support via a CAF’. In one area CAF is only recently starting. If it was to be scrapped that would be ‘disastrous’ because it has only just been embedded.

2.1.3. Other tools used

- APIR / CAF wheel - practitioners see it as a helpful therapeutic tool. You can see improvements and changes in different areas e.g. education, health, finances.
- Risk matrix model for threshold decisions has been developed in one area instead of windscreen
- 2 useful local tools that are very helpful - ‘risk and resilience’ for social workers and ‘vulnerability and resilience’ for other partners.
- Tools to focus on strengths of families which plot results on graph and see how it changes over time. Tries to get away from the fact that people over-emphasise risk and want to pass it on.

2.2. Early help and prevention

This was an area where participants were keen to start developing further – early help, especially in light of the Munro recommendations. One area is trying to do early intervention to prevent the flow of children into care. i.e. using the pre-CAF and Children's Centres giving more targeted support. One authority is focusing on maternal mental health which is seen to be a good focus and supported by the evidence base. It's what Family Nurse Partnerships do.

A number of Local Authorities had set up new preventative or early help services. Some were locality based (e.g 5 multi-disciplinary teams in a local area working with schools across the 0-19 age range to identify where preventative work might be needed before a CAF process.)

2.3. Information sharing

Information sharing between organisations works quite well generally. For troubled families work, one area said they *"found it difficult getting information from health and there has been lots of red tape - CEO approval was needed to sign off protocols for information sharing."*

Others felt that whilst information sharing is much clearer and easier in children's services generally but this was not always reflected in adult services. Sharing information between adult and children services relating to vulnerable children or families was problematic. Schools can also be a problem if information sharing is not a legal requirement.

One area has developed a local version of ContactPoint, although no personal details of families are held. A number of other areas mentioned similar systems and found this to be very useful

2.4. Thresholds

Different agencies have different thresholds for getting involved with families. Thresholds can mean that families are going in and out of the children's social care service ('step up and step down') – where there is a potential for disengagement. There is a need to get around this so that cases which don't meet the threshold still have something else in place for them. One area has had training on this – getting people to think about what does this family need, so starting from the family, not from services.

One area has a tool/list of questions – like a screening tool - that could be used to ask the tricky questions to identify what's wrong. For practitioners it's about having both the wording (how to phrase the question) and the confidence to ask the questions.

Several areas have a 'triage' point for social care – different names for this but one is a 'screening panel', including multiple professionals such as social worker, health visitor, mental health, who look at incoming cases and decide whether they meet threshold for social care. Like a MASH – a single point of contact with one phone number.

2.5. Evaluating impact

The National Negative Costing Tool is useful for FIPs – it identifies savings easily but is much harder to actually deliver these. Other tools that have been useful include a Distance Travelled Tool (produced by Action for Children for Children Bristol) and a Change Tracker produced in Gloucester.

Some areas use a scoring system to measure outcomes- this to identify areas where young people feel there has been more and less impact, and then this data is aggregated to identify areas that need to be reinforced in staff training or new services that need to be commissioned.

One area is going to take a baseline of how services are working together now, so can measure progress in future.

2.6. Professional development, training, induction, supervision and line management

There has not been a specific training programme for integrated working which has made implementation harder. Off the cuff/ad hoc training does take place but there is not a dedicated training programme and a needs assessment has not taken place.

CAF training has generally evolved organically from the original national programme becoming more practical and locally focused. It might be that the CAF training is standard across a region where regional trainers meet up and share learning.

There is a push to continue provide multi-agency training in local areas on integrated working and CAF, as well as ‘train the trainer’ courses.

Some areas are having a children’s workforce induction for any staff working with children available for staff from all sectors including the third sector.

2.7. Model and vision

It was felt that the children’s and family agenda had become about targets which has not necessarily helped integrated working. It does not feel like there is a strategic vision at the moment and instead it feels reactive to external policy and financial cuts.

The Integrated Working Tool [not on the long list of documents and no longer on CWDC website] is useful because it is easily understandable for children & families and different levels of staff. Like Every Child Matters it has very simple outcomes is easy to remember and is helpful to have the simple common themes which are simple to visualise.

Some areas are developing or embedding a model for integrated working across a local area, for example based on Munro, across all support services to CYP & families and aligned with Troubled Families and using a Team Around the Family. Teams are moving more towards multi-disciplinary locality teams with social workers in schools, children & family workers based in family centres, parent support advisors all having links into mental health, police and domestic violence services etc. In one are they have an embedded key worker model, 50 workers who work with 10-12 families each. This includes access to lots of players including adult services and housing.

2.8. Multi-agency working-specific issues

Participants said they found it difficult to engage some of partners in integrated working. For example, CAMHS have been difficult to engage – in one area CAMHS are now refusing referrals not made using CAF.

Some schools are well engaged and others not – often citing lack of capacity to complete CAFs and one mentioning union opposition to teachers being asked to complete the CAF as teachers are seen to not be qualified to do so. It was felt that the academy agenda acts a disincentive to schools to try and keep ‘difficult’ children in the school - they would rather shift them to children’s services although some academies are delivering early intervention themselves. There may be joint funding by schools and LA to commission services. i.e. joint commissioning where it adds value.

One LA says that relationships with schools have ‘faltered’ –although two thirds of school will do CAFs now, but it has taken 8 years to persuade them to. There are less resources for schools at the moment which means they may be less keen to do CAFs. Extended schools services have become local school partnerships and they have less funding now. Some school partnerships will do CAFs, but without that schools might not do them.

3. Feedback on the CWDC resources (long list and a short list)

3.1. General feedback on all resources

The consensus on the materials was that they provided a very useful starting point, but most areas have developed their own materials by now.

“National guidance can be helpful when setting out (and with fully resourced team who can spend time implementing it). In reality it is usually about doing the best you can with the resources you have – so local needs override national guidance.”

It was recommended that CIB do not spend time or money developing them further in detail. It would, however, be very helpful to have their status clarified – being on an archive website with uncertain status was felt not to be helpful and people wanted to see more of a national profile for the guidance.

“It is important to have CAF as a shared tool that is recognisable everywhere even if there are variations on it in different areas”.

Most practitioners preferred to see resources online, and not to have investment into hard-copies of guidance as these are little used in hard format. Having the guidance only on online form would also make them significantly easier to update and keep current.

The resources were described as being, generally well written and clear but also quite dense, too long as well as being out of date, too numerous and too process driven. The guidance to date has been process driven and not always effected ‘hearts and minds’ of all people across the workforce, or led to wide scale culture change. In general there has been too much focus on paperwork, specific forms and form-filling rather than ways of working.

Awareness of the long list of resources was limited, and in particular the parents who attended the focus groups were not aware of any of the documents, and wanted more parent and child/young person materials or for those already available to actually be given out by professionals to families. Others such as those in health, for example a Children's Nurse specialist who attended, were not aware of the long list only the short list.

Awareness and use of the short list of 6 core documents was high and people found them helpful as a starting point, or to 'dip in and out of' where needed. Some of the documents have been incorporated into training or circulated prior to training as background reading and e-training (although this is mainly the six short list documents).

Within the resources in general there were a few common themes about updating terminology or specific references. Many highlighted the need to remove references to ContactPoint, the e-CAF, Connexions and to pre-Coalition policy such as Every Child Matters, Children's Trusts, the workforce rainbow diagram etc.

Participants wanted a definition of 'the sector' and 'sector organisations'.

In relation to broad policy areas that need to be included, people wanted links to early intervention and safeguarding to be made more explicit especially in reference to Munro and the Allen/Tickell/Field reports on Early Help, greater emphasis and guidance on information sharing, more around the evidence base, highlighting the importance of linking to adult services, links to and guidance on Ofsted inspection frameworks, including partnership working with Academies and GPs, especially in light of new policy and legislation such as the Health and Social Care Act and Troubled Families.

One of the strongest messages about updating all of the resources was to move away from a child focussed approach to one that was whole family. This remains a recurring theme and will be further detailed below.

With all of the resources, there was a view that they appeared to be quite prescriptive and not recognising the range of different approaches and delivery that local areas were using in actuality.

"...I feel that the national guidance needs to reflect the diversity of delivery as one size does not fit all."

3.2. The long list

People felt that it is not obvious where these documents can be found – "they are hidden away in archived site with disclaimers". Many of the resources were useful to practitioners, "but won't be used unless their status is clarified". They are seen as generic and have become less important as local policies have developed. It was felt that all documents need a fundamental rewrite. "The documents are useful once you read them but they are too much for people to access frequently" and can seem "daunting" and "dated".

3.2.1. CAF documents (not CAF guidance)

Most are familiar with the various CAF docs but use their own versions tailored to local services, which include local contact details and protocols etc. People were aware of

and used the CAF Form, CAF Delivery Plan and the Pre-CAF assessment checklist. Local versions were often made of CAF leaflets for parents and CYP. The leaflets are seen as outdated in style and references to policy and ContactPoint. The leaflets are seen as less helpful these days as areas “can’t afford to print leaflets anyway”. It was felt that the CAF documents do not take into account the Single Assessment Framework. It was also highlighted that the guidance could be simplified and would need updating because it contains lots of dead web links and contact details. The awareness of and use of the CAF form in other languages was low.

Some are using a family CAF or the CAF as part of a shared family assessment – but it is important not to lose focus on the child.

“On first joining the targeted services division I was appointed to supervise and attend all of the Joint co-ordinators training.... As a result I did familiarise myself with the CWDC website and all of the paperwork available at that time. Staff also now access leaflets and docs through that web site. The web page was also given to all staff (multi agency) when attending the training. I have to be honest and say that since then I have only been on the website on a couple of occasions. However it is clear that we as a service are accessing the site regularly as I was able to find copies of the leaflets in one of my team rooms. It is also clear that when undertaking training staff are still directed to and given copies of the documents.”

3.2.2. Inductee guidance and managers guidance

Some practitioners had not heard of these documents. One person remembered seeing them but said they had ‘vanished’ from the CWDC website a few years ago. Where people had heard of them and used them, they were seen as very useful trainer packs, used in conjunction with a locally produced workbook.

3.2.3. Embedding integrated working slide pack

Most people had not heard of this resource although some said they did still refer to it. One respondent had and said that “the delivery by CWDC of this was very good – it made it simple and you could take it back to use in making strategy.” The recommendation was to keep this resource but add notes to the slides, and that the slide packs need to be PowerPoint (not PDFs) to be useful.

3.2.4. Impact on outcomes slide pack

Most people were not familiar with this but felt that it looks outdated from the description, e.g. ‘CYPP’ and ‘Monitor and measure’ (refers to the National Indicator set). People were not keen to update this resource in particular but would like some guidance on measuring outcomes.

3.2.5. More for less

Most people were not aware of these resources. People felt it could be useful but they did not like the name – perhaps it could be called ‘using resources effectively’? Again, some explanatory notes would help to explain the slides.

3.2.6. Securing buy in and engagement

Most people had not seen these resources, but it is perceived to be less useful now because the case has already been made. There is interest in having service development that is not just led by the strategic level. There was also a number of comments about the over-reliance on strategy and *“we have had enough of having millions of strategies!”*. Though others said they needed a new version as integrated working was still not owned throughout organisation. It was felt that these resources may also be more useful for people at the beginning of the process, and for partners such as the third sector.

A comment was made that this resource was no longer relevant because it should be the role of LSCBs to enforce buy-in and engagement

In updating these, it will be important to explain new governance structure of, for example, Health and Wellbeing Boards, Clinical Commissioning Groups, and not Children's Trusts.

3.2.7. Vision, values and behaviours

These resources can be useful as a basis to talk to other organisations and sectors to see where everyone is at. For example the Integrated Working Tool was easy to talk around and it got good feedback because it was simple to understand.

A suggestion was that the 'Vision, Values and Behaviours' slide pack could be incorporated into the 'Securing Buy-in' slide pack? Both contain some simple principles which are fundamental to developing integrated working.

Others who were not aware of this resource said that it looked potentially useful, whilst one response highlighted that “it looks like it's basically about managing change – people are used to change by now!”

3.2.8. Barriers to engaging with CAF process

There was very low awareness of this resource, and people also felt it would be less useful to them in their work – “Not useful – people feel they know what the barriers are” and “it's probably out of date because we're in such a different environment now, with less money to do things”.

3.2.9. Integrated working - review of evidence

Whilst there was lots of interest in the evidence base for integrated working and in measuring outcomes, few people were aware of this resource. Participants felt it would be a potentially interesting resource but that it would be useful to have up to date evidence on integrated working. Suggestions included updating this resource in light of Munro and seeing if newer information could be linked to C4EO or other best practice sites.

3.2.10. Multi agency working toolkit

This was felt to be a useful resource and some people had used it in their work. This is useful in ensuring that partners are using common language and can understand the

common themes in integrated working. There was a query about how practically this resource could be used and making sure the multi-agency approach was being implemented.

It might need to be updated to reflect changes in health as well as more of an emphasis on family work.

3.2.11. TAC research exec summary and report

There was not much awareness of or enthusiasm for this resource. People had read it but as it was not guidance, had not used it in their work. It was seen as useful as had a section on using the TAC approach for 11-14 and some felt there is a lack of guidance on this age group.

3.3. The short list

Generally it was felt that the short list had been well used but now had limited value in supporting further developments and the resources were 'dated now'. The language and the policy references were very old, and focus on why integrated working is needed. Practitioners felt that now what was needed was to not to know 'why' but how to practically implement - what to actually do, examples of good practice etc. The size of the documents was also seen as off-putting.

The resources are helpful to identify (easy signposting) good tools to use as not all managers in all agencies are aware of things like e.g. genograms that social workers are, Richter scale etc. Also "what is good about them is that they are strengths-based and you can hear the children's voice – keep these aspects and emphasise in any new documents". The recommendation was to "label as old and keep" and to simplify, merging practitioners' and managers' guides where these are two separate documents. This was linked to a view that some expressed that these resources and other training should be primarily targeted at managers to help them lead on implementing integrated working, not front line staff.

In relation to the specific documents themselves and their status, the majority response can be summarised as:

"Don't bother updating CAF or Team around the Child/Family (local guidance has been developed). A slimmed down induction workbook could be useful but in its current form, it isn't. Keep the Common Core as it is useful and used often by teams."

We address each of the resources in detail now below.

3.3.1. CAF Manager's Guide and CAF Practitioner's Guide

In general practitioners found the resources helpful and providing the case for change for different partners and agencies, though this could be brought out more explicitly to address the "what's in it for me" motivation that some partners may have.

As highlighted above, different local CAF forms are used by practitioners, so this makes the CAF guides less relevant and less helpful and references to the CAF form should be removed. However people liked to have it there so that they could point others to it when

delivering training, which may spark further questions and reflections for discussion. Linked to this there was a suggestion to make the guides more interactive, perhaps by having boxes to pose readers questions, so it is an interactive learning tool. There could be more information on completing an assessment and the importance of fully involving the child/young person as well as clear information that the CAF is an assessment and not a referral.

Overall comments highlighted that these were quite long documents and do not need to be two separate resources. Instead, it was suggested there could be a resources with that was *“a key guidance booklet incorporating key principles, processes, core manager responsibilities, core practitioner responsibilities.”*

The focus should move towards a whole family approach – Think Family, and this may mean changing titles and increasing emphasis.

“Most needs are not in a vacuum. Adult needs are often the cause of child or young person’s needs.”

This whole family approach needs to include adult services and integrated working across directorates including adult social care, housing etc. Directorates and public health services should be encouraged to be responsible for holistic assessments, not single issue/person/patient assessments. CAF can also be seen within a broader view of safeguarding as well as more of an emphasis on early intervention and prevention. There should be specific examples of how CAF could be adapted for use with partners. Linked to this there was a feeling that the role of non-social workers could be strengthened. Practitioners also wanted more guidance in embedding CAF across partnerships.

People wanted to know how CAF related to single assessments and SEN assessments, as well as understanding the overlap and links with social care assessments.

The guides could also set out the expectations relating to support and supervision and highlight the importance of supervision. In particular, the importance of supervision when making professional judgments about the assessment being made as sometimes these assessments may be complicated and involve some aspects of safeguarding.

Some authorities are moving away from CAF to other multi-agency whole family assessment tools and information on these should be included to support cross boundary multi-agency working.

Specific sections that respondents found particularly useful include:

- CAF and Integrated Working Continuum of Needs and Services
- How to support staff to use CAF
- The process of the CAF section
- The section on managing partners.
- Introduction to the CAF, CAF Process, Role and Responsibilities of managers
- The section that shows where CAF fits with wider children’s services.

- Expectations for/from other agencies
- The roles and responsibilities of managers
- Child's voice
- Who will do a CAF and when, what makes a good assessment, how to do a common assessment
- Consent
- The holistic process of the CAF from assessment to planning implementation and review.
- The section on information sharing.
- The link to other assessments.
- The reference to the 'windscreen model'

3.3.2. Team around the child and Lead Professional Managers and Practitioners Guide

There is a need to reframe the context within which these guides can be used and will be most effective. People wanted greater emphasis that this way of working is efficient (in relation to cost and resources) and is about early intervention and safeguarding.

Respondents wanted to see more information about skills development for the key-worker type role and clarity about the LP role – *“make sure that the Lead Professional agenda is clear about the role in terms of the drive towards having an impact on outcomes.”* And *“more information about skills and effective working as a LP and how managers can and should support especially when there are gaps in service provision for the TAC/TAF meetings”*.

The guidance also needs a broader spread of information on individual agencies assessment tools and needs information on ensuring they match up and authorities can share information with each other as children and young people move areas. Some also highlighted the need to strengthen the early intervention/prevention aspects of these resources.

The status of the CAF and LP roles should also be strengthened, by *“presenting the CAF process and LP role as essential to internal business processes.”*

Specific gaps in the guidance respondents referred to included support for situations when the LP is a member of school support staff, where the LP goes for support, how to manage complex CAFs, engaging children and young people in the process, more on information sharing as well as emphasising that practitioners can do this role as part of their everyday practice, so it does not seem too onerous. People wanted to see highlighted wider expectations about who should be responsible for doing CAF work.

In relation to Team Around the Child - Practitioners are increasingly referring to Team Around the Family now, and this needs to encompass the whole age range of 0-19 years.

Local guidance based on the TAC guidance has been developed and is used rather than these guides, however some top tips for implementation could be useful – based on user experience (ie what works for the family).

People said they did not see the need for two versions (for manager and practitioner) – one would be enough – ideally focussed on the practitioners

It was suggested that it would probably would not be helpful to refresh this guidance as teams will be very focused on their own local guidance.

“Even if updated, we would probably continue to use our own guidance. It might be useful to boil it down to the principles and use as a starting point for areas to do their own.”

At a practical level, people wanted more help about the Team Around the Child and family meeting.

Specific sections that respondents found particularly useful include:

- Annex c, useful to reference for training purposes.
- Inter-agency awareness raising
- Managers role and responsibilities
- Roles and responsibilities
- The team around the child and lead professional
- The roles and responsibilities of managers
- The role of the lead professional, the skills needed and the section on supervision.
- Section 3 Being a lead professional was helpful in outlining skills etc

3.3.3. Induction Standards Workbook

Most people are aware of this document and some have used it. Feedback however has been generally negative with participants feeling it is “far too big and although important it is unworkable as it is”, and “dreadful and massive – too basic for newly qualified social workers and too long”. It was felt to be more relevant when there was a coherent ‘children’s workforce’.

One participant had used the workbook as part of the implementation process in their organisation – “it felt like a box ticking exercise”. Although another felt it was really useful as a cross-organisation resource:

“Induction standards used with all new staff with managers and vocationally assessed on site during 6 month probationary period. Also useful tool to support the development of an initial learning plan for individual staff.”

Some had made their own versions – a participant from a local CVS organisation had a 10-page version they made on A5, which integrates the Common Core too, as well as another example of a slimmer version that has been developed for Wales. “I have used

the workbook extensively as a guide to writing my own local common induction workbook and planning the induction process.”

In one area, they used to follow it but found that it was not being taken up or only in pockets. In another area it was confusing for the 3rd sector to have to explain the Common Core and then the Induction Standards as well.

There was much discussion about the links between the Common Core and the Induction Standards and how to most effectively use these two resources. Some felt the Common Core was better and could also be used for induction. People would like to use induction standards as a tool for review too – for people who have been working in a service for years. People did not like having induction materials separate to materials for Continuous Professional Development - a streamlined process that is less onerous.

One suggestion was to have the Common Core guidance, Common Core training, and a Common Core booklet to show what training people have done. That could be used for induction and ongoing CPD (not just for training, but also for shadowing and refreshing).

It may also be useful to have separate documents for induction (for practitioner and manager) because it makes each of them smaller, which is better.

The content of the workbook was seen as being relevant and people really valued the sections to support reflective practice – although it was highlighted that this should happen in supervisions anyway.

Respondents wanted to see more in the guidance on integration with health, a strengthened role of non-social workers, information about step down from social care and reflect the emphasis on the early help needed as a result of the Munro review. It also needs updating to reflect current policy context and the new range of qualifications.

Specific sections that respondents found particularly useful include:

- Local development work
- Assessment t awareness raining
- The standards and setting out the competences

3.3.4. The Common Core

Common Core received positive feedback with high levels of awareness and use of the resource. “I tend to refer to it when someone says ‘that’s not my job!’”

People liked it and felt it could be more widely used in the wider workforce for example by teachers and nurses as well.

Currently it was referred to and used in induction and training and it is useful reading when practitioners are first introduced to the CAF. It is seen as still being a vital resource as a core set of principles – “because it’s a fluid workforce, so with Common Core then it doesn’t matter if they change role, they share the basic principles of the Common Core.”

It is used for developing training programmes and job descriptions for staff – it ensures everyone qualified to the same level. One area said that “our learning programme is

based completely on the common core so we do basic, intermediate and advanced learning in respect of each element of the Common Core.”

There is a question, however, about who is responsible for funding this training – if everyone involved in children’s services should be trained to this level does the burden of paying for it fall to local authorities?

It is not out of date and still remains very helpful though some were uncertain as to whether it’s still current or supported by central government – there is a lack of central guidance on what should be used in training. It could be useful to have more guidance about how it could and should be used (for example for induction programmes etc).

People wanted to see it re-launched and perhaps even to sit at the front of all the guidance. It was felt that the 2010 refresh was a positive development, and a further refresh is not needed, however it should be ‘promoted’ by CIB and kept under review for relevance.

Gaps include more guidance on “what happens when there is a job change – and the worker has prior experience.” As well as advice on the skills needed by the future workforce, as the workforce changes. There also needs to be more clarity about how the Common Core links with the CAF, TAC, Interagency-working and the induction standards – “it always seemed to sit on its own”. Some easier signposting, such as reference numbers would also allow practitioners to cross-reference relevant sections of the Common Core to local training and guidance. A challenge for the future for this resource would be to identify any implications for qualifications if the status of the Common Core was to be reduced or changed.

4. Gaps and what further support is needed

4.1. General feedback on support the sector needs

There was a strong feeling that much progress had been made in implementing integrated working and that this should be built upon, not replaced with new guidance or direction. What is needed now is updating and reinforcement.

“Treat the next stage as the next stage of the journey, not a new start. Don’t change things – This is the refining stage”.

This is especially important to keep partners such as schools on board.

At this stage, it would also be helpful to acknowledge the achievements to date as many people have moved a long way through the journey already and a lot has already been learnt.

There was a request for CIB to publish their ‘vision’ for integrated working – what do they want to see in this area. People were worried that it might lose momentum if policy and vision was not restated from the centre. So there is a need to ensure continued commitment from the top. There is a role for government to acknowledge this – do something to keep people working together in a shared vision. E.g the SEN green paper requires a single point of assessment for some children, so it does put education in the

position that they cannot remain separate from social work etc. I.e. that particular legislative requirement *is* helping to make everyone work together.

“This issue is too important to lose and is THE way in which we must be working and needs central government to continue to support.”

There was also a strong request for a mechanism to share best practice and provide examples of how other areas are implementing integrated working, and this could be a role for CIB (see below under ‘methods’ for more on this)

4.2. Assessments and thresholds

Practitioners wanted more support on carrying out assessments and “deconstructing it in the context of the CAF”. There needs to be some core assessment principles to enable a common understanding and language.

More guidance would be useful on how the CAF works at the top tiers (2/3) and the threshold with social care and a need to start seeing social care as part of the continuum of care as part of the process particularly as thresholds are raised.

There was significant discussion about thresholds and the need for more clarity and even a dedicated resource on this.

Related to thresholds is the question about roles and responsibilities which practitioners would welcome some further clarity about. So addressing the issue of who should instigate and implement a CAF and record what happens and should this be a defined role. Some professionals ‘don’t think it’s their role’.

The Pre-CAF to have a ‘consent to share’ element so that services working indirectly with children can use this as a referral to children’s services for someone else to pick up on the CAF assessment A process for registering the PRE-CAF, even if it is decided a CAF is not necessary so that this can be monitored.

And more information about using CAFs to target support where needed e.g. domestic violence, substance abuse and a de-escalation process from Children In Need to CAF and vice versa.

In general, there was an overall need for more support for practitioners in completing good quality assessments - more on the ‘how to do’ rather than the ‘what to do’.

4.3. Information sharing

Participants highlighted the need for more guidance on information sharing as this is still seen as a barrier to integrated working, especially in relation to working with health partners. This was felt to be due to different protocols on data confidentiality in health and in the local authority systems.

This is felt to already exist but may need to be more strongly linked with CAF. “Without good information sharing practice CAF will not happen properly.... The link has been a little lost as responsibility for information sharing guidance remained with DCSF (as was) and did not pass to CWDC when CAF / LP went there. The strong link needs to be restored.”

There was also discussion about the implications of integrated working for storage of different forms and information.

“A multi agency approach necessitates no one agency has total control over storage and transfer of information. There are potential gaps and risks to information sharing during transfer from authorities who do not have similar computer systems and IT software”.

Another key aspect of information sharing that people wanted clarity over was around consent for information sharing. Practitioners said they would like a factsheet showing the good practice *and* the legal minimum standard (for example similar to the Fraser guidance summary).

Information sharing becoming a legal requirement would also help in relation to adult services, as well as with schools.

4.4. Culture change

Many practitioners highlighted that culture and behaviour change was more important to the success of integrated working than documents, forms and processes.

“We need a simple framework that embeds a way of working – encourages people to see working together with joint plans as good practice not an extra.”

As part of this, they wanted clear messages supporting joined up working and culture change, emphasising empowerment and reducing dependency that will encourage practitioners to change culturally and work with families.

Linked to this there was still a feeling that securing strategic buy-in remained difficult and that this was sometimes hindered by competing national priorities.

“There are people at the bottom and top who believe in this. But nationally – other priorities coming from the top are not allowing people time to do this.”

There was lots of discussion about visioning being important and ensuring integrated working remained a strategic priority in a local area amongst leaders, but more significantly that the vision was linked to a plan to translate it into action that would be implemented. Support for senior and operational managers on this would be very helpful.

4.5. Methods of support and guidance

There were a range of practical channels of communication, types of resources and recommendations about further support on integrated working that people wanted:

- All new or revised resources must be badged jointly – DfE/DoH/etc ie all big central bodies and endorsed by relevant sector organisations and unions.
- An overview of all of the guidance documents in one place with references
 - C4EO produces lots of guidance and CSP and LARC - there can be too much and it can be overwhelming.
- Case studies with real examples of challenges faced and solutions.

- Examples of best practice in influencing universal provision and work with partners e.g. real examples of how to get schools well engaged or health. Also examples of what not to do welcomed.
- A pack of case studies dealing with different perspectives of challenges and interventions for different audiences would be useful.
- focusing on outcomes for children
- giving examples of best practice which re-enforce the common principles
- But case studies that help practitioners know what is good, sustainable, cost effective and adaptable to local areas. *“Would value opportunities to discuss it and ask, how does that work? How can I adapt it for my organisation? What can I cherry-pick that will work for me?”*
- A jargon buster
- Short films would be better to get the information across
- Knowledge Hub. Would like a group on Knowledge Hub about integrated working, to have everything in one place and searchable. And be able to put things on it yourself too – to share tools etc which you have devised and used. There is ‘Learning Pool’ but you have to pay. People also use Research In Practice.
 - Most participants were not aware of the LGA Knowledge Hub. The CWDC website was viewed as having been very useful and gave up to date news. There is still a need for something like this. Although there was also a plea for not just virtual support (see next bullet)
- Face to face opportunities for sharing learning – *“we would like ways of sharing information with other organisations – it would be more useful than having more paperwork.”*
 - Having sector development experts (such as from CWDC or Skills for Care) visiting local areas and delivering training and support in a face-to-face setting was seen as valuable. Face to face discussions are also very useful to communicate what is happening. For example events at which local authorities can present case studies and ask questions. e.g. learn about how each other uses MASH
 - Previously there was a national forum which was useful – perhaps something similar now for best practice sharing would be helpful.
 - Peer challenges for senior managers are a good opportunity to learn – should have more of these for middle managers. Like Aspirant Leaders programmes.
 - Facilitate sharing and learning opportunities for boroughs to learn from each other. Also a comment that most things are done on a regional basis but this is not always the best grouping for some authorities.
 - Find some champions e.g. headteachers – they can engage schools. A local head champion will be more useful than a national case study.
- Linked in to inspection regimes and target frameworks

- Statutory requirements make senior team engage in problems and sometimes most action happens after a visit with statutory recommendations - in this context national guidance alone is not that helpful. Developing tools that meet everyone's priorities are important. Linking integrated working to an inspection visit is simple for everyone in the organisation to understand the implications of – it speaks to those delivering the service as well as the financial team etc.

4.6. Whole system approach

There was much discussion about how to improve multi-agency working and work with all partners on CAF and integrated working.

4.6.1. Schools

In particular, participants wanted support to improve engagement with schools, especially academies, and with schools as commissioners, and guidance for schools about working with partners:

“There is a need for additional guidance for schools (including Academies and Free schools and Federations) regarding why it is important for them to engage. A link to Ofsted would help. Need to get schools to see what is in it for them.”

Different schools can present different challenges with much relying on individual headteachers. In addition the investment in pastoral support and the culture of the school towards pastoral care can make a real difference. Some primary schools are well engaged and others not – often citing lack of capacity to complete CAFs and one mentioning union opposition to teachers being asked to complete the CAF as teachers not qualified to do so.

It would be helpful if it was an Ofsted requirement for schools to focus on these issues as currently the inspection regime does not (for example a school gets a better inspection if 'difficult' children are excluded) – guidance on this would be helpful.

Pastoral staff can make a real difference – one area reported a scheme for transition from primary to secondary school, making the sure the secondary was aware from the beginning of any issues children may be facing so appropriate support can be put in place. Case studies on this kind of successful intervention could be useful to help best practice sharing.

There is debate with schools as to where responsibility for the child outside schools lie – for example one case study included in one of the guidance documents cites a headteacher completing a CAF in a child's home whereas it was felt that many headteachers would not see going outside of the school as their responsibility. How to move towards this would be really helpful

It is also not always clear what happens after school has completed a CAF – it can become just a referral so social work so pushes the responsibility away from the school again. The aim of improving the management of risk in the community is not always successful – often the responsibility is again pushed back onto social work. An example was given of scheme where locality teams were introduced to work with schools – rather than the teams supporting schools to manage the risk locally, the teams came to be

relied on the schools and it was a costly way of delivering care that was not necessarily the best use of resources.

In relation to central government support that is needed, it was felt that the government has made it clear that schools are about attainment. But they should be about wellbeing too.

“The message from central government should be that schools should work towards wellbeing too, working with LA, having social care representation. The message on attainment is not helpful because it doesn’t encourage schools to help work with difficult children, or at least to not obstruct children’s services!”

4.6.2. Health, adult and social care services

Similarly, support to work with health and especially GPs. A tool for GPs should emphasise the shared goals and be transparent about availability of funds as well as understanding how to use local health priorities to show health colleagues how CAF can help.

There is also a gap in how to engage with adult services including the transition from children’s services to adult’s services. The key problem area is how to link between children and adults needs within the same family. Also, a need for more training of children’s workforce on working with learning disabled parents.

“Making links with other services is useful for cross-referencing adults known to adult services to children known to children’s services. ‘People’s departments’ are not always actually integrated! You only need to join up where it’s valuable – so children’s services just want to link with domestic violence, substance misuse, housing, mental health.”

There was also a need to understand the interface with social care and youth services, especially where there may be separate assessment regimes and how to start thinking about single assessments.

4.6.3. Early intervention and a holistic model

It was felt that in the current guidance, the links to early intervention and safeguarding are not strong enough and need to be made more explicit (especially in relation to the impact of Munro).

“Services can only focus on level 3 at the moment. This is short-sighted and unsustainable. Early intervention is really important but actually sometimes there are families that come from left field, who were not on your radar – so you can’t do early intervention with them.”

A number of areas were developing new early help or preventative services and welcomed more help in embedding these. In particular, practitioners felt that “CAF is redundant now because early help has developed a lot so people are already doing this”. The issues arise where early help is identified as being needed and then a CAF process is needed on top of that. For example, in one area a school supported by a locality multi-disciplinary team may raise concerns about a child. This would, with the permission of the parents, lead to a meeting to discuss what early help might need to be

put in place (often chaired by a social worker or SENCO, in the school and with the child/family):

“It’s like doing a pre-CAF, but instead the actions needed to be taken are very clear to all. Also it is frustrating for the school as in some cases they still have to do a CAF after the meeting even though the next steps and actions are clear to everyone.”

So a shared multi agency tool for sharing information at the early help stage that could link with information required in a CAF would be helpful.

Another area said their new early help service that was being set up used a form based on the Pre-CAF.

Also, practitioners are finding that a lot of what would have traditionally been accessed via a CAF, or led to a CAF is done via Early Help.

“Sometimes in the past you may jump straight into a CAF. Now there is a much more creative shifting down to the early help level, starting often just with an informal conversation as opposed to a formal assessment.”

Having guidance on information sharing across the whole system at the early help level would also be welcomed. For example, how to support a probation worker working with an adult offender who has a family to be able to flag any concern or start the process of thinking about early help for the child. Some areas are using their own local versions of ContactPoint – simple databases that can allow different agencies to see if multiple issues have been raised in relation to a family/child.

This also links with the need to link early help for the child to be an early help for a family. One area’s new early help services will be a family based service for children 0-19 years old.

Guidance/checklist needed on which prevalent key issues indicate that the family likely to be on a downwards trajectory. ‘Concern’ is too vague. In particular, guidance on what are the pre-requisites of an effective early intervention.

One authority is focusing on maternal mental health which is seen to be a good focus and supported by the evidence base. It would be helpful to know what indicators for concern are actually important and meaningful because otherwise there are so many different indicators, it is hard to know how to judge success.

This aspect would also be supported by having a clear understanding of models of integrated working across the spectrum of need and improved links with statutory services and an overview of integrated and targeted services available for families at different levels / tiers of need.

4.7. The voice of the child/family

People felt there was a gap in relation to the voice of the child and family. *“Service user involvement should be more explicit in the resources. For example, involving service users in deciding outcomes and in identifying what is an outcome”.*

There is a need for frontline workers to be engaging with users and recording their views and sharing. This could be done by working with children, young people and families to understand their pathway through the system and how it could be better integrated.

“Guidance on developing pathways – children not having to ‘tell their stories’ more than once, having holistic support. You could develop one and test it with a Youth Forum or similar. Knowing what is good practice in how to involve people. Whatever tools are used must be tried and tested – and easily implemented.”

Something missing from the guidance is involvement of service users in service design, and measuring of impact. Working for Change has done something recently around service user involvement in redesign, especially around children with disabilities which could be highlighted more.

So the recommendation was to have support on doing pathway mapping with the involvement of service users and measured against their experience of the pathway – is the ideal pathway what they are actually experiencing?

And this could help children and families to navigate the system. Services for families come from different grants – there is a big ‘maze’ of people working with families, lots of different pathways and sometimes 9 or 10 different professionals working with a family. Therefore some guidance on mapping pathways would be useful setting out what is the basic info that families need about the service to enable them to navigate the system and know what the role is of each person working in the service - so that parents do not get confused. It would be good to have a template aimed at service user so they know who is who.

4.8. Linkages with other policies, legislation and frameworks

There is a need to have guidance on the implications of integrated working for inspection regimes and frameworks in health and social care and especially Ofsted inspections. For example, having a guide for head teachers and children’s centre managers on how to integrate CAF information for inspection.

“The new multi agency Ofsted inspection framework must be threaded through everything from now on... but with a balance between making integrated working a key message through inspections, and not inspecting to ‘old policy’ standards”.

New resources must also take into account Munro, new SEND agenda, 2 year old checks, children’s health outcomes framework, Troubled Families agenda, payment by results etc.

4.8.1. The Troubled Families agenda

There was also lots of discussion about more clarity about how integrated working fits in with the Troubled Families agenda.

It was highlighted as concerning that the Troubled Families agenda does not look at distance travelled. “It doesn’t encourage measuring of meaningful data such as, ‘is the child attending school a little bit more’? Troubled Families doesn’t have the right indicators – which is frustrating.” For example in Troubled Families, ‘adult crime’ as a

factor is excluded. Children who have permission not to be in school are excluded – that's also not helpful.

Some support about this would be helpful - ensuring integrated working is a key part of delivering on targets for Troubled Families funding, and not sidelined because of this new initiative.

"It's important for the key worker to be able to say to the middle and up to senior level, 'this target is not working for this family. Can we do something else?' Even if it means dropping a statutory target."

Some also highlighted the term "Troubled families" was not acceptable to them and local areas were using alternative terminology such as 'families with complex needs', 'family key work', 'thriving families' etc.

4.9. Workforce development

4.9.1. Levels of workforce

In the focus groups a number of participants highlighted the different levels at which more support and guidance on workforce development to improve integrated working would be beneficial.

Different levels of workforce:

- *On the ground* people will work together and they always have done.
- *At the top*, people will talk to each other too – because it's quite easy in theory to say 'we should work together'. (But senior managers do not necessarily consider the implications of this and how it will be operationalised).
- *Middle managers* – they are afraid because they get squeezed – so they tend to build silos and try to protect themselves. What they need is stability. Not more paperwork.

"The top level of management is getting thinner so those middle ones need to lift up their heads and translate the vision down from senior managers to their frontline teams. Those managers are up for it but the day job is still not allowing them the capacity to do it."

Guidance should help them understand what they can drop in order to embed integrated working. They also need support to get better at collaborative working, within organisation and across a region. There was also a request for middle management to be supported with supervision (see below).

4.9.2. Training to use CAF properly

Participants wanted to see more guidance and training with practitioners where they look at completed CAFs and have to assess them critically. Having this analysis training and being able challenge what the parent says or wants to write on the form would be an important part of CAF training.

“CAFs – sometimes practitioners write things but don’t analyse it with a critical eye – and then say, ‘this means that we should investigate further or that a CAF isn’t what’s needed’”.

Accountability is needed for undertaking CAF and for supervising those doing CAF – clear governance needed. There is a need to encourage managers to check outcomes of CAF in supervision on a regular basis.

4.9.3. Training

Status of integrated working training

More guidance on training requirements would be helpful – it should be clearer what training different staff groups should have. There is also need to be clear about what the organisations expect from their staff.

There is a problem with training getting out of date. However, it was felt that CAF or assessment training should be mandatory like safeguarding, and updated on a regular basis. Otherwise people may be too busy to prioritise it. Integrated working should also be part of initial professional training for e.g. teachers, nurses (i.e. before induction stage).

This could also be an opportunity to redefine what training is seen as – not just formal training but things like shadowing are important. Include the value of shadowing and mentoring across services to encourage the culture change.

How training is delivered

Multi-agency training was agreed to be very helpful. Most courses are multi-agency, or are moving in that direction. It helps with the vision – because it shows people where they fit with others around them. But it is also important that they are delivered in a multi-agency way as well as being access by different agencies.

Not just relying on ‘trainers’ to deliver training, but asking lots of roles to give training – Train the trainer for delivering CAF training to different disciplines was found to be well received and effective.

E-learning materials – there is a problem with that not always suiting everyone’s learning styles. However, it can be ‘better than nothing’ and can raise awareness.

Content of training

Training should cover the continuum of development from induction through to ongoing and reflective development.

Another key training need is understanding thresholds. Training regarding outcomes approaches would be useful. Engagement skills – how to work with difficult families

A tool to be used with children and families would be of value. A parent present stated that training for parent forums would be valuable, so it would be useful to embed CAF training/information into all other parent programme materials.

It is also important to support front line social work support managers in management particular around performance management and general management training.

4.9.4. Supervision

In addition to the guidance already provided, it would be really helpful to have some around requirements for management supervision. Currently this works well within social work and health but there were concerns about the standard of supervision practice within some specific areas (play workers, those working in early years and nurseries, parent support staff and those working in small provider organisations).

It would be helpful to have an appropriate framework for all roles, e.g. in social work integrated models – frequency of supervision, linking to appraisal, team meetings, recording team meetings, reflective and critical practice, effective escalation policy/process, what to do when someone in the team isn't doing their job properly etc. A framework is also needed to include those in 'lower level' roles with complex families.

The difference between the support which is often provided by line managers (emotional support) and that available from safeguarding professionals (technical advice) needs to be recognised. It is not clear whether all managers are qualified to provide effective supervision to staff (as posts have been cut, management roles have become more generic) – guidance around this aspect would be helpful.

Guidance also needs to recognise that supervision means different things to different people, e.g. in schools it's not 'supervision', it's 'CPD'.

Supervision of headteachers who are lead professional – guidance on who can provide supervision to them and what skills they need.

The issue of observation of professional activity (as for teachers) is a skill that will need support and guidance and possibly training. For those doing the observation and those receiving it, but this needs to be linked to performance management and appraisal.

Clarifying the practitioners expectations would also be good – *“people will want to know how does my appraisal link to this, how will I be supervised and supported, what about training, what do my union say?”*

4.9.5. Upskilling the universal workforce to spot problems in families

In terms of early intervention, resources are diminishing. So it's important to upskill the universal workforce. For example, in a health setting a practitioner who sees young children e.g. when attending the clinic for the baby's 2-years immunisation, the mother has a black eye and the nurse does not mention it. So, how to train those frontline workers – what questions they could ask when they think something might be wrong; how to pick up on signs of poor maternal health. These skills and tools have to be a key part of the wider workforce.

Therefore it would be useful to have some really current evidence around what that workforce should be looking for in relation to early intervention? There is lots of evidence but what would be useful is to distill it to what's really important, such as 'the biggies' - substance abuse, maternal mental health, domestic violence and finances (and sexual activity of YP?).

One area has a tool/list of questions – like a screening tool - that could be used to ask the tricky questions to identify what's wrong. For practitioners it's about having both the wording (how to phrase the question) and the confidence to ask the questions.

4.10. Impact on outcomes, evidence base and cost savings

4.10.1. Building up the evidence base

It was felt that national guidance on the evidence base on integrated working is generally not shared well and is hard to find and access. People thought that it was a key role of the government to provide evidence and that CIB could have a role recommending best practice and what is working well and advice for improvement in areas where things have been identified in inspections as not going that well.

“There is a need to be careful what good practice actually is though – some local authorities are just good at selling their successes – the CIB would need to be able to get under what people are saying to identify real best practice.”

There is a need for support around having high quality and consistency of experience which could be a role for CIB or government.

“There are differences between local authorities – how would a service user experience a move from one LA to another when they are developing their own ways of doing things?”

It is also important to share where things haven't worked to stop them being repeated.

4.10.2. Evaluating impact

Guidance would be helpful around evaluating the impact on outcomes of integrated working. This has happened around individual FIPs but it was felt that this was not effective. Support is needed to be able to evidence outcome change.

An independent evaluation or one undertaken by someone from a different area would be helpful. Evaluation of services is important so teams need to prioritise and make the time to do it. Auditing for the sake of auditing needs to stop and instead tools are needed that actually show impact. A tool for doing multi agency audits (LSCBs have a tool for this) and the LARC work could be a helpful resource but teams would need support to be able to use their methodology effectively.

“Big challenge for us is how to measure outcomes? You can measure the number of children going into care, do a negative costing outcome. Councillors tend to be more interested in this type of data. BUT practitioners are more interested in distance travelled.”

So, the suggestion is to collect some hard data e.g. a cost calculator showing numbers, but to also do some kind of distance travelled measure. Distance travelled was felt to be essential for showing benefits of early intervention.

People said they would like new guidance that clarifies the difference between outputs and outcomes, as well as a 'scorecard' to show progress and include input from parents

& children. For example having a tool to measure where family starts at beginning of CAF and how they are doing e.g. Family star.

Most agreed that the voice of the family can be a very important tool when evaluating services and support around this would be helpful.

4.10.3. Cost savings

LARC guidance showing cost savings for integrated work is useful and there should be more guidance like this – at the moment there is not anything specific that helps to cost the benefits of using the CAF and integrated working. The National Negative Costing Tool is useful for FIPs – it identifies savings easily but is much harder to actually deliver these.

It seem that savings have just been taken from services and not re-invested in integrated working – case studies showing how saved money has been invested to improve outcome would be really helpful. They would have to show how cashable savings have been made and not just potential savings identified. How these savings are allocated between agencies is a challenge – often integrated working may deliver savings for another agency (for example social care provide the investment but savings made by the police).

So some central policy direction is needed – particularly around budgets between agencies and how savings should be allocated and how budgets should be spent.

“You need to be transparent about the resources that LA and schools & other agencies etc have, because sometimes schools think that the LA is just reluctant to spend. You need to say to schools, ‘This is the money we have and we together need to decide where to spend this.’ Make sure everyone sees it as ‘our’ issue. So that schools don’t think that LA is ‘hiding’ money from them.”

4.11. Integrated commissioning

There was discussion about the extent to which improving integrated commissioning would help improve integrated working.

“Does the fact that integrated provision is happening mean that it will ‘force’ integrated commissioning? Do you need integrated commissioning in order to successfully deliver integrated working?”

Examples were given of good examples of integrated commissioning leading to integrated working such as setting up domestic violence partnerships and practitioners welcomed having a written case study of good examples in order to show others how it works.

Integrated commissioning would help in terms of showing cashable savings that are made by one agency but actually saved for another agency. But sometimes difficult to sell the concept, e.g to say ‘let’s pool our budgets’ - sounds vague and people aren’t really sure what’s involved. Clarity on what integration involves – not one single meaning but there’s a wide range of examples e.g. pooling budgets, e.g. co-location.

In relation to guidance on integrated commissioning – there is a lot out there and the question is how it relates to integrated working. People felt that it would be helpful to look at commissioning to see where the barriers to integrated working could be solved by commissioning and also help remove duplication. This could be done by mapping services that are being commissioned and showing pathways, seeing what works and what does not, where there is duplication or is something new needed to fill a gap.

However, this is complex - there is a lot of unpicking to do around roles and responsibilities and governance. So there is a need for some guidance to explain it how it all works.

4.12. Other suggestions for guidance

- Legal guidance – for example where both parents (separated) have responsibility but the father agrees to a CAF and the mother does not – what do you do?
- More about complaints procedures.
- Recognise that this process needs support from Business Services and administrators to arrange meetings etc.
- Evidence (in one easily accessible place) of its cost effectiveness and disseminate progress reports/results from Munro demonstrators.
- Integrated working is mentioned in draft Working Together, but not in section on assessment. So ensure integrated working is well represented in final document.

Key Findings

- The resources provided a useful starting point, but most areas have developed their own materials.
- The resources would be more helpful if streamlined and updated, in particular, linking them to other policy areas, such as the early intervention and safeguarding agendas.
- Awareness of the 'long list' was limited. The exceptions to this were the 'review of evidence' and the 'multi-agency toolkit' which were felt to be useful.
- The short list had been well used but now has limited value in supporting further developments.
- Most areas now use their own local guidance regarding the Common Assessment Framework / Team around the Child/Family. However, reference is still made to aspects of the CAF resources.
- Some use is made of the 'Team Around the Child' and 'Lead Professional Managers and Practitioners' Guides.
- There is some use made of the induction workbook but it is not popular and would benefit from stream-lining.
- The Common Core is used extensively and is popular.

- More guidance is needed on information sharing. This is still seen as a barrier to integrated working, especially in relation to working with health partners.
- Further guidance on workforce development, measuring impact and measuring cost effectiveness would be helpful.

Key Messages/ Next Steps

- The existing resources do not need to be updated and there is not an appetite for new and further guidance or reports.
- Future support needs for the sector should focus more on face to face and case studies and regional networks as ways of learning
- Specific areas for future support from CIB include case studies about supervision, voice of family and measuring impact and cost effectiveness
- Guidance on how to support the sector to move towards delivering effective early help including developing the culture and processes to support this approach. This is particularly relevant given the proposed multi-agency inspection of child protection where the effectiveness of early help will be a primary judgement.

Appendices

Scoping Interview guide

Introduction

Thanks for speaking to us. Your contact details have been passed to us by CIB who have commissioned OPM and IPC in partnership.

Purpose of this phone conversation

As you may be aware, the Children's Improvement Board wish to consult with practitioners, policy colleagues in government departments and stakeholders about a range of resources produced by CWDC regarding integrated working. We are conducting a small number of telephone interviews to scope out the key issues and ensure our consultation activities are as appropriate and effective as possible. Think you need to describe the plan for the consultation events- ie wider survey and focus groups on specific documents. The purpose of this work is to review and update a number of core documents which were developed by CWDC and have been handed over to CIB.

1.1 Questions

1. Briefly describe your role and responsibility for children's workforce development and integrated working.

Policy drivers

2. What is your view of the current status of integrated working, including drivers, challenges and opportunities?

Probe: what are the key policy initiatives that have recently arisen or will in the future impact on how integrated working is delivered? For example the troubled families agenda, SEN green paper and personal budgets, Munro recommendations, new initiatives in safeguarding, the new health reforms etc.

Article I.

3. Are there any implications of these policy changes in particular for the following:

Practice and delivery in use of CAF, TAC and induction.

The language and terminology used in guidance for the workforce around developing and implementing integrated working.

The long list

4. What is your awareness and use of the resources both, historically, from CWDC website and, currently, from LGA Knowledge Hub.
5. Are there any gaps in these resources – how comprehensive are they?

The short list

Looking at the smaller list of key documents:

1. What needs to change in these key documents, in light of changing policy and practice?
2. What is your view on how much these resources are currently used in the sector? Do you know of places where they have been used effectively and have shown changed working practices and positive impact?

The consultation

3. Who do you think should be involved /invited from the LA and partner agencies to take part in the consultation. Are you able to identify key individuals from a region?
4. Are there any particular issues we need to be aware of when carrying out this consultation exercise? Probe on good practice areas. How can we ensure we include schools in this consultation?
5. Are you happy to be involved in supporting this exercise on an informal basis. For example by disseminating invites to focus groups thorough your networks? Commenting on emerging findings, being involved in policy workshop etc.
6. Are there any other comments you'd like to make?

Thank you and close

Organisations attending focus groups and online survey

Focus group organisations	Online survey organisations
Aim 1 Voice	Bath & North East Somerset Council
Barnet Council	Bedford Borough Council
Bath and North East Somerset Council	ES Trust Community Interest Company
Bedfordshire Council	Bradford council
Bevan Associates	Buckinghamshire Children's Services
Bristol City Council	Central Bedfordshire Council
Buckinghamshire County Council	Derbyshire County PCT/Derbyshire County Council
Bury Council	Essex County Council
Bury Parent Partnership Together Trust	Family Matters Institute
Cambridgeshire Council	Gloucestershire County Council
City of London Corporation	Herts County Council
Commissioning Support Programme	Hull City Council
Darlington Council	Independent
Derbyshire County Council	Kirklees Council
Derby City Council	LB Merton
Derby Homes	LGA
Durham Council	London Borough of Richmond upon Thames
East Sussex Council	Luton Borough Council
Essex County Council	Newcastle Council
Gateshead Council	NHS Tees
Gloucestershire Council	Norfolk County Council
Hackney Council	North East Lincolnshire Council

Consultation on Integrated Working Resources

Hammersmith & Fulham Council		North Tyneside Council
Hampshire Council		Northamptonshire County Council
Haringey Council		Play Therapy UK
Havering Council		South Gloucestershire council
Hertfordshire Council		South Tyneside Council
Hull Council		Southend Borough Council
Kensington & Chelsea Council		Suffolk County Council
Kirklees Council		Thurrock Council
Lancashire County Council		Warwickshire County Council
Lewisham Council		Westminster Council
Locala Community Partnerships CIC		Worcestershire County Council
Luton Council		
Merton Council		
Mid Essex Commissioning Hub		
Newcastle Council		
NHS Merseyside		
Norfolk Council		
North East Lincolnshire Council		
North Somerset Council		
Northamptonshire County Council		
Nottingham City Council		
Other		
Peterborough Council		
Richmond Upon Thames Council		
Rutland County Council		
Sefton MBC		
Somerset Council		
South Gloucestershire Council		
Southend Council		
Southend-on-Sea Borough Council		
Stockport Council		
Sue Harris Associates		
Sunderland City Council		
Sutton Council		
Tees Public Health		
Tower Hamlets		
Tyneside Council		
Warrington Borough Council		
Westminster Council		
Wiltshire Council		
Yorkshire & Humberside Regional Workforce Leads Group		