

Some Questions

- Are you** a member of the children's workforce?
- Do you** know how ContactPoint will affect you and the way that you work?
- Do you** know how information on ContactPoint will reach you?
- Is ContactPoint** discussed at team briefings/update sessions?

If you answered "yes" to the first question you need to be in a position to answer "yes" to the remaining questions. Do you need to ask your line manager or cluster group manager for more information?

Q How will ContactPoint be accessed?
A Authorised practitioners will be able to access a child/young person's record through their case management system, the web or, if appropriate, through a helpdesk.

Q What is an authorised practitioner?
A An authorised practitioner will have to meet the following conditions:
- hold an enhanced CRB check that is less than three years old.
- have completed Information Sharing training
- have completed ContactPoint training
- have been issued with a ContactPoint token (issued on completion of ContactPoint training)

Q Will the data and information in ContactPoint be accurate?
A When you access information on ContactPoint you will expect it to be accurate and reliable. You want to be confident in the information you see. But where does the information come from? It comes from you in a lot of cases.

Work is being done to local systems so that the relevant

data you are putting into them can be used to update ContactPoint. (This data transfer will not include case information such as case notes, assessments, and medical data or exam results).

For this reason it is vital that you record data in your system as quickly as possible after the event. You must be confident that it is accurate and has been checked where necessary. Records must also be as complete as possible.

The ContactPoint Local Implementation Team is currently checking how clean your data is and it may be that you need to change the way you record information in your system.

For example, are you entering STD dialling codes in your system? If not, you need to because ContactPoint information will be used by practitioners across the whole of England. All our recommendations will be brought to your attention by managers.

For further information on ContactPoint please telephone 01942 486064 to speak to a member of the Local Implementation Team.

This leaflet can be made available in other languages, on audio tape, CD, large print or other formats on request. Write to us at Change for Children and Young People Co-ordinator, Children and Young People's Services, Wigan Council, 7 Worsley Terrace, Standishgate, Wigan, WN1 1XW.

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Contact Point and Common Assessment Framework (CAF)

Newsletter

ContactPoint
because every child matters

working together
WIGAN BOROUGH PARTNERSHIP
for Children, Young People and Families



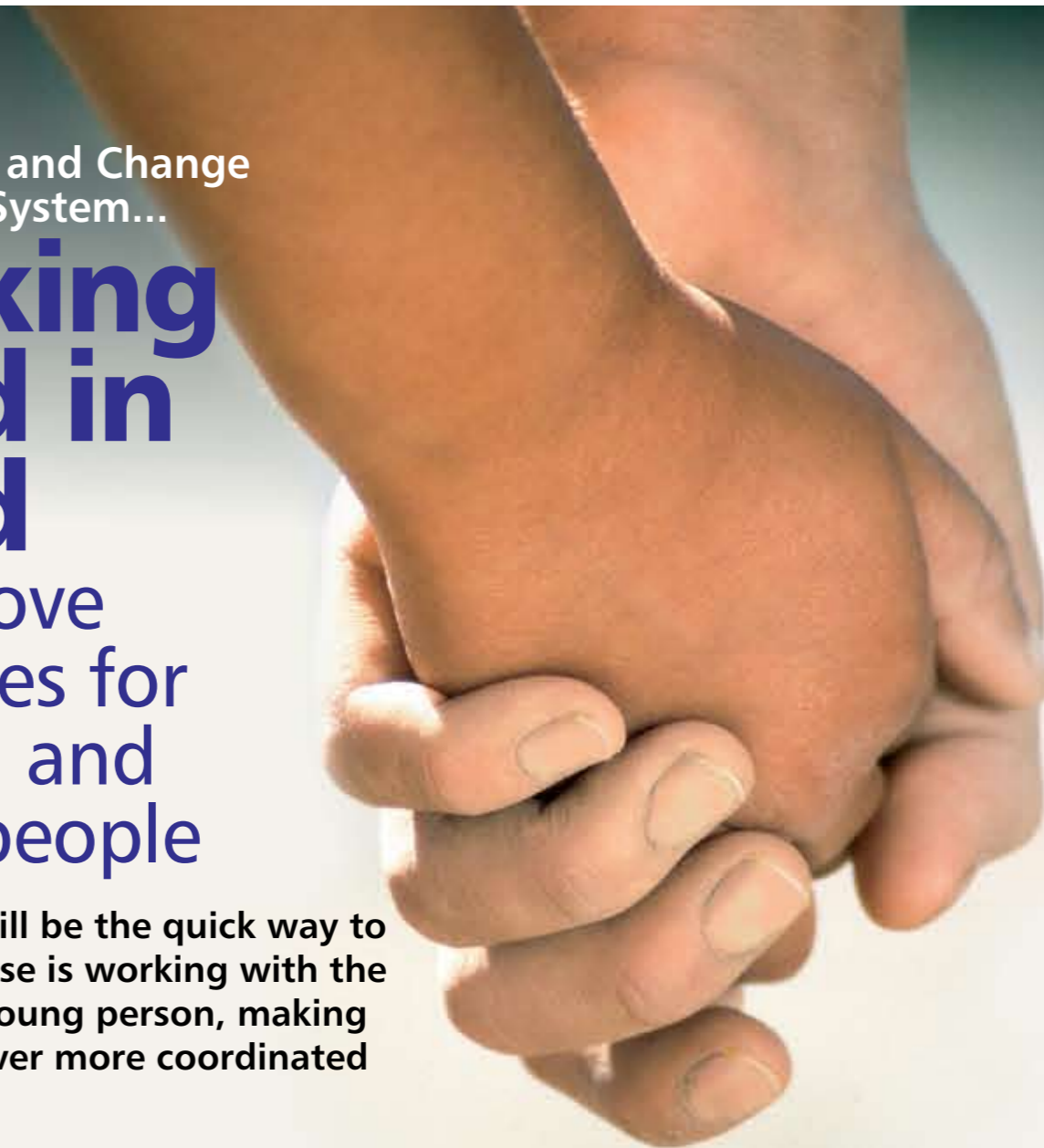
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ContactPoint and Change for Children System...

working hand in hand to improve outcomes for children and young people

ContactPoint will be the quick way to find out who else is working with the same child or young person, making it easier to deliver more coordinated support

- ContactPoint is a tool to support the Every Child Matters Agenda and therefore supports improving outcomes for children and young people. Managers and practitioners in the Borough will start to use it later this year.
- All members of the children's workforce should be aware of ContactPoint, but not all members of the children's workforce will have access to the system.
- Regulations made under the Children Act 2004 state which roles in the children's workforce are required to have access to ContactPoint and also to supply information to it.
- Partners (health, education, social care, youth justice and some voluntary organisations) are currently considering who, within their organisation, should be given access to the system and access the training.



Common Assessment Framework

As everyone should be aware, use of the Common Assessment Framework in Wigan Borough started in September 2006. So far though the number of completed 'common assessments' in the Borough is very low. Not only is the number of CAFs much lower than in comparable areas in the North-west, it is also much lower than we expected - given the scale of need amongst children, young people and their families in the Borough. In practice, this means members of the children's workforce are not using a tool that national and local experience shows can help to improve outcomes for children and young people. So in this issue we provide:

- An example of how a common assessment helped a child
- The experiences and thought of two practitioners who are using CAF to improve outcomes for children and young people;
- A light-hearted look at some of the reasons provided by practitioners for not doing a CAF (hopefully you won't recognise yours!); and
- A story.



An example

● **Circumstances** – S is 8, lives with members of her extended family and attends a local primary school. S has a range of needs, including possible specific learning difficulties; health problems and presenting behaviours in school and in the community that worry her carers and practitioners.

they found the process very helpful – and that it relieved them of a lot of stress and worry.

● **Worries** – S was: shunned by/isolated from peers; having particular problems in number and maths work at school; repeated infections in ear, nose, throat; and, physically highly active in school and at home – rarely sleeping more than 4 hours a night. Carers finding it difficult to cope with her activity levels.

● **People involved** – S's carers, Headteacher, Special Needs Co-ordinator (SENCO), School Nurse, Health Visitor (for a younger child in the household), Voluntary sector organisation, Educational Psychologist, and Paediatrician.

● **How the 'common assessment' helped** – S's carers found the number of practitioners, services and meetings very confusing – so the first thing the CAF achieved was to help carers and practitioners make sense of everyone who was involved with S, their reason for being involved, and how to keep in touch with each other. The CAF also produced information about S and her range of needs - and which of them were longer term and which were shorter term. This provided a basis for the multi-agency plan to support S's carers to support S. The information and plan have helped S make progress by focussing on what needs can be met quickly, and what needed to happen to meet her longer term needs. S's carers have said that they found the process very helpful – and that it relieved them of a lot of stress and worry



Practitioners' experience and thoughts on using the CAF

Joanne Edwards & Gill Power
(Education Welfare Officers)

"After the task of completing our first CAF, we have since used the assessment tool on many occasions to gain a greater insight into the families we work with. The CAF allows early identification of additional needs and enables us to assess a young person/family more effectively than previous assessments used.

"The information gained in completing a CAF not only helps us to have a greater understanding of the issues with a family unit but also allows the family to recognise their own barriers. The CAF allows more in depth background information to be collected which provides a clearer overview of the family dynamics. In particular we have found that highlighting the strengths that families/young people already have allows the family to look more at the positives and build on them. "Parents have commented that they found the assessment very useful and that the CAF has allowed them to think about their current situation, especially when they read the completed CAF. We have also been thanked for recognising and documenting families strengths as they often find they only talk about the negatives to professionals. Parents have also commented on being surprised when reading their child's feelings, worries, and what their aspirations are, one Mother commented "I thought he hated me until I read what he had said". "Using a CAF to assess a child's additional needs and deciding how those needs should be met has been very beneficial to our role and an effective tool to develop positive relationships with families. The CAF is an effective tool to gain a clearer oversight into current issues, social histories and allows for forward planning."



"I thought he hated me"

Some reasons provided for not doing a CAF

The following are some reasons provided by members of the children's workforce to the Change for Children and Young People Co-ordinator for not doing a 'common assessment':

- Common Assessment ... that's someone else's problem not mine
- I'd never have made the referral if I'd realised it meant me doing something
- I left the training early and missed the bit about how to fill in the form
- CAF – aren't school nurses supposed to do those?
- Over my dead body – I'm not a social worker
- No ... haven't got time, and neither have my staff
- ... when my manager instructs me to, and not a moment before
- Have you seen my Caseload?
- I'm just back from long-term sick and I've been told I've got to avoid any stress.
- My manager said it's nothing to do with us - we're a tier 4 service
- I already know everything I need to know about [child's name]
- This a paperless office, we do everything online
- I've referred it to [name of service] and told them they need to do the CAF

I'm not a social worker
haven't got time
nothing to do with us
I'm not a social worker
Over my dead body
we do everything online
someone else's problem
social worker everything online

... and a story



Four practitioners in Wigan Borough were involved with a family. The names of these practitioners were: Tom Somebody, Jayne Everybody, Sue Anybody, and Hayley Nobody. All four were very busy people with huge caseloads; but what they accomplished with the family was a shame. Everybody thought a CAF was a great idea: but Everybody thought Somebody should follow it through; Somebody thought Anybody was the best person to do it; Anybody thought Everybody would work on it; and the others left it to Nobody. In the end, no-one ended up doing it. So, despite everyone working incredibly hard, no-one focussed on

the information and an action plan to produce outcomes that were effective for the child. Somebody, Everybody, Anybody and Nobody all vigorously blamed and criticised each other for not doing their job. Of course, what all four practitioners forgot was that common assessments (CAF) are everyone's responsibility - and children and young people in the Borough are the only losers when Everybody argues with Anybody that Somebody should do what anyone and everyone can.