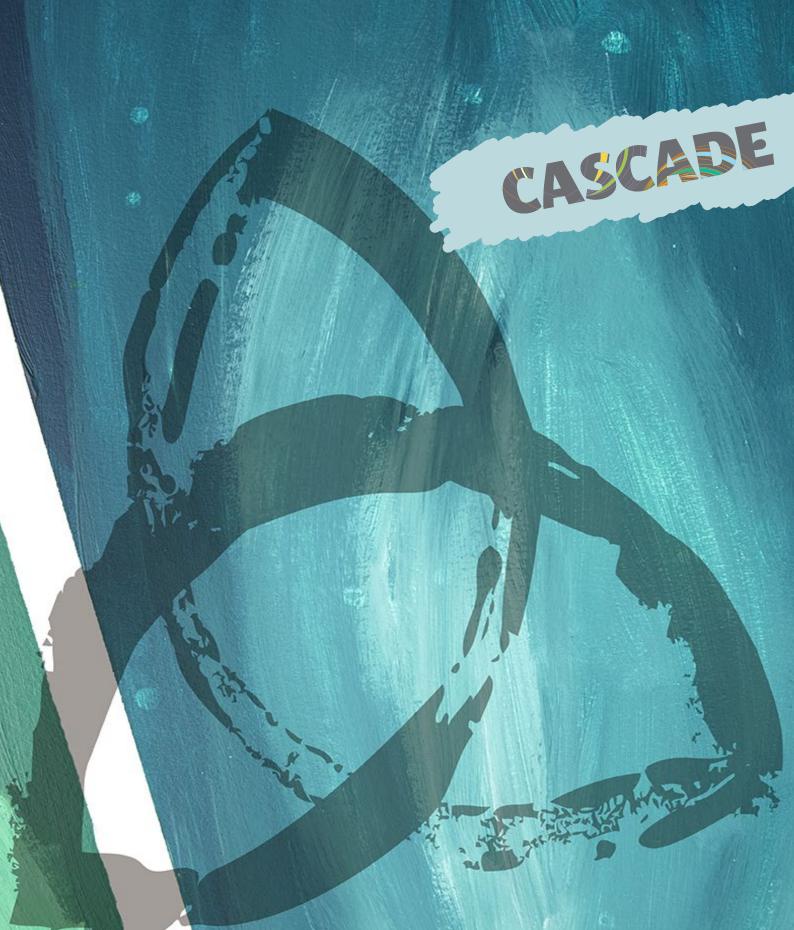


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# **CASCADE** framework

Supporting joint working between education and mental health professionals



The CASCADE framework was produced by the Anna Freud National Centre for Children and Families to assess levels of interagency working in relation to supporting children and young people. The CASCADE framework is the copyright of Miranda Wolpert (2015).



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# **CASCADE** framework

Supporting joint working between education and mental health professionals

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Dr Melissa Cortina

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#### Introduction to the CASCADE framework

The CASCADE framework is a pragmatic tool developed for use with stakeholders working with children and young people (CYP) to identify levels of joint working across seven key domains.

It is intended to help partners find ways of working together more effectively to better support CYP's mental health.

### **Components of the CASCADE framework**

The CASCADE framework comprises seven key domains of interagency working on which respondents are asked to rate their current levels of working.

Clarity on roles, remit and responsibilities of all partners involved in supporting CYP mental health

Agreed point of contact and role in schools/colleges and CYP mental health services

5 tructures to support shared planning and collaborative working

Common approach to outcome measures for young people

Ability to continue to learn and draw on best practice

Development of integrated working to promote rapid and better access to support

Evidence-based approach to intervention

# What information should I use to complete the CASCADE framework?

Completing the CASCADE framework should be a review of joint working in your area and should draw on all of the information available to you about your current joint working with all relevant stakeholders. Stakeholders may include but are not limited to CYP mental health services (NHS statutory CAMHS, voluntary sector providers, independent providers, school counsellors, youth justice, school nurses, educational psychologists) and educational services (schools, sixth form colleges, pupil referral units, alternative provision and special schools). Your responses should draw on working across agencies and should reflect upon what is working well in your context and where there are still challenges.

# Rating the CASCADE framework

The CASCADE framework is a self-assessment process and can be used to come to a shared understanding around local interagency working.

Levels of joint working in each of the seven areas are rated according to the elements of practice (major challenge, elements of good practice, widespread good practice and gold standard). Examples of what this may look like are provided for each category. Ratings can be done on an individual basis to help reflect on joint working. However, they can also be done as a group to identify interagency working.

#### **Deciding on ratings**

When ratings are done as a group, they are done by consensus and should reflect partnership working at the time of completion. Although a majority consensus should be sought, it is important to choose a rating that is reflective of the area, which means that the level of interagency working is often only as good as its weakest area. Individuals might have examples of higher levels of working; however, if joint working in an area does not have the same consistency throughout, the area cannot have higher levels.



		MAJOR CHALLENGE	ELEMENTS OF GOOD PRACTICE	WIDESPREAD GOOD PRACTICE	GOLD STANDARD
C	Clarity on roles, remit and responsibilities of partners* involved in supporting CYP mental health	No shared knowledge of the range of support available and poor links between partners	Some shared knowledge of the range of support available and some links between partners	Shared knowledge of the range of support available and good links between partners	Full mapping of all sources of support kept up to date and accessible with strong links between all partners
A	Agreed point of contact and role in schools/colleges and CYP mental health services	No identified points of contact	Some identified points of contact with some partners	Agreed and shared points of contact with most partners	Agreed and shared points of contact with all partners that are kept up to date as staff change
S	Structures to support shared planning and collaborative working	No structures to support shared planning and collaborative working	Steering group/partnership agreement or other structure to support shared planning and collaborative working but membership attendance patchy or frequently cancelled	Steering group/partnership agreement or other structure to support shared planning and collaborative working but not fully linked to other groups	Steering group/partnership agreement or other structure to support shared planning and collaborative working, embedded well with other relevant groups
C	Common approach to outcome measures for young people	No shared outcome measures and no sharing of information	Some overlap of outcome measures, but no shared information	Most shared outcome measures and limited sharing of outcomes	Routine use of shared outcome measures and some interventions
A	<b>A</b> bility to continue to learn and draw on best practice	No forum for shared learning	Some sharing at joint events with some partners or access to good practice networks but limited	Widespread sharing of best practice with most partners but not always acted upon	Widespread sharing of evidence-based best practice with all partners that drives initiatives
D	<b>D</b> evelopment of integrated working to promote rapid and better access to support	Little to no integrated working and complicated and/or slow paths to support	Some integrated working with partners to improve access despite complicated and/or slow paths to support	Widespread integrated working with most partners to improve access with clear paths to support	Widespread integrated working with all partners to improve access with clear and/or rapid paths to support
E	<b>E</b> vidence-based approach to intervention	Little or limited training available to support intervention, and not grounded in evidence	Some routine training available, but not always evidence based and some interventions	Most staff accessing regular targeted training with interventions in place	Clear training programme for all staff with some joint training alongside interventions

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## How to complete the CASCADE framework

The CASCADE framework can be completed by an individual to provide self-reflection but is most effective when completed together by a variety of stakeholders as a tool for discussing current levels of joint working and identifying areas for improvement. The sections highlight key questions that should be considered in relation to the seven individual areas of the CASCADE framework.

# Clarity on roles, remit and responsibilities of all partners involved in supporting CYP mental health

This refers to everyone involved in supporting CYP mental health. Is everyone clear about who does what across schools, colleges, and CYP mental health services to support children and young people in the locality?

#### Agreed point of contact and role in schools/colleges and CYP mental health services

Is there a named point of contact? For example, is there a named mental health lead in schools or colleges and a corresponding contact in CYP mental health services? These contacts need to be agreed between all partners and kept up to date.

#### Structures to support shared planning and collaborative working

Are there structures that enable agencies to work together? For example, is there a joint steering group for mental health and education colleagues to meet regularly, to plan and share practice?

#### Common approach to outcome measures for young people

Do schools, colleges and mental health services have a shared understanding regarding outcome measures? Are outcomes derived from those measures shared between mental health professionals and education professionals?

#### Ability to continue to learn and draw on best practice

Are there opportunities to share good practice between education and mental health professionals; for example, joint training programmes, newsletters or web forums? Is this information shared widely and does it drive change?

#### Development of integrated working to promote rapid and better access to support

Are referral procedures clear to schools and colleges (e.g. if a CYP is suicidal, how are they managed in the system)? Consider speed of access, ease of referrals, clear referral pathways, and integration of ALL partners along these pathways. Do mental health services have a clear feedback system to schools and colleges?

#### **E**vidence-based approach to intervention

Are all schools, colleges and mental health services ensuring that any interventions used have an evidence base? This is to ensure that programmes being implemented are evidence informed and beneficial to CYP.

#### How to use the CASCADE framework

The framework can be used to assess change in levels of joint working once an action plan has been put in place. Once ratings have been agreed, partners should identify key priorities for change along with action plans to achieve those priorities. Alongside the framework, it can be helpful to identify what specifically is working well along each of the domains as well as what is still a challenge. The framework can then be completed another time to assess whether progress has been made.

#### Scoring the CASCADE framework

Categories can be scored on a four-point scale (0 = major challenge, 1 = elements of good practice, 2 = widespread good practice, 3 = gold standard).

# Using the CASCADE framework: Mental Health Services and Schools Link Programme (CASCADE)

The CASCADE framework is currently used as part of the Mental Health Services and Schools Link Programme which works to bring together mental health leads in schools and colleges and children and young people's mental health services (CYPMHS) to embed long-term collaboration and integrated working.

This ground-breaking programme helps clinical commissioning groups (CCGs) and local authorities to work together with schools and colleges to provide timely mental health support to children and young people. It empowers staff by brokering contact, sharing expertise and developing a joint vision for CYP mental health and wellbeing in each locality.

The programme was successfully piloted in 2015/16 in 255 schools and CYPMHS across 27 CCGs in England and was independently evaluated. The Department for Education (DfE) have now commissioned the Anna Freud National Centre for Children and Families (AFNCCF) to deliver the programme to a further 20 CCG areas and up to 1,200 schools and colleges.

The programme aims to:

- develop a shared view of strengths, limitations, capabilities and capacities of education and mental health professionals
- increase knowledge of resources to support mental health of children and young people
- ensure more effective use of existing resources
- improve joint working between education and mental health professionals.

The programme comprises two workshops delivered at least six weeks apart between January and November 2018. The workshops bring together education and mental health professionals, drawing on evidence-based approaches to training and system transformation.

The CASCADE framework is used to assess levels of joint working between partners and to facilitate progress to better support CYP.

More information can be found here: www.annafreud.org

400		Working well	Challenges	Next steps
C	<b>C</b> larity on roles, remit and responsibilities of partners involved in supporting CYP mental health			
A	Agreed point of contact and role in schools/colleges and CYP mental health services			
S	Structures to support shared planning and collaborative working			
C	<b>C</b> ommon approach to outcome measures for young people			
A	<b>A</b> bility to continue to learn and draw on best practice			
D	Development of integrated working to promote rapid and better access to support			
Е	<b>E</b> vidence-based approach to intervention			
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### **A** Schools in mind

Schools in Mind is a free network for school staff and allied professionals which shares academic and clinical expertise regarding the wellbeing and mental health issues that affect schools. The network provides a trusted source of up-to-date and accessible information and resources that school leaders, teachers and support staff can use to support the mental health and wellbeing of the children and young people in their care.

The network shares academic and clinical expertise regarding mental health and wellbeing issues for schools, and enables members to access:

- termly events, newsletters, trainings, and resources
- ideas to support school staff mental health and wellbeing
- opportunities to take part in ground-breaking research and network with other schools.

For free sign up, further information and access to Schools in Mind accompanying resources please visit www.annafreud.org or contact schoolsinmind@annafreud.org

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