

<b>Title of paper:</b>	CAF Performance - update report	
<b>Report to:</b>	Children's Partnership Board	
<b>Date:</b>	7 <sup>th</sup> December 2011	
<b>Relevant Director:</b>	Tim O'Neill	<b>Wards affected:</b> All
<b>Contact Officer(s) and contact details:</b>	Viv McCrossen Head of Service, Family and Community Team Central Locality	
<b>Other officers who have provided input:</b>	Carol Woods & Mandy Smith CAF and Lead Professional Managers	
<b>Relevant Children and Young People's Plan (CYPP) objectives(s):</b>		
<b>Stronger safeguarding</b> – With a key focus on ensuring that there are high standards of safeguarding across all agencies and that the Partnership takes a pro-active approach to the elimination of domestic violence.		X
<b>Healthy living</b> – With a key focus on increasing the proportion of children and young people who have a healthy weight.		X
<b>Reducing substance misuse</b> – Partnership work to lessen the impact on children of parental drug and alcohol misuse and to reduce drug and alcohol misuse amongst children and young people.		X
<b>Raising attainment</b> – Raising the attainment levels and increasing engagement in employment, education and training.		X
<b>Improving attendance</b> – Improving rates of attendance at both Primary and Secondary as a key foundation of improving outcomes.		X
<b>Summary of issues (including benefits to customers/service users):</b>		
<ul style="list-style-type: none"> <li>• A summary of CAF performance across the city for the preceding 12 months up to the 30<sup>th</sup> September 2011, including progress made with vulnerable groups of children.</li> <li>• An outline of CAF Quality Assurance Framework and progress to date.</li> <li>• Importance of the links between continued CAF delivery and the successful implementation of the Family Support Strategy &amp; Pathway.</li> <li>• Highlights risks in relation to the transfer of performance management responsibilities of the CAF to partner agencies.</li> </ul>		
<b>Recommendations:</b>		
<b>1</b>	Board Members to cascade information in relation to CAF performance within their agency.	
<b>2</b>	Board Members to support and champion the implementation of the Family Support Strategy & Pathway in their home agencies, to support the sustained progress in CAF initiations and the receipt of early help for families.	
<b>3</b>	Board Members to ensure appropriate agency representation within the Family Support Implementation Group.	
<b>4</b>	Board Members to note the information in relation to new arrangements for performance monitoring and reporting CAF data.	
<b>5</b>	Board Members to promote use of CAF Quality Assurance Framework within their agency.	

# 1. BACKGROUND AND PROPOSALS

## CAF PERFORMANCE

In the 12 months up to the 30<sup>th</sup> September we have seen a continued upward trend in the numbers of CAF's initiated per quarter. The totals for quarter 2 this year represents a **92%** increase compared to quarter 3 in the last financial year.

	<b>Q3 2010/11</b>	<b>Q4 2010/11</b>	<b>Q1 2011/12</b>	<b>Q2 2011/12</b>	<b>Total</b>
Number of CAFs initiated	132	152	201	253	738

The three agencies initiating the highest number of CAF's have remained consistent with previous years, and are;

- Children and Family Services
- Children's universal health services (Health Visiting, School Nursing and Midwifery)
- Schools.

The number initiated by schools has remained consistent on average 52 new CAFs per quarter; whilst Children & Family Services have increased from 67 to 125 CAFs a quarter; an increase of 87% and an average of 84 per quarter. The increase in Children & Family Services CAF initiations can be attributed in the main to;

- Children's Centre Workers
- Education Welfare Service
- The Disabled Children's Team.

Children's universal health services have significantly increased their CAF initiations from 13 in quarter 3 last year to 68 in quarter 2 this year; an improved average of 40 CAFs per quarter over the 12 month period and equivalent to a 423% increase. These increases in CAF initiations were initially led via Midwifery, although in the last quarter numbers haven't been sustained and have now fallen. In the last two quarters Health Visitors have increased their CAF initiations, this has helped universal health services maintain their increased CAF activity.

'Behaviour Issues' and 'Parenting Support' remain the main reasons for CAF initiation, however there has been an increase in the reason cited as 'Persistence Absence'; 12 months ago there were only 5 per quarter and in the last quarter they have now increased to 21, representing a fourfold increase.

The total for CAFs closed during this period was 203, the predominant closure reason being 'needs met' or 'support reduced to single agency'; these represent 128 out of the 203 closed CAF's, or 63%. A further 34 out of 203 (16%) were closed because the assessment identified the need for specialist service involvement.

## VULNERABLE GROUPS OF CHILDREN

Earlier this year the partnership identified key groups of children and young people where there was an expectation that they should be receiving assessment and support via the CAF process. Performance monitoring of these groups has proved problematic due to the limitations of partnership data. Currently we are able to monitor four groups of vulnerable children, teenage pregnancy, persistence absence, exclusions and permanent exclusions. The first periodic milestone of 50% of target groups receiving support via CAF is 30<sup>th</sup> November 2011. Initial findings from 1<sup>st</sup> April to 21<sup>st</sup> November 2011 show that;

### Fixed Term Exclusions

189 children received 2 of more fixed term exclusions in a 6 month period, 33% of these children have had a CAF.

### Permanent Exclusions

26 children have had a permanent exclusion, 38% have had a CAF.

### Teenage Pregnancy

Data not yet obtained.

### Persistence Absence (information from EWS)

There were 126 children who were notified as persistently absent and eligible for a CAF during 1<sup>st</sup> September to 21<sup>st</sup> October. This resulted in;

- 74 offers of assessment, 52 did not engage
- 18 refused CAF
- 31 CAFs initiated (25%)

## **QUALITY ASSURANCE FRAMEWORK**

In May 2011 Nottingham agreed to implement a Quality Assurance Framework to ensure the Common Assessment Framework (CAF) process is being conducted to an agreed standard. The document is designed to support agencies in understanding what is required of them in order to meet minimum quality standards. Roll out of the framework is in its initial stages and is yet to be fully embedded in agency practice. Partnership agencies will need to take responsibility to ensure it is embedded within their processes. Copies of the Framework can be found at; <http://www.nottinghamcity.gov.uk/ics/index.aspx?articleid=14649>

## **FAMILY SUPPORT STRATEGY**

In May 2011 the Family Support Strategy was launched. This outlined Nottingham's vision key priorities and responsibilities of Nottingham Children's Partnership in the provision and delivery of services to children and families. A further supportive document the Family Support Pathway was published in October 2011 with the purpose of ensuring children and families receive the right help at the earliest opportunity. The CAF is integral to the effective delivery of the Family Support Pathway, to ensure that the needs of children and families are assessed and identified earlier and that coordinated multi agency action plans are produced and implemented when needed.

The Family Support Strategy holds partnership agencies responsible for implementing the Family Support Pathway, this includes their CAF performance. To support this process a partnership wide Family Support Implementation Group has been formed and has begun to develop a Family Support Implementation plan. The group will meet quarterly with partner agencies expected to report on their progress. It is essential that all partnership agencies are represented or contribute effectively to this plan.

## **RISKS**

- Currently the three CAF posts within in the Local Authority are under consultation, with the proposal that they are disestablished in January 2012. Partnership agencies need to ensure they continue to implement CAF processes and the Quality Assurance Framework in order to sustain both the increased CAF activity and to ensure quality; promoting better outcomes for children and their families.
- Changes to reporting mechanisms by shifting the responsibility from the Local Authority to Partnership agencies via the Family Support Implementation Group. It is crucial that Partnership agencies have robust and effective processes in place to

monitor and report on their own CAF performance, including their quality assurance processes, via the Family Support Implementation Group.

## **2. FINANCIAL IMPLICATIONS**

There are no financial implications from this report to Nottingham City Council.

## **3. LEGAL IMPLICATIONS**

None.

## **4. CLIENT GROUP**

The Common Assessment Framework is relevant to all children, young people and their families and used for children/young people who have additional or extensive needs.

## **5. IMPACT ON EQUALITIES ISSUES**

Implementation of the CAF gives us an equitable approach to dealing with the identified needs of our vulnerable children and young people. There is an equalities impact assessment being completed in relation to the disestablishment of the CAF team.

## **6. OUTCOMES AND PRIORITIES AFFECTED**

The Common Assessment Framework is a cross-cutting theme, which when implemented successfully would contribute to all outcomes and priorities of the Children and Young Peoples Plan.

## **7. CONTACT DETAILS**

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