Exploration of the costs and impact of the Common Assessment Framework

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Introduction

This study, aimed to explore the impact of the Common Assessment Framework (CAF) on both children and families and professionals, and examined how far a ‘bottom up’ cost calculation methodology could be extended to include the costs of the Common Assessment Framework. The study was carried out in four local authorities using a mixed methods approach.

Key findings

- The models of service delivery, along with the remit of the teams responsible for the Common Assessment Framework (CAF), differed substantially across the four participating authorities. The implementation and use of CAF was led by Integrated Working (IW) teams in two of the authorities and CAF strategy teams in the other two authorities. Two of the authorities had implemented eCAF and two had developed local systems for the recording of CAF.
- Overall, parents/carers interviewed for this study were positive about the CAF and the support they received following an assessment. The interviewees that were less positive were those who had experienced delays or a lack of communication from the CAF initiator following the completion of the CAF assessment.
- The Lead Professional role was highly valued; both parents/carers and professionals reported that this role was both a key service, through the provision of emotional and practical support, and of central importance to ensuring a coordinated service response, through advocacy.
- Some parents/carers expressed concerns that being assessed using a CAF might lead to professionals across agencies making judgements about their parenting skills and subsequently result in a referral to children’s social care. Clarification for parents/carers of data sharing protocols, along with explanation of the link between CAF and children’s social care might alleviate these misconceptions.
- Professionals using CAF in the participating authorities reported that in general it had resulted in
increased professional awareness of the range of services available to meet the needs of children and families and had brought professionals together in new contexts.

- Professionals reported that the CAF helped them to gain a broader perspective of the needs of children and families: as a result this enhanced the potential to achieve positive outcomes.
- Professionals expressed concerns about duplication of recording when they considered the completion of the CAF assessment to overlap with their usual recording requirements. In these instances there was reluctance by workers to complete CAF assessments or volunteer to take on the Lead Professional role. Where CAF assessments had replaced prior reporting requirements professionals indicated that recording had been streamlined.
- The costs of a CAF varied according to the needs of the child and family, the type of professional undertaking the CAF or acting as Lead Professional, the type and number of services provided to children and families who have been assessed using CAF and the method by which CAF was recorded.
- Additional variations in unit costs across the CAF processes were identified. These were due to the range of salaries paid to professionals completing the CAF assessment or taking on the role of the Lead Professional. Higher unit costs were evident when the processes were undertaken by service managers, head teachers and educational psychologists.
- It was possible to use child level data for a small sample of children and families to calculate the costs of CAF over time. However, without the systematic collection and extraction of key data items it is not possible to fully understand the costs of providing support to children and families who have been assessed using CAF.
- The use of eCAF facilitated the electronic sharing of information across agencies: opportunities for data sharing were more limited in the authorities that had developed local recording systems.
- The CAF and Integrated Working teams expressed concerns that CAFs were being initiated for children who had previously met the thresholds for children’s social care. They attributed this to the recent increases in referrals to children’s social care and the subsequent capacity issues.

**Background**

The Common Assessment Framework (CAF) is a standardised approach for the assessment of children and their families, to facilitate the early identification of additional needs and to promote a coordinated service response. CAF is underpinned by an integrated approach to support and has been designed for use by all professionals working with children and families with additional needs, but who do not meet the threshold for more intensive interventions such as those associated with children’s social care or safeguarding. Existing research suggests that CAF can lead to positive outcomes for children and families and help to enhance integrated working across the children’s workforce (Gilligan and Manby, 2008; Norgate Traill and Osbourne, 2009; Easton, Morris and Gee, 2010).
Policy emphasis placed on early intervention and prevention has raised the prominence of CAF across all agencies working with children and families and many local authorities have created dedicated teams designed to support the implementation and use of CAF. However, concerns have been raised in recent years regarding the increased demand for all services for children and families, including those using CAF. At the time of completing this research report there is no universal system for the recording of CAF and it is currently not possible to ascertain a national picture regarding the numbers of children and families who have been assessed using a CAF, and the costs of supporting them. While local innovations continue to be developed by local authorities, it is not clear whether local authorities are able to systematically follow a child’s pathway through CAF and children’s social care services, as recommended by Professor Munro (Cm 8062).

Aims

This exploratory study aimed to examine the costs and impact of the Common Assessment Framework and focused on four key areas:

i. *The costs of the Common Assessment Framework*, including assessment activities; the role of the Lead Professional; and the role of Team Around the Child meetings;

ii. *The services provided to children and families*, by examining the services they received following a CAF assessment and an exploration of how those services are recorded;

iii. *The impact of the CAF on professionals*, including capacity issues, inter-agency and joint working, the numbers of CAFs being completed and how the assessments are recorded;

iv. *The impact of CAFs on families*, including the views and experiences of a sample of parents/carers who have received an assessment, their perception of the process and what impact the CAF assessment and the provision of services has had on them.

Methodology

The research was carried out in two phases. In Phase 1, focus groups and research project set up interviews/discussions were carried out with 20 personnel from the teams responsible for CAF in the four participating local authorities. Phase 2 consisted of:

- Additional focus groups conducted with 61 professionals from a range of different agencies using CAF;
- An online survey completed by 237 professionals that had recently completed a CAF assessment or were currently acting as a Lead Professional for a CAF case;
• Interviews with 29 parents or carers that had been assessed using the CAF; and
• Collection of child level data items for a sample of 20 families in each of the four local authorities.

The bottom-up costing methodology used in the study uses ‘time use activity data’ (collected as part of the online surveys) as the basis of building up unit costs. These time use data are applied to salaries and overhead costs to calculate unit costs.

Findings

The impact of CAF on children and families

• The majority (23) of the interviewed parents/carers were positive about the Common Assessment Framework. The parents/carers reported that CAF enabled them to access the support they needed and facilitated a coordinated response to the support.
• Six interviewees reported that they had not received any feedback on the outcome of the CAF assessment nor had they received any support or services subsequent to the assessment being completed. These interviewees did not consider the CAF to have been beneficial.
• The Lead Professional role was highly regarded and valued by the parents/carers. The Lead Professional provided both practical and emotional support to families and undertook an advocacy role on their behalf.
• Around half of the parents/carers who were interviewed (14) had attended a Team Around the Child (TAC) meeting. Those who were most positive about the TAC meetings were those where the TAC had resulted in an action plan or where new ideas or suggestions about how the child and family might best be supported were made. The interviewees were less positive about TAC meetings that were perceived to be a review or a meeting to ‘catch up’ on what had been happening.
• A small number of the parents/carers raised concerns about the link between the CAF and children’s social care and the potential for their child and family to be subject to increased stigma or scrutiny as a result of having been assessed using a CAF.
• The parents/carers emphasised the need to ensure that their views are both listened to and acted upon in a way that was most appropriate for them and their family.

The impact of CAF on professionals

• Professionals across a range of agencies participating in the study agreed that they were well supported by the CAF and Integrated Working teams.
• Professionals reported that in general CAF had resulted in an increased awareness of the range of services available and had brought professionals together in new contexts. However, some barriers to inter-agency working were identified including differences in agency cultures and information
sharing protocols, along with perceived tensions between ‘CAF professionals’ and those from children’s social care.

- Although there was consensus about the intentions underlying CAF, in practice there was a lack of clarity amongst professionals regarding the purpose of CAF: in each of the local authorities CAF was being used both as a means of accessing services and as an assessment of children’s needs below children’s social care thresholds.

- Professionals participating in the study commented that CAF, including the assessment activities, the Lead Professional duties and the Team Around the Child (TAC) meetings had increased workload demands, in particular with regard to increased paperwork and additional procedures. Professionals in each of the local authorities acknowledged that in some instances they would not complete a CAF assessment, or volunteer to take on the role of the Lead Professional, because of the workload implications.

- Time was also frequently cited as a barrier to producing high quality assessments, especially where it was considered that there was insufficient time to work directly with the children and families.

- While there were some perceived difficulties associated with the role of Lead Professional, focus group participants viewed this as the key role in establishing a clear action plan with children and families and working towards these targets with other professionals.

- Participants reported that there was a need for training in assessment skills, especially for those who would not have had this type of training in their own professional practice.

The costs of CAF

- Although the ways in which the Common Assessment Framework was implemented differed across the four participating authorities, it has been possible to develop a generic CAF process model to calculate the unit costs of CAF. These are: Process 1: Intention to complete a CAF; Process 2: Complete CAF assessment; Process 3: Team Around the Child meeting; Process 4: Provision of ongoing support; Process 5: Close CAF.

- The unit costs of the CAF processes have been calculated using a ‘bottom up’ approach. This method uses ‘time use activity data’ to build up costs over time, by identifying the number and frequency of activities occurring over a specific time period.

- The unit costs for each of the CAF processes were calculated using the salary information for each type of professional undertaking CAF in the four participating local authorities. The average unit costs for the five CAF processes are detailed in Table 1 below.
Table 1: Average unit costs for the five CAF processes (for London and Out of London authorities)

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<td>Mean</td>
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<td>204</td>
<td>223</td>
<td>197</td>
<td>165</td>
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<td>Median</td>
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<td>203</td>
<td>199</td>
<td>190</td>
<td>162</td>
<td>71</td>
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<tr>
<td>Mean</td>
<td>25</td>
<td>253</td>
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<td>226</td>
<td>165</td>
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<tr>
<td>Median</td>
<td>18</td>
<td>230</td>
<td>225</td>
<td>222</td>
<td>162</td>
<td>81</td>
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Standard costs for London and Out of London authorities

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<th>Average costs for all professionals</th>
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<td>Out of London Costs</td>
<td>22</td>
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<td>London Costs</td>
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- The seniority and therefore, the salary of the professional undertaking the CAF process was identified as a key driver for the overall costs of the CAF.
- Previous research carried out by CCFR has identified variations in the time taken to complete, and therefore, the cost of, activities associated with the provision of child welfare services. While the majority of variations in the data in this study were not statistically significant, there were identifiable variations related to two key areas: the CAF process (including the type of recording method used in the authority, the use of resource panels and the membership of the TAC meeting), and those associated with the children’s needs.
- The data suggest that some efficiencies may be produced through the implementation of a universally accessible recording system for CAF such as eCAF.

**Making use of cost calculations**

- The research team identified a set of child level data items that were necessary to make use of the unit cost estimations and to explore the possibility of aggregating costs and following a child’s journey. These data items included: the needs of the children and families; dates of assessments and TAC meetings; and services accessed by the children and families.
• During the research many of the required data items were not necessarily routinely recorded or extractable at an individual child level. There was also variability across the authorities, depending on the method of recording CAFs.

• Unit costs and anonymised data were used to calculate the costs of undertaking a CAF with the 21 sample children and families included in the child level data collection. The costs ranged between £743 and £2,130 for the six month time period, and the average (mean cost) was £1,515. Costs varied according to the needs of the children, the type of professional undertaking the CAF processes and the recording system used within the local authority.

**Implications for policy and practice**

There is evidence from the participating authorities that the national economic situation at the time of writing had impacted on the availability of services. Both professionals and parents/carers reported that a number of services had either reduced their capacity or were no longer available. This potential shortfall in services coupled with any increase in the number of CAF referrals and an increased demand on children’s social care emphasise the need for consideration of the allocation of resources and the longer term impact on children and families if they do not receive the support and services to meet their needs.

Difficulties were identified in extracting child level data items from systems and linking it across CAF and children’s social care systems. Although there are difficulties and limitations with the current arrangements, this study has highlighted the potential use and advantages of professionals from a range of agencies being able to access a single electronic CAF record for a child and their family.

If local systems were developed to facilitate the appropriate matching of cases across CAF and children’s social care systems, local authorities could make use of the data to demonstrate the value of early intervention and preventative services, both in terms of outcomes and costs.

This study identified positive messages about CAF both from parents/carers and professionals. The parents/carers highlighted the importance of the role of the Lead Professional in supporting their needs and how CAF had facilitated sharing of information across agencies. Parents/carers also highlighted frustrations when there was a lack of follow up after a CAF assessment.

Professionals reported that the use of the CAF had helped them gain a broader understanding of the needs of children and families. Some professionals reported concerns about the bureaucracy associated with the CAF processes. These tended to be incidences where the CAF had been used as a means of referral for a single service, suggesting its use in this respect could be reviewed.
The research found, however, that investment in terms of time and resources is required to implement the CAF.

Conclusion

This study found that both professionals using a CAF and families who have been assessed using it have a positive view of certain aspects of the CAF. In particular the parents/carers cited the importance of a Lead Professional working as an advocate. They also highlighted that the CAF assessment negated the need for them to ‘tell their story’ to a range of professionals in order to access the range of support and services that they may require. The professionals who participated in the focus groups considered CAF to have progressed inter-agency working.

However, for CAF to work effectively substantial investment was required both in terms of expenditure and time to embed the framework in practice across the range of agencies. The research found that professionals and families were in favour of the data sharing that eCAF facilitated. This research study coincided with the early stages of the roll out of a pilot National eCAF system (Department for Education, 2011a). Professionals within the CAF and IW teams reported that they were optimistic about the potential of a National system.

At the time of completing this research report there is no universal and/or systematic approach to recording CAFs or to linking the data to social care management information systems. A national recording system for CAF, National eCAF, was in the early stages of roll out to 27 local authorities and national voluntary organisations (Department for Education, 2011a). However, after a period of consultation the government announced in December 2011 that National eCAF was to be decommissioned by May 2012 (Department for Education, 2011b).

While it has been possible to extend the research cost methodology to include the CAF, without the systematic collection and extraction of child level data items it is not possible to follow children’s journeys and to build up a national evidence base to inform strategic planning and commissioning of early intervention and prevention services.
References


Additional Information

The full report can be accessed at http://www.education.gov.uk/publications/
Further information about this research can be obtained from
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