

# Achieving the Vision for Children Team around the Child Starting Points

## First Steps Case Study

Case Manager – transition to Team around the Child in an established multi-agency case.

### The work

- D is a Case Manager in Services for Communities. He has agreed to be **Lead Professional** in this case, which involves a secondary school Guidance Teacher as Named Person, a social worker, a member of Edinburgh Families Team (social work service) and potentially voluntary sector and educational psychologist involvement.
- A Team around the Child is being proposed because of long term problems with a 12-year old child's attendance and exclusion from school.
- The current task in the Team around the Child approach in this case is **compiling the Integrated Assessment Framework and Child's Plan, and making the transition from current multi-agency involvement to a collaboration within a Team around the Child.**

### James' Story

James is 12 years old and lives with Shona, his mother. James has had behavioural problems in school and in the community. He has had some police charges for anti-social behaviour offences as well as several exclusions from school. When he is not excluded, his attendance has deteriorated from 40% to 25%, in spite of being on a supervision order for two years.

Shona does not engage well with services. When she does engage she is willing to consider James' support needs but unwilling to consider her own support needs. Shona and James' home is in a poor state and there are money problems and utilities arrears. However, Shona regularly agrees to plans and actions in meetings and does not follow through, often refusing access to her home by workers trying to engage her. She is highly suspicious of services she feels might have the power to 'take James away'. Shona does get some support from her own parents.

James himself, as you would expect for his age, gets bored in multi-agency meetings. James has a brother at Wellington school. Although James and Shona want for him to stay at the local mainstream academy, James has his own ideas about an ideal arrangement, which he thinks would be a part-time timetable. In practice, this might mean simply pleasing himself when he attends and when he doesn't.

There has been a history of multi-agency effort to change James' situation. The school would now like to refer James for an external placement. The social worker feels there has been little progress during the period of the supervision order.

### The tools / approach

- D has had some limited success in engaging with Shona and explaining the Team around the Child approach. She signed the TAC consent form for sharing information and also discussed with D who she would be prepared to meet with initially, as Team members – she agreed to the school Guidance Teacher, the social worker, the Edinburgh Family Project worker and D as Lead Professional.
- D feels there could be future involvement of the educational psychologist and a voluntary organisation who would support the tenancy/home issues – but feels one step at a time in building the Team is best for Shona.
- D called a first meeting of James' Team around the Child. He used this first Team meeting to gather together everyone's information on James, and the family situation. Some Team members had used the Integrated Assessment Tools to structure their information and experience, although some did not have time to do this. Those that did brought their information to the meeting, and each

# Achieving the Vision for Children Team around the Child Starting Points

contributed their information in turn, which took around an hour. This created a heavy emphasis in the first meeting on sharing information, which was very boring for James, who got restless, and possibly a little overwhelming for Shona.

- D felt it was important to move from information sharing to solutions in this first meeting, so he managed to encourage everyone to spend another half an hour on the Child's Plan. A Plan was compiled for James, with actions identified from everyone, including Shona and James. This has made the Plan quite long, and some of the actions describe 'long term aims' rather than steps towards these aims (see focus on the Plan in 'things to think about').
- D has since followed up the meeting by trying to contact Shona – she is not responding to calls or visits, in spite of several attempts each day.
- The other Team members have commented on the Integrated Assessment Framework tools. One Team member found them 'repetitive' – that the integration between the tools can make it seem as if the same information is being repeated. One Team member did not complete any tools or share information except in discussion at the meeting.
- Since the Team meeting, James was excluded from school for another incident. This changes some of the planned actions.
- D did end with first Team meeting with an early review date – 3-4 weeks, to try to ensure momentum is not lost. However, with contact with Shona being challenging, there is potential for another Meeting to drift, or for agreed actions to be stalled.

## Things to think about in this situation

- There was strong motivation in this case to hold James' Team around the Child meeting as quickly as possible. However, this meant there was limited direct preparation with James and Shona – separately and together. Could James and Shona have worked through the assessment tools with a worker to consider their own view of their situation before the meeting, and before having to see what professionals are saying about them? This might help achieve a few important things:
  - We might get greater insight into what James and Shona *themselves* think of their situation, strengths and stresses, and what *they* want to change
  - Once we know what *they* think, we might also have a better insight into their motivation for any actions identified in the Plan, which might help cut down on their passivity or non-cooperation.
- If the information from different professionals could have been gathered, collated and distributed to everyone before the meeting, the proportion of the meeting focusing on simply sharing information and considering 'the problems' could have been turned on its head – more time could have been spent on thinking about solutions. This would either delay holding the meeting, or put more pressure on D to administer this process. However, it could also pay off in terms of more effective meeting and follow up.
- Identifying actions and the progress of James' Child's Plan itself is a major challenge for the Lead Professional. The main task in this case is to help all the other professionals involved see that the Plan needs to be dynamic and contain the smallest steps possible towards their greater aims, so that the family can see some progress. The biggest danger here is that people think that everything should change after one or two Team around the Child meetings. The reality in this case is that the complexities will require sustained effort – perhaps a constantly updated plan over several months or years. Also, many actions in the Plan are identified as ongoing. There is a classic danger with 'ongoing' actions that progress is hard to measure, and that 'drift' is built into the action.
- The main challenge is to translate some of the actions in James's Plan to things that can be taken forward 'now' – a step is identified that can be taken forward this week or this month. Some examples of the 12 actions in James' Plan include:

# Achieving the Vision for Children Team around the Child Starting Points

Current Plan	Suggestions / comments
Shona will fill out the school clothing grant form	This is a reasonable action to identify, but given Shona's record of passivity, it might be stronger if the Team suggested <i>'next time D is visiting, Shona and D will complete the clothing grant form'</i>
D will make a referral to Bethany Homemaker  Fraser will look at a referral to Fairbridge	Referrals are useful actions – they are specific and measurable, and can be done before the next meeting. However, there may also be a significant gap between referral and any outcome, so if a Plan only contains actions which are referrals, then measurable progress will slow down once the referrals have been made. Referral actions must be backed up with other direct action in the Plan – what can we do 'now' as well as what additional service can we hope for some time in the future.
Shona will make an appointment with the Dentist for James.	On the face of it, this seems a straightforward action for Shona to agree to. But it would be important to think about the component parts of this action – is James actually registered with a dentist, and if not, are local dentists taking on NHS patients? Does Shona know how to find out about this? How will she get James to an appointment if he is frightened of dentists – who could help, and could this person be identified in the action itself?
James will not be disruptive in school.	This is an example of an aim rather than action for a Child's Plan. Given that James has a history of exclusion from school and anti-social behaviour in the community, it might be important to break the actions down into the smallest steps, which can be gradually worked on towards this aim over successive revisions of plans. Small steps which might work could include: <ul style="list-style-type: none"> <li>• James will attend school for only the lessons in one or two subjects that he feels he can behave in.</li> <li>• James will take time out and go to the base when he feels frustrated.</li> <li>• Shona will set a rule for James to be home by 9pm each night. If he keeps to that for a week they'll go to the match on Saturday (Fraser can get tickets from the football club community scheme).</li> </ul>

The challenge for D as Lead Professional is how to be assertive about leading the Team through a solution-focused process, to generate ideas about the small steps that could lead to greater progress. While doing this, he has to ensure Team members feel their overall aims are being met. The other Team members, and Shona and James, might not co-operate if they're not used to generating ideas or if their aims are 'big'.

D has identified a further training need for himself and other Team members in solution-focused approaches, but he could involve the educational psychologist in helping facilitate this at the next Team meeting (she wants to be involved in supporting the Team anyway), as she will be trained in this approach.

However, he could also brief Team members beforehand about the structure of the agenda, which could be something like:

- twenty minutes in information sharing and reviewing progress since the last meeting
- ten minutes agreeing which priority to focus on
- a short break for a breather for James and Shona (D can use this time too!)
- twenty minutes generating ideas about possible solutions
- ten minutes agreeing which possible solutions will go in the Plan, and when it will be reviewed.

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There are a lot of things to think about in progressing this Team around the Child and developing James' Plan. The important thing to remember is that a start has been made and D is a resilient worker committed to making a difference with Shona and James.

## **Possible developments to think about for Team around the Child practice:**

- Other agencies less familiar with Team around the Child may benefit from some easy-to-digest tools that help them to think through their involvement and how to access further information and training
  - The central team could develop a 'pocket guide' to Team around the Child for Named Persons / Lead Professionals to give to prospective Team members until we are sure all professionals are aware of the approach
- The emphasis on small steps when seeking solutions in complex and long term situations is hard to grasp, especially when workers want to see a big difference as soon as possible.
  - The central team is continuing with more training in solution-focused approaches for professionals involved in Team around the Child
  - The central team could post some easy-to-scan resources explaining the solution-focused approach on the website, along with some simple tools and resources to help professionals, parents and children to participate in planning.