

Schools Forum 6 February 2007

Report of the Director of Children's Services

Implementing the Common Assessment Framework and Lead Professional

Purpose of Report

1. To propose the implementation of the Common Assessment Framework and Lead Professional.
2. The proposal will improve in other areas such as information sharing, assessment and service provision.
3. The proposal has been to Headteachers Consultative Forum and their comments have been taken into account.
4. There is also a link to the web page with additional information if required:
<http://www.everychildmatters.gov.uk/resources-and-practice/search/IG00018/>

John Freeman
Director of Children's Services

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Report of the Director of Children's Services

Implementing the Common Assessment Framework and Lead Professional

Purpose of Report

1. The proposals contained within this report will ensure that children and young people will be fully supported across the every child matters agenda with improved outcomes for students and therefore schools. In particular this includes improvements in information sharing, assessment and service provision. Schools Forum is requested to approve the suggested contribution of £236k from DSG for 2007/08 as a contribution to pooled budget arrangements to progress the implementation of integrated processes required under the Children Act 2004 and the Education and Inspection Act 2006 and the contribution from schools towards this agenda.

Background

2. Section 10 of the Children Act 2004 requires partners, such as the Local Authority, Health, the Police and Youth Offending Teams, to work together to develop Children's Trust arrangements to meet the requirements of the Act and the Every Child Matters Agenda. It is expected that partners demonstrate a commitment to working together by combining resources to meet needs effectively. This is generally referred to as developing pooled budget arrangements.
3. The Education and Inspection Act 2006 now places a duty to cooperate onto schools with the partners referred to in section 10 of the Children Act 2004, to ensure that all schools engage with the Every Child Matters Agenda and our shared five overarching outcomes of: be healthy; stay safe; enjoy and achieve; make a positive contribution; and economic well-being. The DfES letter to Directors of Children's Services of 12 October 2006 reinforces – **'no school standards without Every Child Matters and no ECM without school standards'**.

New Arrangements

4. Appendix one illustrates the new arrangements that every Children's Services Authority area, with its partners, needs to have in place by April 2008. Dudley already has its partnership arrangements in place and these fulfil the requirements for a Children's Trust which will be in place from April 2007.
5. The Integrated Strategy is the Children and Young People's Plan, which is currently being reviewed for the second year of delivery. The revised plan is now out for final formal consultation available on www.dudleycypp.org.uk

6. Integrated processes are highlighted within the new arrangements as Information Sharing and Assessment. This encompasses the following:
- **Information Sharing Protocols:** to ensure that all agencies – public, private and voluntary, have an agreement to share information about children, young people and their families when it is considered by one or more agencies to be in the interests of those children and young people we work with. The protocols will be agreed by all partners and developed within a legal framework.
 - **Child Index:** a record of every child in the borough to ensure that we know who they are and to record if a common assessment has been undertaken and which agencies may already be working with them and who the lead professional is if one has been agreed. The Child Index can only be accessed by recognised and regulated workers.
 - **The Children's Services Directory:** a directory which is easily accessible by professionals as well as children, young people and their families to speed up the process of access and/or referral to services and how to contact them.
 - **The Common Assessment Framework:** a simple and agreed method of identifying needs at the earliest opportunity in order to provide services to prevent more intrusive and intensive work at a later stage. This is the first step to providing services with the child at the centre, instead of meeting the needs of service delivery.
 - **Lead Professional:** provides a single point of contact for the child, young person and/or their family whom they can trust, supporting them to make choices and navigate their way through the system. They will coordinate a package of interventions which are planned and reviewed. During this process they will reduce overlap and inconsistency.
7. Nationally, integrated working has been piloted. Our nearest regional pilot taking place in Shropshire/Telford and Wrekin with the learning from this being applied to our local pilots in Wren's Nest Primary School; Brierley Hill Sure Start Children's Centre; Thorns Community College; and the Early Support Programme. Early indications from evaluation of the pilots indicates that one person in post centrally does not give enough capacity to deliver fully on this agenda. Structures need to be put into place to support the full delivery of the common assessment and lead professional role locally, to collate information that will contribute to a wider needs assessment and inform the children and young people's plan and integrated working locally.

Service Provision

8. However we also need to develop our integrated front line delivery, building on developments such as extended schools and children's centres to work locally with multi-agency teams supporting clusters of schools as universal deliverers. This will ensure easy referral pathways and improve our child/young person focused responses. This will mean that we will develop a system of service delivery based on the identified needs of a child or young person moving away from assessment processes currently designed to identify the threshold criteria for receiving services which often militates against access.
9. Working locally (current debates are around the Township model) will also enables us to develop services which can be responsive to local need whilst acknowledging the changing and differing needs across the borough. Plans are therefore being put in place to develop capacity through the allocation of an integrated service manager in each of the Township areas. These new posts,

which can be drawn from current experienced staff, will address the weaknesses identified from the pilots and discussed above. Early intervention developed through these processes will support schools with behaviour management, attendance and achievement, as well as supplying evidence to OfSTED regarding schools engagement with the every child matters agenda through schools completion of their school evaluation frameworks (SEF).

10. It is important to remember that the management of these new processes are predicated on sound partnership arrangements, particularly in light of the fact that no new resource has been made available and will therefore have to be resourced through stakeholder contributions. This means that partners need to show commitment through combining resources and schools are now clearly part of these partnership arrangements. We already have outline commitment for pooling resources from the Council, Health and Connexions. We are now seeking support from the schools and the colleges. Under the Children Act 2004 we are encouraged and supported to develop pooled budget arrangements where a range of partners contribute smaller amounts to one resource pot which is then utilised to focus on one aspect of delivery. This can be agreed informally with clear reporting arrangements through the partnership, or can be set up through contracting arrangements with accountability through the partnership.
11. One Integrated Services Manager has been recruited to drive forward the implementation of integrated processes and front line delivery across the borough, building on learning from the pilots and other related work such as extended schools. However a clear and resourced pooled budget arrangement needs to be put into place for 1 April 2007 onwards in order to develop the capacity for this work to be fully embedded in all areas throughout the borough. We are required to have the common assessment and lead professional role embedded across the borough by April 2008 and this is our first priority. The Council, as a major partner within the Children's Trust, is already moving forward on implementing the Information Sharing Protocols, the Child Index and the Children's Services Directory and the costs associated with this are already being met from within existing resources of the Council.
12. We do need to ensure that this work builds on and dovetails with our other strategic approaches for integrating front line delivery through the universal service delivery of schools and extended schools, bringing agencies together locally to meet needs. This could mean working locally with leadership through the existing extended schools clustering arrangements in order to ensure flexible working and real change for children. One integrated service manager will not have the capacity to complete this, or to offer ongoing support for continued development and integrated working under these new arrangements.
13. We already have in place local networks and partnership arrangements, such as extended schools, pilot Education Pathfinder Trust for secondary schools and the college in Halesowen and it is important to build on these networks, working locally to ensure multi-agency training and support for early intervention and integrated processes through the delivery of Common Assessments and the role of the Lead Professional. This will support the delivery of prevention and early intervention services for the borough. It would make sense, therefore to look at how locality working can best be developed and how this relates to the emerging Area Township model for planning and service delivery.

14. It is proposed that to ensure there is the capacity for this work to be rolled out across the Borough, there is a need at this stage, to appoint five integrated services managers, one for each of the township areas, with a team leader. Their role and purpose would be to:
- Champion the change process to achieve an integrated service delivered locally, for children, young people and their families/carers;
 - Lead and coordinate the development of locally based practitioners to work as multi-agency teams, developing action plans for the local area which reflect priorities within the Children and Young People's Plan and other local priorities as identified through the integrated processes and early intervention/prevention work, ensuring that CAF and Lead Professional are embedded in every day practice;
 - Implement multi-agency training and a toolkit for practitioners including e-CAF systems;
 - Work closely with managers and partner agencies including schools, to develop appropriate pathways to support plans around children and young people to ensure a coherent whole system approach;
 - Track outcomes for children and young people against the five priority outcomes within the Children Act 2004; and
 - Ensure that information is shared across all agencies to support planning and service delivery locally
15. It is envisaged that appointments would be for a fixed term of three years in the first instance, with secondments opportunities open for existing staff across the agencies. The work and the impact would be evaluated during year three before decisions are taken regarding continuation or otherwise. Salary levels would be broadly set at PO(D) £39,432 per annum for each area township manager and PO(F) £46,884 for the team leader. On costs for national insurance contributions, employer pension contributions and insurances would need to be added.
16. A steering group is being set up and representation from head teachers is being sought. The steering group will be reporting to the overall partnership, children's trust arrangements, and will be responsible for developing the overall work programmes and performance management of the team.
17. The responsibility for ensuring that this work is delivered and embedded does not rest with one partner, but is a shared responsibility across the children and young people's partnership. This work cannot be achieved without the development of pooled budget arrangements and it is the responsibility of all partners to work towards this.
18. This paper therefore proposes that a pooled budget arrangement is put in place using the following contributions from schools which will be combined with contributions from other agencies, including colleges; police; connexions; Dudley PCT; Dudley Group of Hospitals; and DMBC.

Finance

19. It is envisaged that employment costs for five managers and a team leader would cost £293,000 per annum, including on costs, and that support costs would equate

to a further £95,000 per annum to cover administrative support, ICT services support, travel costs, telephone and accommodation costs.

20. Therefore, the partnership is seeking to establish an overall pooled resource of £388k for 2007/08 with inflation related increases to be built in for future years. It is envisaged that this arrangement will be in place for three years with a full impact evaluation planned towards the end of this period. A contribution is sought from schools which equates to approximately £5.00 per pupil (£236k in total). The remainder of the pooled budget arrangements will be sought from other partners, including the Council. The costs of developing other aspects of the information sharing and assessment processes are already being met from within existing resources.

Law

21. The Children Act 2004 gives a duty to cooperate to various partners with the expectation that integrated processes will be a shared responsibility. The Education and Inspection Act 2006 places this duty onto schools as well.

Equality Impact

22. The implementation of the common assessment processes and lead professional role will ensure that equality and diversity issues are addressed by focusing on individual child and family needs regardless of background and would seek to narrow the gap between those who access services easily and those who find it more difficult to do so. The child centred approach to meeting needs will ensure easy access and referral to meet needs as opposed to assessments to determine thresholds of service delivery against service requirements.
23. Children, young people and families with multiple needs can find themselves working with a range of professionals in isolation, undertaking a range of different assessments for access to services. The common assessment will ensure a single pathway for access to services before high intervention services are required.
24. Consultation has taken place with children, young people and their parents/carers at a national level. All have requested easier access to services earlier and to have one professional to relate to as their main contact for assessing and meeting needs.
25. Evaluation of the impact of the work will be against the five outcomes together with the impact on children, young people and their parents/carers in an attempt to assess value for money and potential cost savings where higher intervention has proved unnecessary.

Recommendation

26. It is recommended that:-

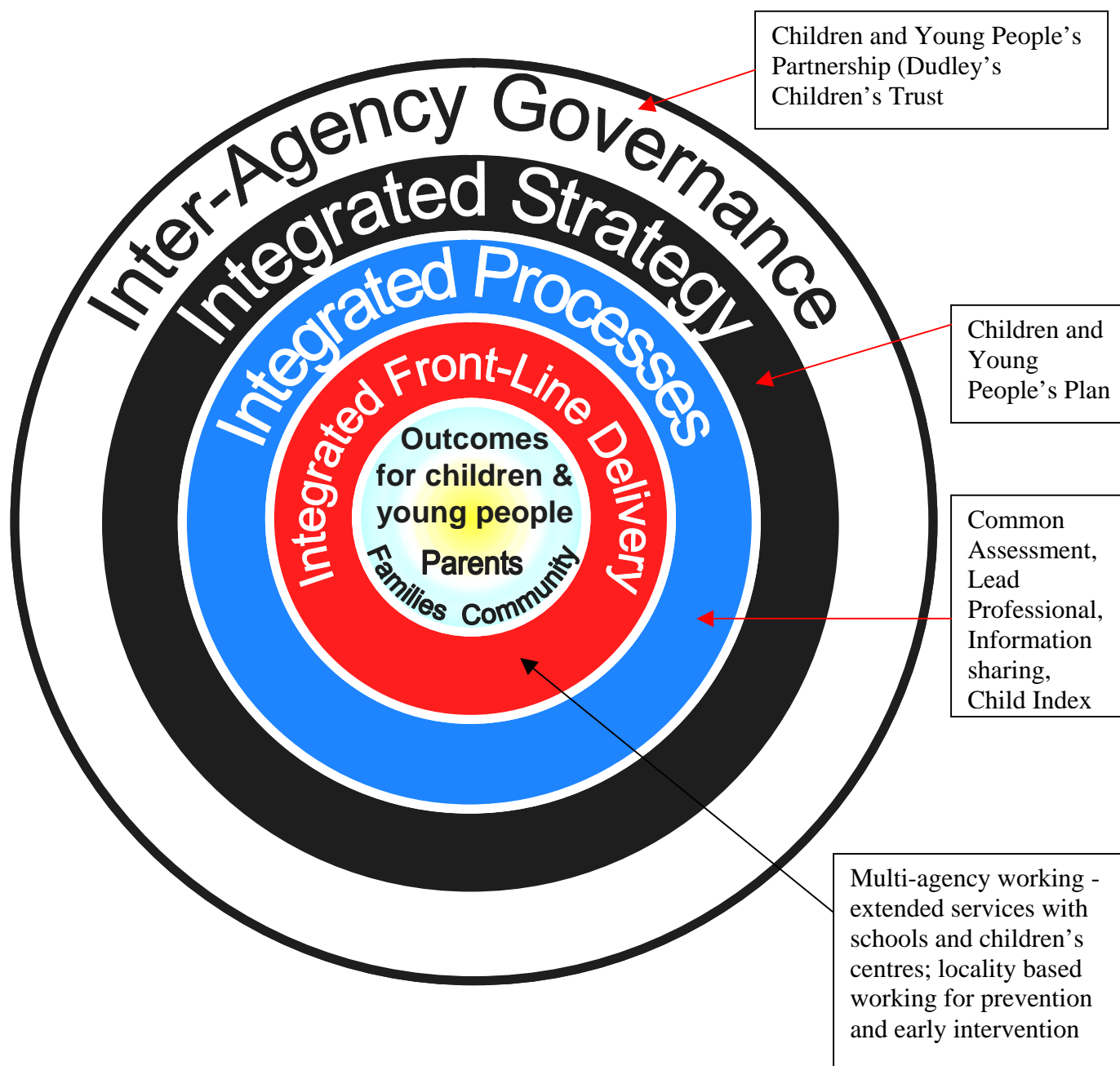
- Schools Forum agrees to the development of pooled budget arrangements to meet the requirements for the implementation of the integrated processes within the developing role of locality working and integrated services.
- That the schools contribute from their DSG the amount of £5 per pupil, equating to no more than £236k on an annual basis with annual inflation allowances for three years.
- That the contribution is and set aside annually, for a three year period in the first instance, into a pooled budget prior to the distribution of the DSG to schools own financial arrangements.

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List of Background Papers

Every Child Matters
 Statutory Guidance on the duty to cooperate
 Guidance on implementing common assessment framework
 Guidance on implementing the lead professional role.
 Every Child Matters: Making it Happen (attached as appendix two)
 Every Child Matters: Fact Sheets (attached as appendix three)





Index Fact Sheet

The Index will be a secure electronic tool that will enable authorised practitioners working with the same child or young person to find one another quickly and easily so they can provide more effective support to them and their families.

The purpose of the Index is to improve services to children with a strong emphasis on early intervention. The Index is a key element of the *Every Child Matters* programme and will support children's services agencies in their duties to cooperate to promote the well-being of children, and to safeguard and promote their welfare, as set down in Sections 10 and 11 of the Children Act 2004.

Benefits of an Index

Local authority 'Trailblazers' have been piloting some local index approaches*. Their experience has demonstrated that this type of tool produces some key benefits:

- faster, more effective, holistic intervention;
- improved service experience for children, young people and their families;
- less unproductive time spent trying to find out who else is working with a child;
- quicker assessment of whether a child is receiving universal services (education, primary health care).

The experience of the local authority Trailblazers and extensive consultations with a range of stakeholders concluded that a national approach is essential as many children access services in different local authority areas or move across local authority boundaries.

A national Index will be operational by the end of 2008. There will be 150 'partitions', one relating to each local authority in England. Local authorities will be responsible for the records of children resident in their area.

Research is underway to find a name for the national Index which explains what it is more clearly.

Information held on the Index

The Index will contain the following basic information:

- name, address, gender and date of birth of all children in England (aged up to 18); and
- name and contact details for their:
 - parents or carers
 - educational setting (e.g. school)
 - primary medical practitioner (e.g. GP practice)
 - practitioners providing other services; and
 - lead professional (if appointed)

Practitioners will also be able to indicate that they have information to share, are taking action, or have undertaken a Common Assessment Framework.

The consent of the young person or the child's parent/carer will be required to record details of practitioners providing sensitive services (sexual and mental health, and substance abuse) and access to this information would be restricted.

The Index will **NOT** contain case notes or details of any assessments, medical data, exam results or any other personal information about a child or their family.

Who will have access to Index?

Access will be restricted to authorised users in children's services who need it as part of their work. This will include those working in education, health, social care, youth offending and some voluntary organisations.

Everyone with access to the Index will be subject to stringent security checks, including enhanced Criminal Records Bureau (CRB) clearance. All users will be trained in the safe and secure use of the Index, information sharing practice and the importance of compliance with the Data Protection Act and Human Rights Act.

Authorised users will be able to access the Index through a secure web link, through some existing case management systems or through another designated user.

Security

Security is of paramount importance. The design and implementation of the Index will be reviewed by independent security experts throughout its development and audited during operation.

Strong user authentication procedures will be in place. Every access to a child's record will be detailed in the audit trail, which will be reviewed regularly.

Legislation

Section 12 of the Children Act 2004 provides the legislative basis for establishing the Index. The formal public consultation on the draft regulations, which will provide the legal framework for the operation of Index, closed on 14 December 2006. A response will be published, and the regulations laid before Parliament, in Spring 2007.

Further details will be set out in Statutory Guidance, which will be issued for consultation in Spring and published in Summer 2007.

Every Child Matters

Change for Children

MAKING IT HAPPEN

Working together for children, young people and families



KNOWING WHEN TO SHARE

Practical guidance on information sharing

GATHERING INFORMATION

The Common Assessment Framework

COORDINATING DELIVERY

The role of the lead professional

EVERY CHILD MATTERS

Tools and processes to help make it happen

More than four million people, across public, private and voluntary sectors work with children. If you're one of them, this booklet is for you.

It looks at how better information sharing and multi-agency working, coupled with new tools and processes

such as the Common Assessment Framework (CAF), the lead professional role and the information sharing index, are helping to deliver effective services for children, young people and families.

Frontline staff explain what this means in practice for them, and for the children, young people and families they work with.

KEY PROCESSES AND TOOLS

The continuum of needs and services

A key part of the reform of children's services is the integration of systems and processes, so that the needs of children and families are met in a more effective way.

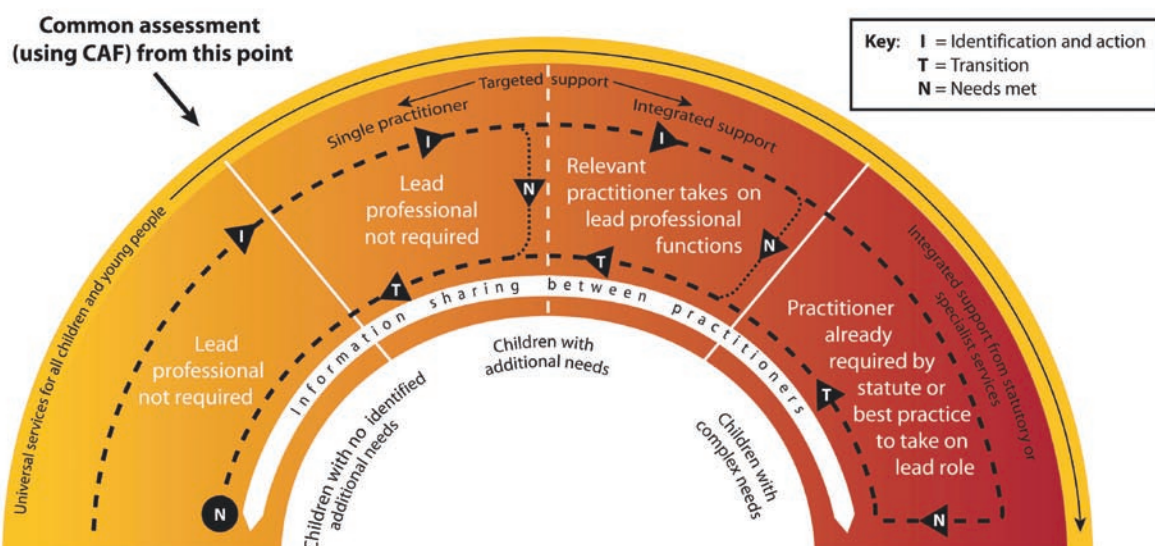
Many local areas have begun to do this by conceiving a 'whole-systems' approach where the needs

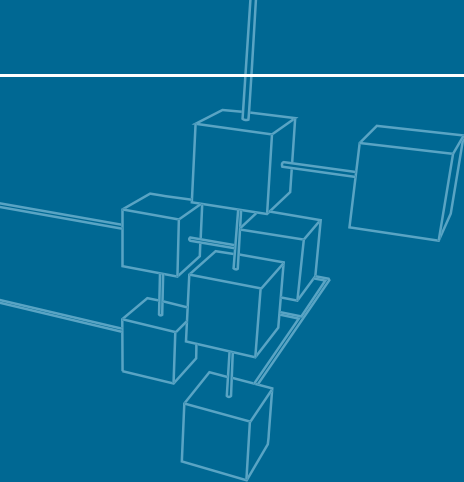
of children and families lie along a continuum, supported by flexible and responsive services which become increasingly targeted and specialist according to need.

Children and families are supported most effectively when CAF, the lead professional role, and information

sharing procedures are planned and delivered in a coordinated way to offer integrated support across the continuum of needs and services.

The visual below describes this spectrum of support as well as the relationship between the different tiers.





Case study

Chris Purcell is a Support Worker from the Flexible Support Team in Knowsley. She explains how the new ways of working contributed to making a dramatic difference to one young person's life.

Thirteen-year-old Jane came from a broken home, had poor school attendance and, following a bereavement, had begun self-harming.

"By completing a CAF and getting a full picture of Jane's needs and the agencies working with her, we were able to provide services much more effectively," says Chris.

"Previously she was in contact with eight people, which involved a lot of duplication of effort and was overwhelming for her. By understanding her needs better we were able to reduce this to just three – with great results. She's much happier, is dealing with her grief and has returned to education, learning new vocational skills."

It might look like some of the new tools and processes may increase your workload but this example demonstrates how time can be saved by focusing efforts.

"By completing a CAF and getting a full picture of Jane's needs and the agencies working with her, we were able to provide services much more effectively."

Chris Purcell



Every Child Matters

Every Child Matters is all about improving the life chances of all children, reducing inequalities and helping them achieve what they told us they wanted out of life:

- 1 Be healthy:** enjoying good physical and mental health and living a healthy lifestyle.
- 2 Stay safe:** being protected from harm and abuse.
- 3 Enjoy and achieve:** getting the most out of life and developing the skills for adulthood.
- 4 Make a positive contribution:** being involved with the community and society and not engaging in anti-social or offending behaviour.
- 5 Achieve economic well-being:** not being prevented by economic disadvantage from achieving their full potential in life.

These five outcomes form the basis of the ECM programme.



NB. This booklet is about improving outcomes for children, young people and their families – even though at times we may simply say 'children' for ease of reading. Likewise, the term practitioner refers to anyone who works with children and young people. Children's names have been changed, wherever they appear.



Find out more

Read on to find out how you can be involved and what guidance, training and support is available to help you improve outcomes for all children. At the end of each section you will find some 'signposts' to more information.

KNOWING WHEN TO SHARE

Practical guidance on information sharing

Knowing when and how to share information isn't always easy – but it's important to get right.

Children, young people and families need to feel reassured that their confidentiality is respected. In most cases you will only share information about them with their consent, but there may be circumstances when you need to override this.

Recognising the uncertainty many of you have about sharing information, particularly outside your own setting, the first cross-government guidance on this subject has been published.

It clarifies when, why and how to share information legally and professionally, so that you can feel confident about making the right judgement.

If you have any doubts or concerns about sharing information, don't ignore them. Your organisation should have a system of support and advice to help you decide what to do.

"No inquiry into a child's death or serious injury has ever questioned why information was shared. It has always asked the opposite."

Georgina Nunney,
Solicitor, Lewisham

"The Data Protection Act is not a barrier to sharing information, but is in place to ensure that personal information is shared appropriately. This guidance is welcome as it sets out a framework to help practitioners share information both professionally and lawfully."

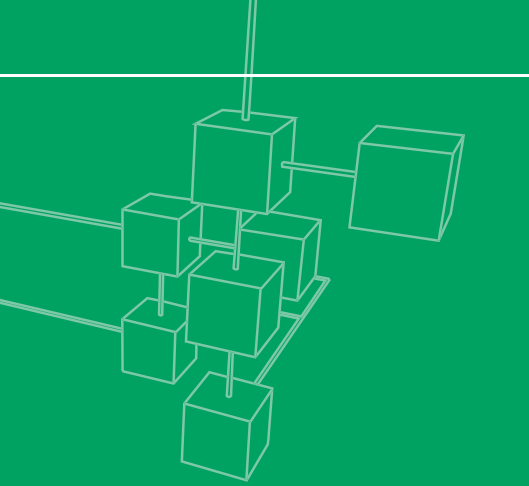
Richard Thomas,
Information Commissioner

Six key points

1. Explain openly and honestly at the outset what information will or could be shared, and why, and seek agreement – except where doing so puts the child or others at risk of significant harm.
2. The child's safety and welfare must be the overriding consideration when making decisions on whether to share information about them.
3. Respect the wishes of children or families who do not consent to share confidential information – unless in your judgement there is sufficient need to override that lack of consent.
4. Seek advice when in doubt.
5. Ensure information is accurate, up-to-date, necessary for the purpose for which you are sharing it, shared only with those who need to see it, and shared securely.
6. Always record the reasons for your decision – whether it is to share or not.

This is a summary from chapter 2 of the practitioners' guide.





Case study

Sometimes sharing information without consent is in the interest of the children involved – the example below demonstrates such a situation.

Three children (aged 10, 14 and 15) from the same family were involved in disruptive and anti-social behaviour, both at school and on their local estate, which included truanting, theft, serious vandalism, setting fires and involvement with drugs.

The *police* were concerned about the risk of poor outcomes for the children and the risk to others from their anti-social behaviour and so notified the *youth offending service (YOS)*.

The *YOS worker* decided to contact the *school* to obtain further information to help assess the risks to the children. The *school* then had to review what information they could share.



Despite repeated attempts, the *school* had been unable to discuss their concerns with the parents. They judged that because the children were involved in criminal behaviour and at risk of significant harm they should share all relevant information – even though they hadn't been able to secure consent.

The young people and their parents were told of the intention to share information with relevant agencies – including *the police, YOS, education welfare service, school nurse and the fire service*.

The family were invited to join these multi-agency discussions so that they had the opportunity to get involved in developing the action plan.

The joint plan set clear boundaries, ways to monitor behaviour and give access to drug advice, improve educational development and prevent further involvement in criminal activity.

The decision to share information without consent was justified to enable preventative work with the children who were at risk of involvement in crime and vulnerable to exploitation.

Principles of information sharing

You need to consider:

1. Is there a legitimate purpose for you or your agency to share the information?
2. Does the information enable a person to be identified?
3. Is the information confidential?
4. If so, do you have consent to share?
5. Is there a statutory duty or court order to share the information?
6. If consent is refused, or there are good reasons not to seek consent, is there a sufficient public interest to share information?
7. If the decision is to share, are you sharing the right information in the right way?
8. Have you properly recorded your decision?

Each of these questions is covered in more detail in the practitioners' guide, chapter 4.



Find out more

www.ecm.gov.uk/informationsharing

- Practitioners' guide
- Case examples
- Further guidance on legal issues
- Training materials
- Fact sheet



Common Assessment Framework (CAF)

The CAF is:

- A common process enabling practitioners to make an assessment – and act on the result; with
- A standard form to record the assessment and where appropriate, share with others; and
- A pre-assessment checklist to help decide if a child would benefit from a common assessment.

It covers all aspects that affect a child's development, from health, education and social development, through to housing and family relationships.

CAF is the only assessment that can be used by practitioners in all agencies in England that deliver services to children and young people.

Who will use it?

You may not need to complete a CAF yourself, but everyone working with children will need to understand what it is and where to go to get one completed. Full training will be given to appropriate staff – the decision about this will be taken at a local level.

“An important part of the CAF is that you return to the plan and look at it again. It helps to keep us all on track, see what progress has been made and what to move onto next.”

Lee Martin,
Junior Youth Inclusion Project,
Leicester

www.ecm.gov.uk/caf

GATHERING INFORMATION

The Common Assessment Framework

It is not always easy to know what to do if you're concerned about a child – particularly if you're not sure exactly what their needs are, or whether your service can help.

The bigger picture

This is where the Common Assessment Framework (CAF) comes in. It includes a standardised assessment that's designed to get a complete picture of a child's additional needs at an early stage. It can be used for children and young people of any age, including unborn babies.

The CAF enables information to be gathered in a structured way, through discussions with the child and their parent(s). It looks at all unmet needs,

not just those in which individual services specialise. It is an approach that is helping children get access to the right services earlier.

The CAF is making it easier to get other services to help, because they will recognise that your concern is evidence-based and gathered in a form that they are familiar with.

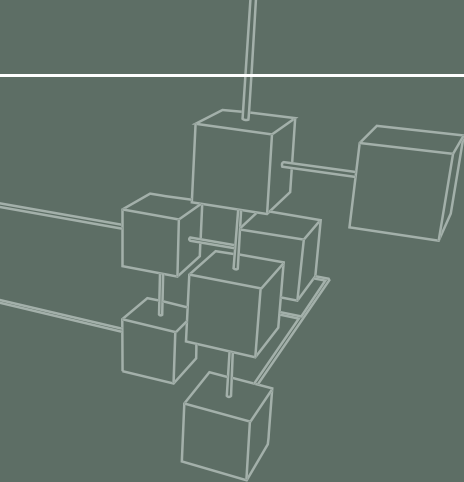
Also, if you deliver a specialist service and a child is referred to you, you don't have to start from scratch with a new assessment but instead can build on the CAF.

This benefits children and young people who don't have to go through the time-consuming and potentially distressing process of telling their story over and over again to different people.

“The CAF is a vital opportunity to sit down with parents and get everything on the table. I found doing the CAF time-consuming, but I have to say it was worth every single minute.”

Bridget Hodges,
Head of Foundation,
Whitchurch Infants School,
Shropshire





Case study

“Already we’re identifying more of the warning signs and dealing with children’s needs before they become serious.”

Trish Farley



Trish Farley is a health visitor in Telford. Last year she became involved with a family who had recently moved to the area.

“The mum had three children under five. There were a number of health problems in the family – which suggested that they would probably need a range of support as they settled in. The children suffered from illnesses including asthma, epilepsy and deafness, and the mother herself was deaf and had some learning difficulties.”

Having contacted the mum and found that no CAF had been completed for the children, Trish asked her if she’d be happy to work with her to ensure that the full range of her family’s needs were identified. She agreed.

Completing the CAF uncovered a range of emotional and practical issues – from the stress of having her mother-in-law living with the family, to transport problems that were making it very difficult to get the children to their large number of medical appointments.

On the basis of the information gathered, Trish contacted people from a range of agencies, including *Sure Start* and a *community paediatrician*, and asked them to get involved in a team to help the family.

“The *paediatrician* streamlined all the appointments so that all the children could be seen on the same day each week – reducing unnecessary travel and making transport much simpler.

“*Sure Start* then helped to support the family while they were settling into the area. They offered some respite care and put the mother in touch with a local support group for the deaf. They also discussed with the mother how to find the most appropriate schools for the children. She told me that it feels like people are finally starting to listen to her.

“I’m really positive about the introduction of the CAF,” says Trish. “The big pluses are the focus on early intervention and improving cooperation. Sometimes apparently difficult issues can be dealt with effectively if we can get a full picture of a child’s circumstance and get the right people involved quickly.”

Finding out if a CAF has already been done

Before you do a CAF, you should see if one has been completed by someone else already working with the child. You can do this by asking the child or parent. Alternatively, there will be a local mechanism for checking this.

Talk to your manager if you’re unsure about what arrangements have been made in your local area. Longer term, the national information sharing index (see page 11) will help you find this information quickly.



Find out more

www.ecm.gov.uk/caf

- Practitioners’ guide
- Managers’ guide
- Training materials
- Case studies
- Fact sheet
- Trial evaluation report

COORDINATING DELIVERY

The role of the lead professional

When a child needs a package of integrated support, experience shows they and their family benefit from having one person who can help them through the system and ensure they get the right services at the right time.

How it works

Where a child has additional or complex needs, a lead professional acts as a coordinator. They help create a partnership, not just with their colleagues, but with the child or young person and their family too.

The lead professional isn't a totally new concept. It formalises the good practice

now happening, ensuring that children and families everywhere can benefit from this model of working.

What's the time commitment?

It depends on the situation. While it can mean greater involvement with a particular child, you won't be a lead professional for every child you work with. And you may spend less time on cases where someone else is a lead professional.

Good management and supervision arrangements need to be in place. This would include assessing any extra work involved when allocating caseloads.

"Families feel that they have control of the situation and are partners in the process. Their views are listened to. The support of a lead professional guides them through a confusing situation."

Anita Makepeace,
Under Eights Development Officer,
Family Support Service, Gateshead

What is a lead professional?

It is not a new job title or new role, but a set of functions essential to delivering integrated support.

These are to:

- **be a single point of contact** – giving children, young people and their families a trusted person to support them and communicate without jargon.
- **coordinate services** – so that effective action is properly planned, delivered and reviewed.
- **reduce overlap and inconsistency** – to ensure a better service experience and better outcome.

The lead professional is not responsible or accountable for other people's work.

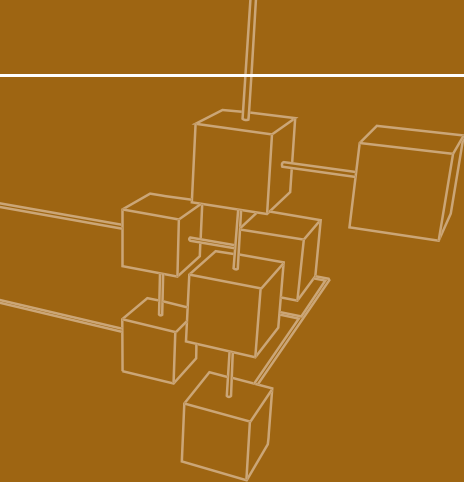
Who can be a lead professional?

Anyone. It's not about what job you do or your seniority, but who is best placed to work with a particular child and family and has the skills to carry out the role.

It is not necessarily the person who first becomes involved with a child or family or who carries out the CAF. Often the decision is made as part of the initial multi-agency team meeting following a CAF (see page 5).

The person considered most appropriate may change over time, as the complexity and nature of the child's needs change.





Case study

Sam Livesey is a learning mentor at a primary school in Knowsley. This year she found herself acting as lead professional for six-year-old Peter – a child she'd had close contact with since he joined her school.

Peter is from a lone parent family. He has a 13-year-old sister and a two-year-old brother. His attendance was down to 60% and, on the days he did come to school, he was often late. He appeared tired and was suffering from a severe cough and impetigo.

Sam invited Peter's mum into the school, who explained to Sam that she was new to the area, was feeling isolated and felt she lacked the support and parental skills to cope.

"She told me Peter was especially problematic. He wouldn't behave or go to bed on time," says Sam.

Sam and Peter's mum agreed that different agencies should get involved with the family to help them address the range of needs. Sam set up a meeting for the mum and herself with a *Sure Start* representative, the school attendance service, school nurse and headteacher.

Since Sam had already built a trusted relationship with Peter and his mother, the team suggested she take on the role of lead professional.

"For me, it's a really exciting time to work with children. By intervening earlier we're resolving problems before they get really serious."

Sam Livesey



"Overseeing cases wasn't something I'd had experience of before," she admits. "I did have some reservations and felt a bit nervous initially, but actually being a lead professional has made me more confident – about my abilities generally and about calling meetings and getting hold of the information I need."

As lead professional, Sam was able to improve the service the family received. She organised and facilitated team meetings every six weeks, and ensured that information was collated and distributed to all team members. This helped to make sure the team wasn't duplicating any work.

And, by holding fortnightly meetings with the mum, Sam ensured the family were fully involved in what was happening.

"The results were positive and lasting. Peter's mum now attends mother and toddler group to boost her parenting skills. *Sure Start* has given her respite from the youngest child, so she can spend more time with Peter, and provided subsidised equipment to help make the flat safer for children.

"With the added help of the *school attendance service*, Peter has been late for school just twice in six weeks and missed only one day – due to a flare-up in his impetigo, a problem that's been under better control with the help of the *school nurse*.

"Peter's also been going to sleep earlier," says Sam, "so he's less tired at school. He told me he's much happier at school now and is getting more out of the experience."

At the time, CAFs hadn't yet been introduced in Sam's area. "But I've now had CAF training," she says "and can see how useful it would have been in my initial discussions with Peter's mum."

"For me, it's a really exciting time to work with children," says Sam. "By intervening earlier we're resolving problems before they get really serious. In other words, by working more effectively, we are helping more children. That's brilliant news."



Find out more

www.ecm.gov.uk/leadprofessional

- Practitioners' guide
- Managers' guide
- Training materials
- Case studies
- Fact sheet
- Trial evaluation report

INTEGRATED APPROACH

Best practice in multi-agency working

Multi-agency working is an extremely effective way to support children and families with additional needs.

Joining services up

Multi-agency working can range from a group of practitioners deciding informally to work together to support a child or family, right through to a large scale venture like different services coming together in a Sure Start children's centre.

Different ways of organising children's services have been successfully developed around the country. The important thing is that everyone who works with children improves how they work together.

But it is not just about changing how services are structured. It's about changing the way we think, operating in a way that's much more about partnership and everyone working towards a shared goal. These are long-term changes which affect everyone working at every level across children's services.

We need to continue to break down traditional barriers, and the bureaucracy that goes with them.



Multi-agency working structures

There are three main ways of structuring frontline multi-agency services:

1. Multi-agency panel

Members remain with their agency but meet regularly to discuss children with additional needs who would benefit from multi-agency input. Panel members might do case work or take a more strategic role.

Example: Youth Inclusion and Support Panel (YISP).

2. Multi-agency team

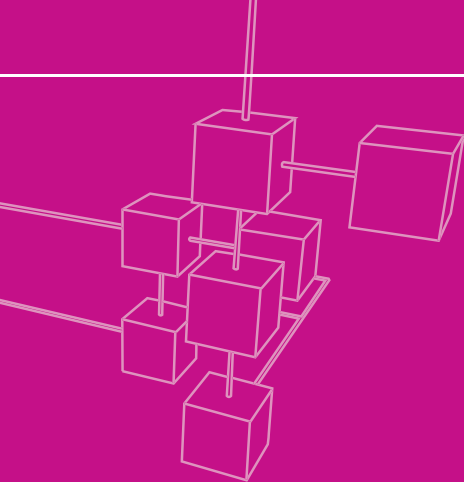
Members are seconded or recruited into the team with a leader and common purpose and goals. They may still get supervision and training from their home agency, but have the opportunity to work with a range of different services.

Examples: Behaviour & Education Support Teams (BESTs) and Youth Offending Teams (YOTs).

3. Integrated service

Different services such as health and education are co-located to form a highly visible hub in the community. Funded by the partner organisations and managed to ensure integrated working, they are often based in schools or early years settings.

Examples: Sure Start children's centres and extended schools.



Case study

Julia Patrick is one of two Deputy Heads at a 500-student high school in a deprived area of Leicester. She takes the lead on pastoral matters and has pioneered an approach to multi-agency working that's spreading to all the local agencies she works with.

Julia has set up a system for reviewing children's progress that involves parents as well as staff from 20 agencies and organisations. This ranges from the on-site *Special Education Needs Coordinator* and *learning support unit*, through to *Connexions*, the police, health services and the local housing association.

Representatives of the groups meet twice a term to check progress on the children they are already helping, and to discuss other ones that may require attention.

"We see children and families with a wide range of needs. The danger before was that they could be overwhelmed. Now we complete a common assessment (see page 5) with the pupil and their parents – and invite the parent to our meeting so we can discuss the child's needs. Together we'll produce an action plan, set up a focused team to deliver services and appoint a lead professional if required (see page 7)."

"Together we'll produce an action plan, set up a focused team to deliver services and appoint a lead professional if required."

Julia Patrick



All the admin of meetings is handled by a school staff member recruited with funds under the Extended Schools Scheme.

"The result of our work – together and with parents – is unquestionably earlier intervention and better-targeted services, which are producing happier, better behaved, more productive children," says Julia.

"Recently, we had a 13-year-old girl with self-esteem, attendance and personal hygiene issues relating to her home situation. She was becoming an outsider at school and told me she was unhappy and was finding it hard to make friends.

"The *learning support officer* completed a CAF, and we got the *school nurse* involved to coach the girl on hygiene and personal presentation, while *Connexions* provided support on anger management, social skills and a programme to boost the girl's self-esteem.

"The transformation, and that's not too strong a word, is startling. She's a different girl. She tells me that she feels more confident and relaxed now and that she's enjoying her studies more. Her attendance has also improved."

Julia adds that they now have a system where they resolve small concerns before they become big problems.

"More rapid intervention means we've seen a rise in short-term exclusions of one to two days," she says. "But because these are followed up by action, which is dramatically reducing recurring problems, we actually saw exclusions of five or more days drop by 79% last year.

"These results are amazing, and I'm really proud of all the work of everyone involved – the parents, the children and the professionals."



Find out more

www.ecm.gov.uk/multiagencyworking

- Information on structuring teams
- Advice on common problems
- Checklists and toolkits
- Glossary
- Success factors – the strategy and practices that have worked for other teams
- Fact sheet

IMPROVING COMMUNICATION

The information sharing index

You can't share information if you don't know who to share it with – or where to find them.

So you'll welcome the information sharing index, a practical tool that can be used to identify and contact other people working with a child you are involved with.

It will help you to concentrate on delivering services, rather than wasting time trying to track down who else is involved with a child – or unknowingly duplicating the efforts of others.

Even though it is not available yet, you need to know it is coming and understand how it will support the other tools in this booklet.

Local Authority 'trailblazers' have been piloting the concept and have demonstrated the benefits of an index.

National solution

Based on the experience of 'trailblazers' and consultations with other stakeholders, including children and families, a national index is now being developed.

A national index is needed so that children who move out of a local authority area, or access services across local authority boundaries, benefit as well.

It will also help local authorities and others identify children missing from education, or who are not registered with a GP.

What happens next?

Further design work is underway to ensure the index will be simple to use, accurate, secure and work alongside existing case management and other IT systems.

'Early adopter' local areas will have access to national index data as early as spring 2007, so that they can incorporate their own local data to improve its quality.

Frontline staff will be able to use the index in those areas from the end of 2007. Their experience will help further refine the system before it is rolled-out – to be available throughout England by the end of 2008.

"Often when families move address they forget to pass their new contact details to us. The index provides a straightforward way to ensure that they don't miss out on updates when they move and can easily resume contact with our services if they want to."

Jessica Moore,
Children with Disabilities
Network Coordinator,
Gateshead Council

What is it?

The index will contain individual records of all children with:

- name, address, gender, date of birth and an identifying number
- name and contact details for:
 - parents or carers
 - educational setting
 - primary medical practitioner
 - practitioners providing other services
 - the lead professional
 - the person who holds the CAF

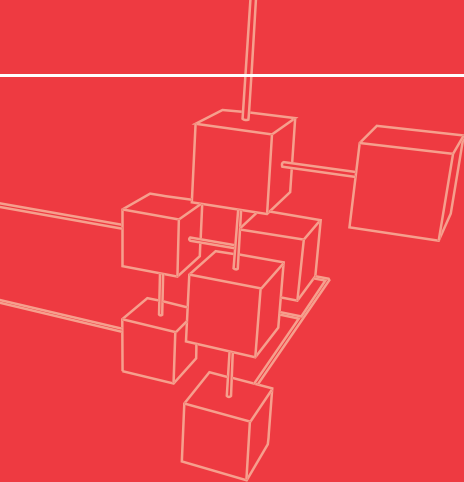
Practitioners will also be able to indicate that they are taking action, have undertaken an assessment or have information to share. No assessment or case information will be held on the index.

The consent of the young person or the child's parent/carer will be required to record practitioner details for some targeted and specialist health services, and access to this information will be restricted.

How to access it

The main access will be through existing case management systems or a secure web link.

Those without a computer will be able to access the information through a designated contact.



Case study

Lucy Ruddy, local Information Sharing and Assessment (ISA) manager in 'trailblazer' area East Sussex, says the index has completely changed the way people work.

"It has helped change attitudes and cultures, and gets people from different services working better together.

"An *educational welfare officer* told us that every time she gets a new referral she accesses the index," Lucy says, "this

"It has helped change attitudes and cultures, and gets people from different services working better together."

Lucy Ruddy



means she can easily contact other practitioners involved with the child and quickly build up a holistic picture of the child's needs. Previously this picture would have been built from scratch, but now no action is taken before reflecting on who else is involved.

"Practitioners can find out what they need to know more easily and make the contacts they need to more efficiently. They have better information to inform actions, communication has improved and there is more effective multi-agency working.

"The simplest things make a real difference. For example, a *health visitor* on a routine visit to a child's home, was told by the new tenants that the family had moved – with no forwarding address.

"The *health visitor* got the new address from the index and quickly passed on crucial information to the local *health visitor* to ensure continuity of care."

Joann Clarke, managing the project in Knowsley, reports similar success:

"Having an index has enabled us to pull the right practitioners together with minimal delay when decisions must be made about the needs of vulnerable children and young people."



Find out more

www.ecm.gov.uk/index

- Local index evaluation report
- Index announcement videos
- Case studies
- Next steps
- Fact sheet

MOVING FORWARD

Building on success

Every Child Matters (ECM) has set out a clear vision for children's services, based on the needs and experience of children and families.

This vision is geared towards one overriding objective: securing a better future for children, whatever their background.

Translating this into structural and cultural reform has been no small challenge. But as this booklet shows, the commitment and appetite for change among those who work with children is clear and we are already seeing lots of benefits.

Of course, there's still much to do. These successes will gather pace as the tools and processes spread throughout England and become embedded as "business as usual." We need everyone who works with children to embrace these changes.

As well as contributing to the ECM agenda, the tools covered in this booklet will also help achieve many of the standards set out in the National Service Framework for Children, Young People and Maternity Services and contribute towards the schools achievement agenda.



Working Together to Safeguard Children

The main focus of this booklet has been early intervention and prevention, but also central to ECM is ensuring that children are protected from harm, including abuse and neglect. The revised *Working Together to Safeguard Children* sets out how individuals and organisations should work together to safeguard and promote the

welfare of children. This updated version includes new sections of guidance on: child death review processes; handling allegations of abuse against those working with children; when and how to share information in cases involving crimes against children; and the role and functions of Local Safeguarding Children Boards.

Further help and advice

The Children's Workforce Development Council (CWDC) is supporting these reforms by ensuring that people working with children have the appropriate skills and qualifications, new training opportunities, career development and flexible career pathways between sectors, as defined by the Children's Workforce Strategy.

It is helping the workforce deliver joined-up services and improved communication across the sectors, while recognising the unique qualities and contributions of individual professions.

The Government will continue to provide support at a national and local level, via the new children's services grant, and other funds.

Children's trusts partnerships will continue to bring together local authority, health and other partners to decide priorities, pooling resources to commission services that meet local needs.

Children, young people and communities will have a voice in local planning, and a Children's Commissioner is now speaking on behalf of children nationally.

Making it happen

Some final words from staff who are already seeing the benefits.

According to Jan Malatesta, Connexions in Coventry, "the whole way we're working now is a really positive change. Many things associated with ECM aren't a terrible upheaval for us. It's really a way of formalising best practice – taking what we've always tried to do and making sure it's done consistently."

Suzanne Bunt, a Specialist Officer with Deaf People from Streatham, is "delighted to see the emphasis ECM puts on joint-working. I can't see how else I could manage if I wasn't in regular touch with schools, doctors and other professionals. I've relied until now on the informal networks I've built, but going forward, I'm pleased to see multi-agency working becoming the norm."

Susanne Baccini, Children's Services Adviser for the National Association for Voluntary and Community Action in Merton, believes that multi-agency training is vital. "It is helping to share good practice and promote understanding amongst agencies, particularly in recognising the voluntary sector as an integral part of children's services. This is leading to quicker, more appropriate referrals all round."

Midwife Deb Hughes, from Coventry, says "these new processes are helping to share the responsibility for addressing the needs of children and families. I feel like a huge weight has been lifted from my shoulders as prior to this I would have tried to manage everything myself."

Chris Hanvey, UK Director of Operations at Barnardo's, has confirmed his charity's commitment to ECM. "It is all about partners working together more effectively in participation with children and their families to deliver a diversity of services that will lead to better outcomes. We have already seen benefits, but more work is required to embed best practice across the country."

And finally, Ann MacLeod, Nursery School Headteacher from Bolton comments: "I know there's a lot going on in our profession, but the changes had to happen. As far as I'm concerned, with sufficient time and goodwill behind them, ECM will produce the results we all want to see."

So if you are not already part of this change programme, speak to your manager and find out how to get involved.



Find out more

The ECM website has a wealth of information to help with the development and delivery of more effective services. The resources and practice section is full of materials and case studies demonstrating the policies in practice.



www.ecm.gov.uk

Children's Workforce Development Council at www.cwdcouncil.org.uk



www.ecm.gov.uk
mailbox.isadivision@dfes.gsi.gov.uk

department for
education and skills
creating opportunity, releasing potential, achieving excellence



Every Child Matters Change For Children

Fact Sheet

Common Assessment Framework

Background

The CAF is a key component in the Every Child Matters: Change for Children programme. The aim is to identify, at the earliest opportunity, children's additional needs that are not being met by the universal services they are receiving, and provide timely and co-ordinated support to meet those needs.

What is the CAF?

- a simple **pre-assessment checklist** to help practitioners identify children who would benefit from a common assessment;
- a **process for undertaking a common assessment**, to help practitioners gather and understand information about the needs and strengths of the child, based on discussions with the child, their family and other practitioners as appropriate;
- a **standard form** to help practitioners record, and, where appropriate, share with others, the findings from the assessment in terms that are helpful in working with the family to find a response to unmet needs.

CAF elements and domains

The CAF has been developed by combining the underlying model of the Framework for the Assessment of Children in Need and their Families with the main factors used in other assessment frameworks. The elements that form the framework for common assessment are shown in the figure below. They have been grouped into the themes of development of the child, parents and carers and family and environmental elements.

Development of Child
<ul style="list-style-type: none"> Health: <ul style="list-style-type: none"> General health Physical development Speech, language and communications development Emotional and social development Behavioural development Identity, including self-esteem, self-image and social presentation Family and social relationships Self-care skills and independence Learning: <ul style="list-style-type: none"> Understanding, reasoning and problem solving Progress and achievement in learning Participation in learning, education and employment Aspirations
Parents and Carers
<ul style="list-style-type: none"> Basic care, ensuring safety and protection Emotional warmth and stability Guidance, boundaries and stimulation
Family and Environmental
<ul style="list-style-type: none"> Family history, functioning and well-being Wider family Housing, employment and financial considerations Social & community factors and resources, including education

Holistic approach

The CAF provides a process to assess the additional needs of a child or young person and to give a holistic view that considers strengths as well as needs. Practitioners will then be better placed to agree, with the child and family, what support is appropriate.

CAF benefits

The CAF provides an assessment that is common across services. It will help embed a shared language; support better understanding and communications amongst practitioners; reduce the scale of different assessments that historically some children and young people have undergone; facilitate early intervention and speed up service delivery.

Relationship to specialist assessments

The CAF helps to identify whether a specialist assessment is necessary, and avoid duplication by building on accurate up-to-date information. The CAF will replace the assessment elements of the Connexions Assessment, Planning, Implementation and Review (APIR) Framework. Where there is a need for an immediate specialist assessment, the CAF will not delay that process.

Implementation

Following trials in 2005-6, national implementation is taking place between 2006 and 2008. Guidance and training materials are available on-line. CWDC will assume responsibility for supporting implementation from the end of September 2006.

Electronic CAF (e-CAF)

We are developing a strategy for the IT enablement of CAF, with the objective of securing a nationally consistent approach. As a first step we have developed, in consultation with local authorities, some standards for eCAF systems. These include guidance on business processes, a common data model, and system requirements. The next steps involve working with a selection of local authorities to develop exemplar eCAF systems that meet the national standards so that we can determine how to implement a national eCAF solution.

Find out more

Guidance documents, training materials and case studies are available from www.ecm.gov.uk/CAF



Every Child Matters Change For Children

Fact Sheet

Integrated working implementation roadmap

As part of the government commitment to support local areas in their change programmes, the roadmap provides a high level view of what is required to implement integrated working processes and tools.

The roadmap is designed to assist senior / project management within local authorities and their partners with the early scoping and planning for these implementations.

Background

Achieving the desired outcomes for children and young people involves action at every level: front-line working, shared processes, planning, commissioning and governance. This depends on the action taken in the 150 local change programmes, driven by an analysis of local priorities and supported by a national framework for change.

Implementing processes and tools to support integrated working is a significant part of a local change programme and one that contains many challenges. Although the order and pace at which areas tackle issues has to reflect local analysis and requirements, there are common elements that would be expected to be found in every programme

Supporting integrated working: Implementation roadmap

The roadmap illustrates the core set of activities to be undertaken by local authorities and their partners in implementing:

- Common Assessment Framework (CAF); *
 - lead professional; *
 - Service Directories; *
 - Information sharing index; *
- and improving practice in
- information sharing; *
 - inter-agency working.

* separate fact sheet available

Development of the roadmap

The roadmap is based on the experiences of many change programmes including the Information Sharing and Assessment Trailblazers, Children's Trust Pathfinders, SureStart and BEST as well as the government guidance on information sharing, CAF and lead professional published in April 2006.

The roadmap has been developed in PowerPoint and is intended for viewing on a PC. It allows the viewer to select specific activities of interest to view, without having to read the whole document.

Contents of the roadmap

The roadmap has three main sections:

- a graphical representation of the activities and their sequencing;
- a page of detailed description for each of the activities in the process flow; and
- a summary of how the processes and tools support the delivery of services to children, young people and their families.

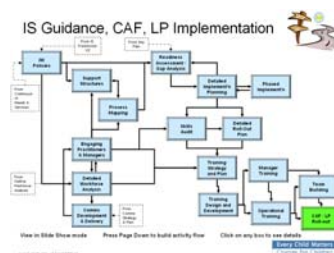
Each of the sections is described below.

Graphical representation

The graphical representation is in the form of a process flow with boxes

representing the activities and the arrows between the boxes

showing the links and dependencies between them. It represents a time line from top left to bottom right of each of the three pages in this section.



Activity descriptions

The detailed page on each activity provides:

- a summary of the activity;
- an explanation of why it is important;
- a more detailed description including key tasks and critical success factors;
- a list of the key pre-requisites; and
- a list of live web links for more detailed information or case studies.



Supporting delivery of services

The roadmap also contains a summary of how the processes and tools support the delivery of integrated services to children and young people. This section shows the positioning and contributions of the processes and tools across a continuum of children's needs and across a common service delivery pathway.

Getting a copy of the roadmap

Copies of the roadmap are available at www.ecm.gov.uk/integratedworking



Fact Sheet

Information Sharing Guidance

Sharing information is vital for early intervention to ensure that children and young people with additional needs get the services they require. It is also essential to protect children and young people from suffering harm from abuse or neglect and to prevent them from offending.

Information sharing: Practitioners' guide is the first cross-Government guidance for practitioners across the whole of the children's workforce. This guidance complements and supports wider policies to improve information sharing across children's services.

Background

Improving information sharing practice is a cornerstone of the *Every Child Matters* strategy to improve outcomes for children and young people. Statutory guidance on the Children Act 2004 (S10 interagency co-operation and S11 safeguarding and promoting the welfare of children), set out clear expectations for local action to improve information sharing.

It is important that practitioners understand when, why and how they should share information so that they can do so confidently and appropriately as part of their day-to-day practice.

A lot of guidance exists which is specific to sharing information within particular settings. However, as children's services move towards more multi-agency working, practitioners felt that clear guidance was needed in order to support this integrated approach.

Developing the guidance

The guidance has been produced in collaboration with Department for Education and Skills, Department of Health, Home Office, (the then) Office of the Deputy Prime Minister, the Department of Constitutional Affairs and the Youth Justice Board.

Representatives from a wide range of professional and regulatory bodies including health, education, social care and police, and both statutory and voluntary agencies were invited to share their views on the guidance.

A public consultation attracted over 250 responses. Four national events offered an opportunity for an open debate on the guidance. These events were attended by over 300 practitioners and managers. The views of children and young people were also sought.

The Government's Response to the guidance is available from www.dfes.gov.uk/consultations

Aims of the guidance

Recognising that most decisions to share information require professional judgment, the cross-Government guidance aims to improve practice by giving practitioners across children's services clear guidance on when and how they can share information.

It seeks to provide clarity on the legal framework for practitioners sharing information about children, young people and families.

The guidance and the supporting materials – the case examples, further guidance on legal issues and the training materials - aim to provide practitioners with the tools they need to develop their understanding and confidence in sharing information professionally and lawfully.

Who the guidance is for

The guidance is intended for all practitioners who work with children or young people, employed or volunteers, working in the public, private or voluntary sectors. It is also for practitioners who work in services provided for adults, for example mental health services and drug and alcohol services, as some of the adults accessing those services may have parenting or caring responsibilities.

Guidance content

- **Practitioners' guide** - Includes key points that practitioners should consider before they share information, a step-by-step process, key principles of information sharing, a glossary and signposts to key sources of further guidance.
- **Case examples** - illustrating information sharing in practice.
- **Further guidance on legal issues** - a summary of the laws affecting information sharing in respect of children and young people.

Additionally, a set of training materials is available for local agency and multi-agency training, and for use by providers of initial training and continuous professional development for the children's workforce.

Further information

The guidance and supporting materials are available from www.ecm.gov.uk/informationsharing



Every Child Matters Change For Children

Fact Sheet

Integrated Working

Background

Improving outcomes for children and young people, so that every child achieves their potential, involves changes to culture and practice across the children's workforce. These new ways of working shift the focus from dealing with the consequences of difficulties in children's lives to early intervention and effective prevention. Every Child Matters sets out a children's trust model for whole-system change, with integrated frontline delivery, processes, strategy and governance.

Integrated working focuses on enabling and encouraging professionals to work together and to adopt common processes to deliver frontline services, coordinated and built around the needs of children and young people.

Integrated Strategy

At a strategic level implementation of integrated working is underpinned and supported by:

- development of Children and Young People's Plans;
- the Children's Services Grant;
- Regional government offices offering continued support to local change for children programmes; and
- monitoring through annual performance assessment and joint area reviews (JARs.)

Integrated Processes

The delivery of integrated frontline services to improve outcomes for children and young people will need to be supported by more integrated processes which drive multi-agency working.

Key integrated processes include:

The **Common Assessment Framework**: a national, common process for initial assessment to identify more accurately and efficiently the additional needs of children and young people at risk of poor outcomes, which will reduce duplication of assessment, produce a shared language across agencies and improve referral between agencies

The role of the **lead professional** to: act as a single point of contact that children, young people and their families can trust, and who is able to support them in making choices and in navigating their way through the system; ensure that children and families get appropriate interventions when needed, which are well planned, regularly reviewed and effectively delivered; reduce overlap and inconsistency from other practitioners.

Piloting the concept of the **budget holding LP**: testing whether better service packages could be delivered by giving lead professionals a budget to procure goods and commission services directly from providers.

Better **information sharing** between professionals: development of national standards for information sharing across local children's services, clear guidance for practitioners covering health, education, social care and youth offending, and creation of index systems to facilitate information sharing.

Developing the **IS index**: a tool to support better communication among practitioners across education, health, social care and youth offending. The IS index will allow practitioners to contact one another more easily and quickly, so they can share information about children and young people who need services or about whose welfare they are concerned.

A **Multi-Agency Working Toolkit**: a web-based toolkit resource to support the delivery of multi-agency working. The resource covers: the benefits of multi-agency working; success factors for effective multi-agency working; practical advice on setting up services and working through some of the challenges; case study examples; a common language glossary, exploring how different practitioners use common terms; an agency A-Z explaining the roles and responsibilities of different agencies.

Find out more at:

<http://www.ecm.gov.uk/integratedworking>



Every Child Matters Change For Children

Fact Sheet

The lead professional

All children and young people who require integrated support from more than one practitioner should experience a seamless and effective service. This is delivered most effectively when one practitioner – a lead professional - takes a lead role to ensure that front-line services are co-ordinated, coherent and achieving intended outcomes.

Background

Every Child Matters: Change for Children (2004) sets out an agenda for integrated front-line services through, amongst other things, the lead professional role. The statutory guidance on the Children Act 2004 (S10: interagency co-operation and S11: safeguarding and promoting the welfare of children) sets out clear expectations for the implementation of the role.

What is the role of a lead professional?

The lead professional is not a new role. Instead, they deliver **three core functions** as part of their work:

- act as a single point of contact for the child or family;
- co-ordinate the delivery of the actions agreed;
- reduce overlap and inconsistency in the services received.

A lead professional is accountable to their home agency for their delivery of the lead professional functions. They are not responsible or accountable for the actions of others.

Who will lead professionals work with?

Lead professionals work with children and young people with additional (including complex) needs who require an integrated package of support from more than one practitioner.

Who should be the lead professional?

The role of lead professional can be taken on by many different types of practitioners in the children's workforce as the skills, competence and knowledge required to carry out the role are similar regardless of professional background or job. The role is defined by the functions and skills, rather than by particular professional or practitioner groupings.

What skills and knowledge are required in a lead professional?

Lead professionals need the knowledge, competence and confidence to:

- develop a successful and productive relationship with the child and family, and communicate without jargon
- organise meetings and discussions with different practitioners
- use the Common Assessment Framework* and develop support plans based on the outcomes
- co-ordinate the delivery of effective early intervention work and ongoing support
- work in partnership with other practitioners to deliver the support plan

Learning from experience

Evidence from practice suggests that the introduction of a lead professional role is central to effective frontline delivery of integrated children's services. It ensures that professional involvement is optimised, co-ordinated and communicated effectively. Most importantly, it provides a better experience for children, young people and families involved with a range of agencies.

Implementation

Following trials in 2005-6, national implementation is taking place between 2006 and 2008. The Children's Workforce Development Council will assume responsibility for supporting implementation from the end of September 2006.

National support

Guidance for managers and practitioners was published in April 2006 and is available from the website at the foot of the page. This replaces the guidance issued in July 2005 and is based on the practice emerging in a number of authorities which trialled lead professional models of working.

The guides set out a broad framework of the key responsibilities, skills and knowledge required in a lead professional and draws together key themes from areas that have developed the role: effective practice models, working solutions, and suggestions as to how the role may be developed, implemented and managed in practice.

Budget-holding lead professional

Pilots are trialling a related concept – that of budget-holding lead professional. The aim is to test whether better service packages for core groups of children and families could be delivered by giving lead professionals a budget with which to commission services directly from providers. Fifteen local authorities are taking part in the pilots.

Further information

Also available on the website are training materials and case studies from trial areas.

For more information:

www.ecm.gov.uk/leadprofessional

August 2006

*see separate fact sheet



Every Child Matters Change For Children

Fact Sheet

Multi-agency working

Multi-agency working is an effective way of supporting children and families with additional needs and helping to secure real improvements in their life outcomes.

Background

Following the Green Paper *Every Child Matters* (Sept 2003), it is becoming increasingly common for education, health, youth justice, social care, youth work, voluntary and community sector and other children's services to join forces to work more collaboratively around a preventative agenda.

Multi-agency working can make a unique contribution to preventative and early intervention services, because it has been shown to be an effective way of addressing the wide range of cross-cutting risk factors that contribute to poorer outcomes for children and young people.

Local areas are now undertaking an extensive reconfiguration of services, to offer earlier, more coherent support which meets the needs of children and families in convenient locations and in a more streamlined way.

Different models of multi-agency working

A lot of progress has already been made at a local level in the development of multi-agency projects and initiatives. The diversity demonstrates that there is no one, correct way of multi-agency working. However, a review of practice shows that it is possible to group multi-agency working into three very broad models. These are intended to assist local areas in thinking through the different structures and issues, but there are no hard and fast rules about how multi-agency services should be set up:

1. Multi-agency panel

- Practitioners remain employed by their home agency.
- They meet as a panel or network on a regular basis to discuss children with additional needs who would benefit from multi-agency input.
- In some panels, case work is carried out by panel members. Other panels take a more strategic role, employing key workers to lead on case work.

An example of this type of working arrangement is a Youth Inclusion and Support Panel (YISP).

2. Multi-agency team

- A more formal configuration than a panel, with practitioners seconded or recruited into the team.
- Team has a leader and works to a common purpose and common goals.
- Practitioners may maintain links with their home agencies through supervision and training.
- Scope to engage in work with universal services and at a range of levels - not just with individual children and young people, but also small group, family and whole school work.

Examples include Behaviour & Education Support Teams (BESTs) and Youth Offending Teams (YOTs).

3. Integrated service

- A range of separate services share a common location, and work together in a collaborative way.
- A visible service hub for the community.
- Has management structure that facilitates integrated working.
- Commitment by partner providers to fund/facilitate integrated service delivery.
- Usually delivered from school/early years settings.

Examples include Sure Start children's centres and extended schools that offer access to a range of integrated, multi-agency services.

Getting started in multi-agency working

A web-based resource to support managers and practitioners is now available. It describes features of the three service delivery models, providing working solutions and good practice examples.

The resource addresses:

- The benefits of multi-agency working.
- Success factors for effective multi-agency working.
- Toolkits for managers and practitioners.
- Case study examples..

There is also:

- A common language glossary, exploring how different practitioners use common terms.
- An agency A-Z explaining the roles and responsibilities of different agencies.

A draft framework *Championing Children* has been developed to establish a common understanding about the skills, knowledge and behaviours needed by leaders and managers of integrated or multi-agency children's services. Following the completion of field testing and evaluation, the final framework will be made available by the Children's Workforce Development Council in autumn 2006.

For more information:

<http://www.ecm.gov.uk/multiagencyworking/>

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