University of Huddersfield Repository

Gilligan, Philip and Manby, Martin

The Common Assessment Framework: does the reality match the rhetoric?

Original Citation

Gilligan, Philip and Manby, Martin (2008) The Common Assessment Framework: does the reality match the rhetoric? Child & Family Social Work, 13 (2). pp. 177-187. ISSN 1356-7500

This version is available at http://eprints.hud.ac.uk/id/eprint/14592/

The Common Assessment Framework: Does the reality match the rhetoric?

Authors: **Philip Gilligan and Martin Manby**

Contact details:

Philip Gilligan, Senior Lecturer in Social Work,
Department of Social Sciences and Humanities
University of Bradford
Richmond Road
Bradford
BD7 1DP
Tel: 01274 233073

E-mail: p.a.gilligan@bradford.ac.uk

Martin Manby, Director,
Nationwide Children's Research Centre
Brian Jackson House
New North Parade
Huddersfield
HD1 5JP Tel: 01274 233073

E-mail: m.manby@hud.ac.uk

Abstract

The Common Assessment Framework (CAF) is an important part of the procedures envisaged in the government's *Every Child Matters: Change for Children (ECM: CFC)* programme. Implementation of CAF, in particular, raises many important questions, not least those arising from the inconsistencies apparent between government rhetoric around the development of multi-agency services provided to all children with 'additional' needs and the actual experiences of children, young people, parents/carers and practitioners in 'real world' situations. This article explores the extent to which the actions of practitioners and the experiences of service users with regard to CAF mirror or differ from those which would be expected in view of the content of government guidance and policy documents. The data used is taken from an evaluation of CAF processes in two locations in northern England over a period of six months. It concludes that very small numbers of children and young people actually received the service; that, despite genuine enthusiasm from practitioners for them to be so, the processes observed could not yet be described as fully 'child centred'; that fathers were insufficiently involved; and that CAF was, in reality, another service 'rationed' according to resources available and according to agencies' priorities.

Key Words: Common Assessment Framework, Rhetoric and Reality.

Introduction

The Common Assessment Framework (CAF) is due to be fully implemented across all areas of England by the end of 2008 and, according to government statements, has the potential to make a major contribution to a positive transformation in services for children and young people. The declared aim is to put the child's rather than services' needs at centre of all agencies' activities. In particular it is suggested that CAF will promote earlier intervention where additional needs are observed; reduce the number and duration of different assessment processes that children and young people need to undergo; improve the quality and consistency of referrals between agencies by making them more evidence-based; help embed a common language about the needs of children; enable information to follow the child; promote appropriate sharing of information: – and that it will do so in the context of working in partnership with children, young people and their parents (http://www.everychildmatters.gov.uk/).

However, the findings reported in this article suggest that the general transformation envisaged is likely to be dependent on much more than the introduction of a new common framework or the enthusiasm, hard work and commitment of the managers and practitioners involved. The authors explore the extent to which the actions of practitioners and the experiences of service users mirror or differ from those which would be expected in view of the content of government guidance and policy documents. The data used is taken from an evaluation of CAF processes in two locations over a period of six months. The authors recognise that such data is unlikely to be 'representative' of England and Wales as a whole or even, perhaps, of the two localities at other times. They do, however, serve to highlight issues that arise from the actual experiences of practitioners and service users in 'real world' situations.

Tensions seem likely to arise from any discrepancy between government policy statements (and resultant expectations) and the actual experience of policy implementation. In the authors' experience and in many different contexts (Barnes and Oliver, 1995; James et al., 1995; Skinns, 2003; McKeigue and Beckett, 2004) such discrepancies frequently result in mismatches between policy rhetoric and day-to-day practice. Such phenomena need to be taken fully into account when evaluating the impact of any new policy or framework.

Powell (2005) suggests that, "for many practitioners research has often seemed irrelevant and unconnected with the day-to-day realities of practice." (p22), but also notes that the frequent emphasis on effectiveness in research comes in part from a commitment to enhance practice. In the work discussed here, the authors have favoured qualitative methods (Everitt and Hardiker, 1996) and approaches, which Beresford and Evans (1999) describe as a 'progressive response', i.e. it "values people's first hand direct experience as a basis for knowledge." (p. 672).

In doing so, they seek to compare the rhetoric' of policy and the 'reality' of experience. 'Rhetoric' and 'reality' are, however, contested terms and the rhetorical tone of policy documents may contribute to changes in some aspects of 'real' practice. Parton and O'Byrne (2000) following Shotter (1993) note that a rhetorical approach to discussion "can have the effect of moving people to action and changing their views and perceptions." (p.16). The current authors acknowledge that reference to 'reality' may itself be a rhetorical device (Brummett, 2003) and that presentations of 'reality' are constructed within particular cultural frames (Goffman, 1975). That said, they have endeavoured to present 'reality' in terms of actions and experiences, which have been reported to them by those involved in the implementation of CAF processes, or which have been directly observed by them in live interactions or through reading relevant documents. They present 'rhetoric' in terms of published statements in government policy documents which attempt to prescribe the actions and behaviour of those involved.

The Common Assessment Framework (CAF)

CAF is described by the Department for Education and Skills (DfES) as one of a "core set of activities to be undertaken by local authorities and their partners" as part of the "roadmap" supporting the implementation of integrated working. (See *ECM: CFC,* 2006). Other activities include the development of the role of lead professionals and service directories and the establishment of a national child index ('ContactPoint') together with what are envisaged as overall improvements in information sharing and inter-agency working.

Major elements of these policies were included in the *Every Child Matters* white paper (DfES, 2003a) published shortly after publication of the Laming report into the death of Victoria Climbé, which had placed similarly great emphasis on the need for improvements in interagency working and information sharing (Laming, 2003). They have also been informed by earlier initiatives and research (DOH, 1999a,1999b; DOH et al., 2000; Aldgate and Statham, 2001) and many were given legislative effect, by the Children Act 2004.

The purpose of and rationale for CAF is set out on the government's Every Child Matters website (http://www.everychildmatters.gov.uk/). All local authorities in England were required to begin implementation of CAF and other aspects of the *Change for Children* programme during 2006. 'Trailblazing' local authorities began to

pilot relevant initiatives in 2005 and the programme is due to be fully implemented across all areas of England by the end of 2008.

Proponents of *Change for Children* emphasise its potential to transform services for 'children with additional needs' so that the child's, rather than the services', needs are at the centre. They see this transformation as being underpinned by a much improved holistic understanding of children and their needs. DfES (2006a) suggests that CAF, especially, "can help practitioners develop a shared understanding of a child's needs, so they can be met more effectively"; that it "will avoid children and families having to tell and re-tell their story"**;** and "has been designed specifically to help practitioners assess needs at an earlier stage and then work with families, alongside other practitioners and agencies, to meet them." (p3). Earlier government documents also highlighted the hope that CAF would mean that resources were used more efficiently (See, for example, NHS, 2004, p17).

DfES (2006a) explains the reasons for the introduction of CAF in terms of wanting to identify children with additional needs early enough to "help them before things reach crisis point." (p3). It emphasises that

> …*the most important way of doing this is for everyone whose job involves working with children and families to keep an eye out for their well-being, and be prepared to help if something is going wrong.* (p3)

> It argues that CAF is a "tool to identify unmet needs". (p3)

Critics, however, suggest that aiming to 'identify' needs is very different from 'meeting' them. They note that CAF has been introduced along with frequently repeated statements emphasising that, since

> *"resources for services are finite, doing a common assessment cannot guarantee that services (especially those involving another agency) will be delivered".* (DfES, 2005a, p4).

Sefton (2004), meanwhile, reports substantial increases in government expenditure on public services, since 1999/2000, especially for services to children. However, he also notes that, "outcomes for the poorest children are still very much worse than for children from better-off families" and argues that "spending is still not sufficiently skewed towards children with the greatest needs". (pp 3-4), while Anderson et al. (2006) question whether the "privacy intrusions" inherent in various aspects of the *Change for Children* programme can be justified in the context of "the scarcity of effective social interventions" (p2).

Literature Review

There are, as yet, few published studies of the implementation of CAF. Much of the relevant literature is focused on exploring the context in which CAF and integrated working are being piloted or on discussion of their likely consequences.

Writers such as Ward et al. (2002) and Pithouse (2006) reported on implementations of earlier common assessment frameworks, but their findings seem relevant to issues arising from the current version of CAF. Ward et al. (2002) note that referrals to social services using the new framework were more likely than others to have been made with the knowledge and consent of parents and were also more likely to include the views of children and parents.

Pithouse (2006) reports that the framework piloted in Wales facilitated better information sharing with social services and appeared to promote a more focused service response to referrals. However, this study also revealed a limited capacity among some occupational groups to engage with particular assessment fields in the CAF and, like the present study, noted that some practitioners were unlikely to seek the views of children when conducting assessments.

Mason et al. (2005) analysed case-file records from all referrals made to child and families teams in Oldham during one month in 2003. They aimed to assess:

> … the potential for cases to be dealt with outside of the formal social services procedures in anticipation of a multi-agency Common Assessment Framework … and to identify the … types of cases which could potentially qualify for a CAF response. (p5)

They categorized 49% as "CAF" cases, which instead of being referred to social services "could be diverted via a common assessment to other forms of intervention." (p13). Their categorization is, arguably, speculative, and possibly contentious, but it is interesting to note, in view of the different patterns found in the study reported in this article, the finding that 43% of such referrals came from the police, 26% from health sources and only 13% from education sources.

Brandon et al. (2006a, 2006b) studied a selection of CAF and Lead Professional (LP) activity in twelve areas chosen to trial these processes ahead of the national roll-out. They examined professional perspectives around what helps or hinders practitioners in implementing CAF and LP working over the period September 2005 to March 2006. Their key findings in relation to CAF included the following:

- "the bulk of CAF work is being undertaken by practitioners from the education and health sectors" (p6)
- "Assessing children holistically demands a range of different skills and a new way of thinking for many practitioners." (p6)
- "CAF may require different patterns of working, is taking more time than previous referral work for most practitioners, and is making new emotional demands on some workers." (p6) (Brandon et al.,2006a)

In another important contribution, Brandon et al. (2006b) suggest that implementation of CAF will be easier where there is a positive cycle which includes: a history of good multi-agency working; clear structures for relevant processes; a willingness to learn from others; perceived benefits for families; and enthusiasm at all levels. These findings were mirrored by the research reported here.

Research into implementation of earlier programmes for children in need and their families (Jones et al., 1998; Cleaver et al., 2003, 2004; Cleaver and Walker, 2004) identified the critical importance of having senior managers who were committed to the strategic aims of improving children's outcomes and to the detailed implementation of new processes throughout their organisations and on an inter-agency basis. The stronger the tradition of good working relationships both within and between agencies, the quicker progress was made.

Studies of similar processes and procedures in Europe, Australia and the UK suggest that enthusiasm for shared principles cannot, in itself, overcome all difficulties that arise from inadequate resources or from agencies pursuing different priorities. O'Brien et al. (2006) emphasise that, despite enthusiasm and commitment in

Children's Trusts for the principle of providing services to the 'whole' rather than the 'sectoral' child, differences remained between agencies "particularly in relation to threshold and intervention decisions." (p394). Valentine et al. (2006), having studied the implementation of the Families First initiative in New South Wales, report that time and resources, in addition to factors such as inclusive practice and building relationships, are key to successful implementation. Katz and Hetherington (2006), note that,

> European experience suggests that the provision of resources and time for both formal and informal communication between practitioners from different agencies and professions is a priority for making integration work. (p439)

May-Chahal and Broadhurst (2006), similarly, conclude that holistic provision of services for children is inhibited by the difficulties involved in identifying shared objects of intervention between professionals, carers and children. They suggest that neither organizational change nor shared categorical frameworks can by themselves ensure that individual service users' objectives are shared by agencies and practitioners. They conclude that

> If integrated services continue to operate in a climate of rationed resources due to insufficient social housing, poor economic support to vulnerable young people who fall outside 'priority' groups … then the service user's own presentation of needs risks fragmentation. (p453)

CAF in 'Dale'

The Study

The research described here took place in parallel with the authors' evaluation, on behalf of local agencies, of the process of all CAF assessments undertaken by two pilot projects in a town in northern England. (To preserve confidentiality, this has been called 'Dale'.) Using data from these specific examples, the research sought to establish the extent to which assessment services for children and young people with 'additional needs' are being developed in response to central government guidance, and to explore the nature of those services.

The authors were given access to documents relating to all assessments, which had been undertaken during a 6 months period in 2006/2007 and had opportunities to observe ten multi-agency meetings, including monthly panels of practitioners and managers from all the agencies involved. These meetings discussed all new CAF assessments and reviewed progress within previous cases. Such panels were a distinctive and sometimes controversial feature of CAF in 'Dale'. (Live, face-to-face discussions were seen as essential by some practitioners, while others viewed them as unnecessarily time consuming.)

The methods used by the authors were primarily qualitative. They recorded semi-structured interviews with 17 practitioners who included almost all those who had conducted CAF assessments to date. They interviewed four parents and three children and young people, who together represented 29% of the households involved. The authors also conducted focus group discussions with managers and practitioners, and another with a group of young people. Thirteen interviews and all focus group discussions were audio-recorded, transcribed and subsequently analysed for common and significant themes. The authors sought to be emancipatory in their approach, seeking to give voice to the actual experiences and views of both service users and practitioners.

The original evaluation explored a wide variety of questions, but three specific issues will be highlighted in the present article:

- The numbers and characteristics of the children and young people who were the subjects of CAF assessments;
- The types of issues dealt with; and
- The extent to which children, young people and their parents/carers were involved in the process.

Numbers and characteristics

The DfES states that "An estimated 20% to 30% of children have additional needs at some point in their childhood, requiring extra support from education, health, social services or other services." (See, for example, DfES, 2006a,'Note on terms used in this guidance'). A commonly expressed view amongst practitioners in the pilot areas was that between a quarter and a third of children and young people in the area could potentially benefit from CAF assessments and the provision of services, which may follow them. However, in a period of six months and in an atmosphere of initial enthusiasm, practitioners within the two pilots had completed only 26 CAF assessments, a figure well below the expectations of service managers. Projections based on such a sample are, inevitably speculative, but they involved less than 1% of children and young people of school age, in the relevant localities, and even at several times this initial rate of delivery, only a very small proportion of those seen as potential beneficiaries of CAF are likely to receive it.

These figures should, perhaps, be considered in the context of the findings that it was the consistent experience of practitioners in 'Dale' that CAF assessments always had major resource implications, as regards their time, and that they had little expectation that staffing resources would be increased as a result. Many recognised high levels of local need, but saw time spent on CAF assessments as additional to their core activities. As one practitioner put it, *"… it is a significant addition to workload – this is part of the reason for the lack of referrals. It is certainly not a true reflection of local need."*

Comparison with census data for the relevant geographical areas (National Statistics, 2003) demonstrated that the children assessed were, in terms of their ethnic origins broadly representative of the population in the respective pilot areas. However, whilst assessments initiated by primary schools within one pilot involved mainly Asian children, none of those for secondary school children did so. Four (17%) of the children for whom information is available were recorded as disabled and, appropriately, disabled children were over-represented compared to the relevant general populations.

Types of issues dealt with

DfES advise practitioners,

> You can do a common assessment at any time you believe a child will not progress towards the five *Every Child Matters* priority outcomes without additional services. You need to identify these children early and help them before things reach crisis point. The CAF is an
> important tool for early intervention. It is designed for use when:

- you are concerned about how well a child is progressing. You might be concerned about their health, welfare, behaviour, progress in learning or any other aspect of their well-being. Or they or their parent may have raised a concern with you;
- the needs are unclear, or broader than your service can address;
- a common assessment would help identify the needs, and/or get other services to help meet them. (DfES, 2006b, p10.)

However, the cases in 'Dale' did not mirror the wide scope envisaged by this and other guidance. The reasons recorded for assessments being needed were, in practice, dominated to a very large degree by concerns about a child / young person's behaviour and/or parents' ability to cope with their behaviour. In one pilot such reasons accounted for 91% of cases and in the other for 60%. A variety of concerns did, of course, overlap in many cases. However, in contrast to concerns about a child / young person's 'behaviour', concerns about academic progress appeared to be the main reason in only two (8%) cases overall, while other specific issues accounted for only another five (19%).

Of the twenty-six children and young people for whom assessments were completed, twenty (77%) were male and six female. Practitioners appeared much more likely to identify boys, as having 'additional' needs than girls, while several of the narratives described involved boys with behaviour problems who lived with their mothers and had variable amounts of contact with absent fathers.

Extent to which children, young people and their parents/carers were involved in the CAF process

Aldgate (2002) emphasises that, since the implementation of the Children Act 1989, there has been a very clear statutory requirement to take account of service users' views when providing services for children. Cleaver (2006), in the context of the *Framework for Assessment* (DOH, 2000)*,* acknowledges that "true partnership" is not always possible, but notes evidence that "partnership" is, at least indirectly, associated with better outcomes for children. (Cleaver, 2000; Cleaver and Walker, 2004, Cleaver et al., 2004. She suggests that,

> … in order to bring about the necessary attitudinal and behavioural changes in families, individual members must feel that they have fully participated with professionals in any assessments and decisions that affect them. (Cleaver, 2006, p139.)

Regarding CAF, DfES (2006a) advises practitioners that, "whether to do the assessment is **a decision you should make jointly with the child and/or their parent**." (p14) (Emphasis in original). However, this did not appear to 'fit' the experiences of either practitioners or service users in 'Dale'. None of the service users interviewed seemed familiar with CAF as a process distinct from other interventions and none recalled reading explanatory leaflets. Many practitioners reported that they had not given explanatory leaflets to parents, young people or children. They noted that, in some cases, parents and children were known to be unable to read or known to be unable to read English, while materials in other formats and languages were not yet available. Most practitioners appeared to have developed spoken, 'tailored-to-the-situation' explanations of the process. For example,

> *…I initially just asked her to come in and have a talk about the transition…and (advised) that we had a new form of assessment for all the family to get involved in, to look at the transition, and what we could do to help the child concerned.*

Regarding the ongoing assessment process, DfES (2006a) advises practitioners that that the CAF "involves working with the child and, as appropriate, their family, and *completing the assessment with them.*" (p15) (Emphasis added by authors). However, practice in 'Dale', again, appeared to depart from such principles, often for understandable reasons.

At least one parent / carer was present during completion of the assessment form in twenty-two (88%) of cases for which relevant information is available and, in two of the three other cases they had been consulted previously. However, the young person was present in just seven (28%) cases for which relevant information is available. At the same time, while mothers were present in twenty-one (84%) cases and an elder sister in another, fathers were present in only the two cases where both parents where present. One consequence of this is that in the data that follows, 'parent/carer' almost always means 'mother'.

Parents/carers' comments on the assessment were recorded as such on forms in 12 (48%) cases, while in only three (12.5%) was it explicitly clear that views recorded about 'What needs to change?' were theirs. Similarly, in only four (17%) cases was it clear that views regarding 'How will you know things have improved?' were those of the parents'.

These findings about parental involvement in CAF assessments in 'Dale', appear to mirror evidence from other studies, which suggest that practitioners have often found parental involvement a far from straightforward process and that some parents have felt insufficiently involved in assessments conducted under the *Framework for Assessment* (DOH, 2000). Corby et al. (2002a, 2002b), for example, report on a study of initial and core assessments and note that about a third of parents either had little awareness of the fact that they had been the subject of an assessment or felt so negatively about the intervention that they were unable to view any aspect of their involvement positively.

In 'Dale', Children/Young peoples' comments were recorded on CAF forms in just six (25%) cases while in a further two (8%) they were noted to be "passive". In no cases were the young person's views regarding 'What needs to change?' or 'How will you know things have improved?' clearly recorded, as being theirs. Again, these results are similar to those found elsewhere. Pithouse (2006), for example, reports that it is unlikely that some practitioners will seek the views of children during any assessment and notes the need for further training that will ensure more consistent practice between different professions and agencies.

In 'Dale' action plans were completed prior to multi-agency panel meetings in half the cases and in only one case in one of the pilots. This pattern appeared to reflect practitioners' wishes to explore possible plans with colleagues from other agencies, a practice that is consistent with guidance in DfES (2006a) that "along with other agencies, you agree a multi-agency plan for delivering the actions, which can be recorded on the CAF form." (p21.) However, it also served to limit opportunities for children, young people and parents / carers to comment on the plans affecting them.

Discussion

Discussions with practitioners and managers in 'Dale' indicated both commitment to and enthusiasm for many of the principles underpinning CAF. One said typically,

> *… it focuses the practitioner's mind on a much more holistic picture of the child. … I think that CAF does that from the word "go". It's getting practitioners working with children thinking much more in that holistic way. … it gives you a much broader picture right from the word go, and I think that practitioners are less likely to work in boxes in terms of, "This is my responsibility, but that's your responsibility"…*

However, other findings suggest that the reality of some aspects of practice differed substantially from that envisaged in the rhetoric of government policy documents.

Positive features included the belief that participation in CAF processes resulted in positive experiences and outcomes for some service users and that mothers were willing to be involved in CAF processes and had sometimes taken an active part in them. The service users involved were broadly representative of the relevant local communities, in terms of ethnic origins. Practitioners took the issue of obtaining consent seriously and said that they valued multi-agency working.   Managers within integrated children's services 'owned' their responsibility for implementing CAF and their appropriate 'leadership' played a positive role.

However, no feature of CAF, as observed in 'Dale', had yet reached a point where it could be described as 'fully developed' or where the actions of practitioners and agencies or the responses of children or parents could be predicted with certainty. This is in spite of the fact that some practitioners reported that CAF assessments had resulted in significant and tangible outcomes, such as improvements in children's behaviour and attendance or a family being rehoused ("*The desired outcome had been substantially achieved*"). Others expressed frustration that the process had changed nothing ("*I have to say, really, it hasn't changed anything*").

Many parents (usually mothers) were active participants in CAF assessments, but others had refused to engage in the process. Some were ready to be fully involved from the start, but others had needed considerable encouragement and support. Hence, parents' level of involvement remained dependent on the skills of practitioners and on practitioners' commitment to working in partnership with them.

Perhaps more significantly, fathers had had no involvement in the overwhelming majority of assessments. This reflects the general and long-term failure of policies, procedures and agencies to find ways of engaging fathers effectively (Milner, 1993; O'Hagan and Dillenberger, 1995; Daniel and Taylor, 1999, 2006; Ryan, 2000; Scourfield, 2006; Ashley et al., 2006; Featherstone et al., 2007). It also indicates that CAF has done little so far to reverse this phenomenon and will not do so without conscious and determined changes in the practice of those involved. It is noteworthy that DfES guidance for practitioners offers no guidance on how to encourage and facilitate the involvement of 'fathers' and makes only two specific references to them; firstly, to state that they will be represented in the text by the term 'parent (DfES, 2006a, frontispiece) and secondly in the context of needing to recognise that teenage boys may be fathers (DfES, 2006a, p20). In 'Dale', the lead taken by individual practitioners seemed crucial. In one of the two cases where a father was involved, the practitioner remarked that his participation had required her to place particular

emphasis on inviting him to enter the room and join the discussion and that without this he would have waited outside.

In reality, the nature of much CAF activity was determined more by private transactions between individual practitioners and service users than by the guidance offered. Multi-agency activities, such as discussions at panel meetings where most major decisions were taken were almost always accessible only to professionals. Some practitioners suggested that service users would not wish to be involved in such activities or would find them too difficult. On the one occasion observed by the authors when a mother was involved in a multi-agency panel meeting, they observed that the practitioners and managers involved had not previously considered how this would be facilitated, and that its 'success' was dependent both on the resilience and motivation of the mother and the instinctive sensitivities and skills of those present.

In contrast to government rhetoric emphasising the desirability and need for their involvement, for most of the children and young people in 'Dale' the process of CAF assessment was one in which adults talked *about* them rather than one in which they were full participants. The authors speculate that this may, in part, have arisen from the fact that concerns about a child's behaviour and/or parents' ability to cope with that behaviour dominated the reasons recorded for assessments being needed. However, there is no obvious correlation in the data between the issues identified and the child's involvement, and it appears that their absence from meetings was sometimes simply the result of adults not inviting them to attend.

The issues precipitating CAF assessments were dominated by and expressed in terms of adult (usually a school's) concerns about children and young people. The particular concerns cited appeared to be genuine, legitimate and worthy of attention. However, when summarised and aggregated, they appear to be dominated by issues arising from the behaviour of boys and, as a result, those involved were not representative of the full range of 'additional' needs which girls and boys are known to face. At the same time, it was noticeable that, despite the fact that the overall sample was representative of local communities, Asian young people were underrepresented amongst the secondary school children. There was nothing in their contributions to suggest that 'Dale' practitioners consciously excluded girls or any other group, but those 'selected' for assessments were most often those whose behaviour caused practitioners and their agencies (usually schools) most concern. These children were prioritised, and, despite claims that CAF "is a tool to identify unmet needs. It covers all needs, not just the needs that individual services are most interested in." (DfES, 2003a, p3), the service was, arguably, rationed according to agencies' needs.

CAF assessments could certainly not be seen as interventions equally available to all children with 'additional' needs. The pattern found, arguably, highlights questions around what issues are prioritised within services in school contexts. (See Featherstone and Manby (2006)). Referrals to welfare services appear to be increasingly dominated by boys seen as demonstrating incipient anti-social or criminal behaviour. For example, 61% of the children referred to the project evaluated by Featherstone and Manby (2006) were boys whose referrals were usually linked to issues of behaviour management.

For the future, it seems reasonable to suggest that schools with appropriate resources available should be dealing with Level 1 and 2 behavioural problems (Hardiker et al., 1991) through services such as Behaviour Improvement Programmes, and using CAF assessments for a wider range of issues requiring multi-agency involvement. Boys' behaviour is, however, likely to remain a dominant

concern for welfare agencies in 'Dale' as elsewhere. Several cases in the sample revealed significant issues, which demonstrated the need for interventions beyond the school setting. In 2005, 24 per cent of UK children lived in a family headed by a lone parent, usually their mother (ONS, 2006), and at least 750,000 children a year witness domestic violence (DOH, 2002). It is likely, therefore, that all agencies will need some access to expertise and some involvement in demonstration projects, which attempt to ameliorate the impact of issues such as domestic abuse or absent and unreliable fathers. It is possible both that CAF will provide a useful route into these and that such cases could begin to dominate CAF activity, leaving relatively limited resources for the helping other children "before things reach crisis point." (DfES, 2006a, p3.)

Practice as observed in 'Dale' indicates that more exploration is needed about how a "child-centred" CAF process (DfES, 2003a) should be conceptualised and implemented. A model in which assessments are focused on the needs of children and young people and informed by consultation with them may be more achievable, in practice, than one in which all children and young people, regardless of their level of enthusiasm for the process, are expected to be directly involved in exploration of their needs and how these can be met. In the 'Dale' sample, the subject of the assessment was not present during completion of the CAF form in 72% of cases, while even in the 28% where they were, their level of involvement and the extent to which their views were recorded was very dependent on the skills and views of the individual practitioners involved.

Despite the view that any practitioner who has undertaken "a locally approved CAF training course" (usually of one or two days) can undertake a CAF assessment (DfES, 2006b, p4), experience in 'Dale' indicates that practitioners will also need to have a wide variety of skills and appropriate mentoring and supervision to sustain the process. It therefore seems extremely important that plans frequently observed in "Dale" to 'delegate' or 'transfer' responsibility for CAF assessments to staff in schools without professional qualifications take careful account of the potentially negative consequences of responsibility for the process being left with those who have limited training and who occupy less senior positions in school hierarchies. In the authors' view, undertaking a CAF assessment should be seen as a process, which carries a high level of professional responsibility; arguably at, at least NVQ Level 3. Practitioners carrying out such a role will require both appropriate training and adequate recognition and remuneration.

Conclusion

The study in 'Dale' indicates that CAF assessments and the processes associated with them (e.g. multi-agency discussions) have the potential to result in benefits for the relatively small number of children and young people involved. However, the findings also suggest that, so far, CAF assessments have been offered to a very small proportion of their potential beneficiaries, and that larger numbers would result more in the identification than the meeting of needs. Many practitioners in 'Dale' remained frustrated that the services that they believed would benefit children were still not provided to them after a CAF assessment. One remarked:

> *… nothing has happened as a result of the CAF, nothing at all … For all of the children that have gone to CAF, we've had to go back to our old ways of working to get what we needed.*

Practitioners and service users with experience of CAF generally welcomed the new framework and recognised that it could contribute to positive outcomes. At the same time, the pilots in 'Dale' highlighted many of the challenges faced by those charged by central government with making CAF a success. The processes observed could not yet be described as fully 'child centred'; fathers were insufficiently involved; and CAF appeared, as yet, to be another service which was 'rationed' according to agencies' priorities. The result was not yet a new service available to all children and young people with 'additional needs', but rather, some useful responses to a small group of children and young people who were nearly all male and who were nearly all those who presented behavioural problems at school or at home.

In 'Dale', as elsewhere, there were still many unresolved issues around the size and scope of the CAF system, and managers and practitioners were working conscientiously to resolve these. Government rhetoric suggests that CAF is linked to Level 2 services and should be universally available (DfES, 2003a). However, given the resources actually available, initiating so many assessments would appear to be an unmanageable task. At the point of implementation, it seems likely that local services will, in fact, need to formulate policies that specify both criteria and thresholds which ensure that CAF assessments are provided according to children's needs and local priorities. Otherwise, the rationing of CAF assessments will be at severe risk of being based on the unspecified and possibly unjustified priorities of individual practitioners and agencies. There seems little likelihood that CAF assessments will actually be available for all children identified as having 'additional' needs. In reality, such assessments will, perhaps, need to be focused on a relatively small cohort of families with children with complex and high level needs who are likely to benefit from adequately resourced multi-agency interventions. As one practitioner concluded,

> … the whole thing is very worthwhile, and it has got to be pursued because it does help the families and the children. … It's just … I suspect that there is no extra funding going into any organisations…

References

Aldgate, J. and Statham, J. (2001) *The Children Act Now: Messages from Research,* HMSO, London. Available at http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4006258 (Accessed 24 May 2007)

Aldgate, J. (2002) ' Evolution not Revolution: Family Support Services and the Children Act 1989', Chapter 7 (pp 147 – 168) in Ward, H. and Rose, W. (Eds.) *Approaches to Needs Assessment in Children's Services*, London, Jessica Kingsley Publishers

Anderson, R., Brown, I., Clayton, R., Dowty, T., Korff, D. and Munro, E. (2006) *Children's Databases – Safety and Privacy: A Report for the Information Commissioner,* Foundation for Information Policy Research. Available at http://www.fipr.org/childrens_databases.pdf (Accessed 8 January 2007)

Ashley, C., Featherstone, B., Roskill, C., Ryan, M. and White, S. (2006), *Fathers Matter,* Family Rights Group, London.

Barnes, C. and Oliver, M. (1995) 'Disability Rights: Rhetoric and Reality in the UK' in *Disability and Society,* **10**(1) pp.110-116

Beresford, P. & Evans, C. (1999) 'Research note: research and empowerment', *British Journal of Social Work*, **29**(5), pp. 671-677.

Brandon, M., Howe, A., Dagley, V., Salter, C., Warren, C. and Black, J. (2006a) *Evaluating the Common Assessment Framework and Lead Professional Guidance and Implementation in 2005-6*, DfES Publications, Nottingham.

Brandon, M., Howe, A., Dagley, V., Salter, and C., Warren, C. (2006b) 'What Appears to be Helping or Hindering Practitioners in Implementing the Common Assessment Framework and Lead Professional Working', *Child Abuse Review,* **15**, pp 396 – 414.

Brummett, B. (2003) *The World and How We Describe It: Rhetorics of Reality, Representation, Simulation*, Westport CT, Praeger.

Children Act 1989, HMSO, London
Children Act 2004, HMSO, London

Cleaver, H. (2000) *Fostering Family Contact,* London, The Stationery Office

Cleaver, H. and Walker, S. with Meadows, P. (2003) *Assessing Children's Needs and Circumstances: the impact of the Assessment Framework - Summary and recommendations,* Department of Health, London. Available at http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4010622 (Accessed 21 August 2007).

Cleaver, H., Walker, S. with Meadows, P. (2004) *Assessing Children's Needs and Circumstances: The Impact of the Assessment Framework*, London, Jessica Kingsley Publishers.

Cleaver, H. and Walker, S. (2004) 'From policy to practice: the implementation of a new framework for social work assessments of children and families', *Child and Family Social Work*, **9**(1), pp. 81–90.

Cleaver, H. (2006) 'The Influence of Parenting and Other Family Relationships', Chapter 7 (pp 122-140) in Aldgate, J., Jones, D., Rose, W. and Jeffrey, C. (Eds.) *The Developing World of the Child,* London, Jessica Kingsley Publishing.

Corby, B., Millar, M. and Pope, A. (2002a) 'Assessing children in need assessments—a parental perspectiv*e*', *Practice*, **14**(4), pp. 5–15.

Corby, B., Millar, M. and Pope, A. (2002b) *Having Your Say: Parents' Experiences of Assessment Under the Framework for the Assessment of Children in Need and their Families*, Universities of Liverpool & Central Lancashire.

Daniel, B., Featherstone, B. Hooper, C-A and Scourfield, J. (2005) 'Why Gender Matters for *Every Child Matters', British Journal of Social Work,* **35**(8), pp 1343-1355.

Daniel, B. and Taylor, J. (1999) 'The rhetoric versus the reality: a critical perspective on practice with fathers in child care and protection work', *Child & Family Social Work*, **4** (3), pp 209-220

Daniel, B. and Taylor, J. (2006) Gender and child neglect: theory, research and policy, *Critical Social Policy*, **26** (2) pp 426-439

DfES (2003a) *Every Child Matters,* HMSO, London.

DfES (2003b) *Children in Need in England: Results of a survey of activity and expenditure as reported by Local Authority Social Services' Children and Families Teams for a survey week in February 2003:Local Authority tables and further national analysis*, HMSO. Available at http://www.dfes.gov.uk/rsgateway/DB/VOL/v000451/CINIE2004_final.pdf (Accessed 10 February 2007.)

DfES (2004) *Every Child Matters: The Next Steps,* HMSO, London.

DfES, (2005) *Common Core of Skills and Knowledge for the Children's Workforce*, Stationery Office, London.

DfES (2006a) *The Common Assessment Framework for children & young people: Practitioners' guide.*
 (Available online at www.everychildmatters.gov.uk/caf or search www.teachernet.gov.uk/publications using the ref: 0337-2006BKT-EN (Accessed 26 January 2007.)

DfES (2006b) *The Common Assessment Framework for children & young people: Managers' guide.*
(Available online at www.everychildmatters.gov.uk/caf or search www.teachernet.gov.uk/publications using the ref: 0336-2006BKT-EN
 (Accessed 26 January 2007.)

Department of Health (1999a) *Quality Protects,* HMSO, London.

Department of Health (1999b) *Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children,* HMSO, London.

Department of Health (2000) *Framework for the Assessment of Children in Need and their Families* HMSO: London Available at
http://www.dh.gov.uk/assetRoot/04/07/93/83/04079383.pdf (Accessed 31 July 2006)

Department of Health (2002). Women's Mental Health: Into the Mainstream – Strategic Development of Mental Health Care for Women
http://www.dh.gov.uk/assetRoot/04/07/54/87/04075487.pdf
Every Child Matters: Change For Children (2006) Available via
http://www.everychildmatters.gov.uk/integratedworking/ . (Accessed 26 January 2007.)

 Every Child Matters: Change For Children (2006) Available via
http://www.everychildmatters.gov.uk/integratedworking/ . (Accessed 26 January 2007.)

Everitt, A. and Hardiker, P. (1996) *Evaluating for Good Practice* , Macmillan, London.

Featherstone, B. and Manby, M. (2006) 'Working with Families: Messages for Policy and Practice from an evaluation of a school based project', *Children and Society*, **20**, pp 30-39.

Featherstone, B., Rivett, M. and Scourfield, J. (2007) *Working with Men in Health and Social Care,* London, Sage.

Goffman, E. (1975) *Frame Analysis: An Essay on the Organization of Experience*, Harmondsworth, Penguin.

Hardiker, P., Exton, K. and Barker, M. (1991) *Policies and Practice in Preventative Child Care*, Aldershot, Avebury.

James, A., Bottomley, K., Clare, E. and Liebling, A. (1995) *Privatizing Prisons: Rhetoric and Reality*, Sage, London.

Jones, H., Clark, R. Kufeldt, K. and Norman, R. (1998) 'Looking After Children: assessing outcomes in child care. The experience of implementation', *Children and Society* **12** (3), pp 212 – 222.

Katz, I and Hetherington, R. (2006) 'Co-operating and Communicating: A European Perspective on Integrating Services for Children', *Child Abuse Review,* **15**, pp 429 – 439.

Laming, Lord (2003) The Victoria Climbie Inquiry: Report Of An Inquiry, HMSO, London.

Mason, C., May-Chahal, C., Regan, S. and Thorpe D. (2005) *Differentiating common assessment cases from other types of cases –the research evidence for CAF responses.* Available on line at www.lums.lancs.ac.uk/files/ccips/7115/download/ (Accessed 26 January 2007.)

McKeigue, B. and Beckett, C. (2004) 'Care Proceedings under the 1989 Children Act: Rhetoric and Reality', *British Journal of Social Work,* **34,** pp 831-849.

May-Chahal, C. and Broadhurst, K. (2006) 'Integrating Objects of Intervention and Organizational Relevance: The Case of Safeguarding Children Missing from Education Systems', *Child Abuse Review,* **15**, pp 440 – 455.

Milner, J. (1993) 'A disappearing act: the differing career paths of fathers and mothers in child protection investigations' *Critical Social Policy*, **13** (38), pp 48-63.

National Health Service (2004) *National Service Framework for Children, Young People and Maternity Services.* Available at http://www.dh.gov.uk/assetRoot/04/09/05/52/04090552.pdf (Accessed 26 January 2007.)

National Statistics (2003) *Census 2001:National report for England and Wales,* London, The Information Management Company. Available online via www.statistics.gov.uk/census2001. (Accessed 23 August 2007.)

O'Brien, M., Bachmann, M., Husbands, C., Shreeve, A., Jones, N., Watson, J. and Shemilt, I. (2006) 'Integrating Children's Services to Promote Children's Welfare: Early Findings from the Implementation of Children's Trusts in England', *Child Abuse Review,* **15**, pp 377 – 395.

O'Hagan, K. and Dillenberger, K. (1995) *The Abuse of Women within Childcare Work,* Open University Press, Buckingham.

Office for National Statistics (2006) *Focus on Gender,* London, HMSO. Available at http://www.statistics.gov.uk/downloads/theme_compendia/fog2006/gender_summary.pdf (Accessed 24 May 2007.)

Parton, N. and O'Byrne, P. (2000) 'What do we mean by 'constructive social work'?', *Critical Social Work*, **1** (2). Available at http://www.criticalsocialwork.com/units/socialwork/critical.nsf/982f0e5f06b5c9a285256d6e006cff78/c23d0f16f505847085256ea7005665b1?OpenDocument Accessed 24 August 2007.

Pithouse, A. (2006) 'A Common Assessment for Children in Need? Mixed Messages from a Pilot Study in Wales', *Child Care in Practice,* **12**(3) pp 199 – 217.

Powell, J. (2005) ''Value talk' in social work research: reflection, rhetoric and reality', *European Journal of Social Work*, **8**(1), 21 – 37. DOI:10.1080/1369145042000331350

Ryan, M. (2000) *Working with Fathers,* Radcliffe Medical Press, Abingdon.

Scourfield, J. (2006) **'**The challenge of engaging fathers in the child protection process' Critical Social Policy, **26** (2), pp 440-449.

Sefton, T. (2004) *A Fair Share of Welfare: Public Spending on Children in England,* Centre for Analysis of Social Exclusion, CASE report 25, Economic and Social Research Council. Available at http://sticerd.lse.ac.uk/dps/case/CR/CASEreport25.pdf. (Accessed 9 December 2005.

Shotter, J. (1993) *Conversational Realities: Constructing Life through Language*. London, Sage.

Skinns, L. (2003) 'Responsibility or rhetoric: Responsibility, Rhetoric and Reality: Practitioners' Views on Their Responsibility for Crime and Disorder in the Community Safety Partnerships', *Selected papers from the 2003 British Criminology Conference, Bangor in June 2003*, Vol. 6. Available at http://www.britsoccrim.org/volume6/007.pdf (Accessed 24 August 2007)

Valentine, K., Fisher, K. and Thomson, C. (2006) 'Making Integration Happen: The Families First Policy'**,** *Child Abuse Review,* **15**, pp 414 – 428.

Ward, H., Smith, N., Garnett, L., Booth, A. and Everett, G. (2002) *Evaluation of the Introduction of Inter-agency Referral Documentation (Children in Need and in Need of Assessment Consent Form) in North East Lincolnshire,* Loughborough University. Available at http://www.lboro.ac.uk/research/ccfr/Publications/Interagencyreferral.pdf (Accessed 20 August 2007)