

Stronger Families Safer Children



Handbook





1 Tracey Hyslop January 2022

Introduction

By Alison Noble, Director Children's Services (Early Help and Safeguarding)



Welcome to the **Stronger Families Safer Children** Handbook and Guidance materials.

Help and support is most effective for children and their families when it is provided at the right level and at the right time, when they need it most.

Stronger Families Safer Children is an established strength-based practice model in Derbyshire and is designed to guide practitioners and managers to be as impactful and effective as possible. The framework offers tools and methods to enable workers and managers to build relationships with children and families, understand what's important to them and how to help them to be the best they can be. In applying this framework, I believe that children and their families will be helped when and how they need it most to achieve their best outcomes.

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Vision & Guiding Principles

Our vision is that staff across Children's Services will be:

'Working creatively together to inspire and empower children, young people and their families and communities to be the best they can be: safe, healthy, happy, learning and working'.



Our ambition is to achieve sustained positive outcomes for children and young people and to improve their physical, social, emotional well-being and safety; and to close the gap in educational achievement and support all children and young people in realising their potential.

Derbyshire County Council has statutory responsibilities to safeguard and promote the welfare of children. Improving outcomes for children and families is at the heart of everything we do. We are committed to promoting and working in an interagency way, keeping the child in focus at all times and working in partnership with them and their families. (Working Together to Safeguard Children – 2018)



The Stronger Families Safer Children Practice Model has been developed by Derbyshire County Council Children Services to provide an overarching framework for all Early Help to Safeguarding and Specialist Services.

The model was informed by and developed from serious case reviews and practice learning. It encourages practitioners to be professionally curious and enable them to make better informed decisions around what intervention is required and work to clear, measurable outcomes. It enables practitioners to respond quickly and effectively to the needs identified by children and their families through use of the guiding principles and tools to enable them to work in an efficient, purposeful, collaborative and respectful manner with children, young people and families; with clear, measurable outcomes.

The Model supports the <u>Joint Derby City and Derbyshire Threshold Document</u> which promotes quality constructive conversations at the point of referral to Starting Point and throughout our involvement with a child and their family. Key questions should be asked when completing an assessment, developing and reviewing plans for children. We need to ensure our involvement and intervention is focused on the right things; is proportionate and appropriate to the key risks and needs identified.

Overarching **Guiding & Practice Principles** at the heart of our Strong Families, Safer Children Practice model include:

- It is a collaborative family approach where everybody is listened too, with the child placed first. In practice, we should always 'Think Family' whilst ensuring the child and their voice is at the centre of everything we do and takes priority
- It promotes honest and productive working relationships with families which are respectful, inclusive and empowers families and children to participate. In practice we should strive to always work collaboratively and openly with children, their families and other agencies: having constructive (sometimes challenging) quality conversations.
- It is a solution focused, strength-based model that's clear about risks and needs. It empowers front line practitioners to make comprehensive judgements and to analyse the impact on the child/ren. Our practice should be evidenced based and utilise these solution focused approaches to support families to develop their strengths; therefore, building resilience in children and families.



- It uses straightforward, clear, jargon free language that is understood, shared and that all involved are accountable for. In practice it provides an easy to use toolkit for working with children, young people and families
- It encourages workers to 'think critically', remain curious and respond creatively
 to change. We should recognise that families are experts of their own lives and
 should be enabled to identify their own strengths, needs and solutions. It
 enables families to make lasting change through achievable tasks.





In summary, the model is:

- Child focused
- Accessible for families, practitioners and partner agencies
- Strengths based in its approach to enable a balanced assessment of risks, needs and protective factors
- Underpinned by evidence-based practice

Using this model will:

- Inform assessments
- Improve analysis
- Assist in decision making and provide the documented evidence to support those decisions
- Support practitioners in engaging with families in a meaningful and appropriate way



Theoretical Underpinnings

Derbyshire County Council is committed to using and promoting strength-based approaches that have a clear evidence base. Current investments in workforce development include the delivery of the following theoretical underpinnings:

- 1. Systemic Practice across all teams; in particular with Social Workers
- 2. Social Pedagogy initially implemented as a grassroots initiative within Residential Care; now identified as an underpinning approach for Childrens Services entire workforce.
- 3. Person Centered Approaches have been adopted within Children's Disability Services for a number of years; but are now extending into other services too.

These 3 main theoretical approaches underpin our practice model and form the basis of all work undertaken with children, young people and families.

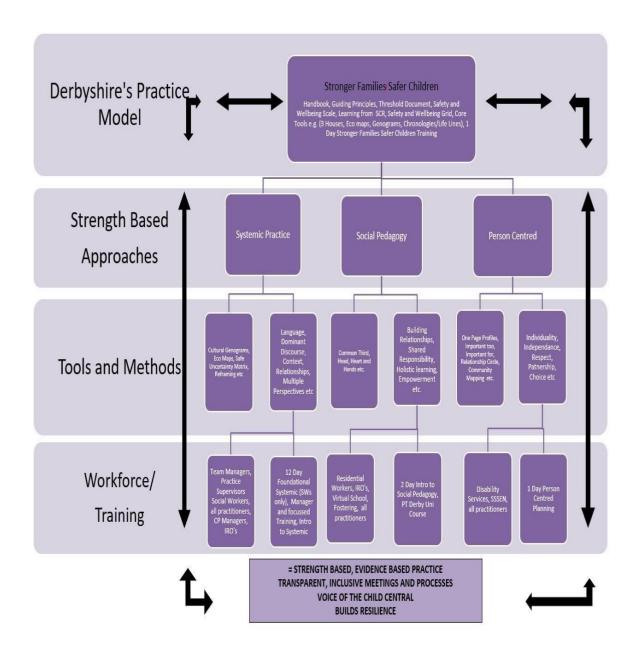
A suite of training and tools have been developed and are available to the workforce to increase their knowledge and skills around these theoretical approaches and their use in practice (see Figure 1)

Most of this training can be accessed via Derbyshire Learning On-Line; for any additional training please speak to line manager who can put your name forward for those courses where nominations are required.

A separate Tool Kit can be accessed <u>here</u>



Figure 1 Stronger Families, Safer children – Operating Model





Key Statements and The Safety and Wellbeing Grid

At the heart of the **Stronger Families**, **Safer Children** practice model are four key statements:

- ♣ See the Risks
- Focus on the Impact
- Strengthen the Positives
- Create opportunities for Change
- ♣ See the Risks What are we worried about? What's working well? Whenever we're working with children and their families, we need to really understand any risks to ensure they are assessed and managed well.
 - Approach any assessment in a balanced way, considering what strengths/protective factors are present and what strategies the family already have in place to try and manage the impact of any risks. Be specific about how risk is experienced and also consider the accumulative effect of multiple risks. Understand how often and for how long they happen, what are they like usually and at their worst or best, when they last happened. What / who triggers them, perpetuates them and also who/what helps them to de-escalate / or is a positive influence. Whilst being balanced, be careful about being too optimistic listen to everyone's views, weigh up the evidence and respectfully challenge.
- ♣ Focus on the Impact What's life like for the child? What is their lived experience? What will or could happen if things don't improve? What if they do?
 - Keep the child at the centre of all assessments and plans. See and speak to them regularly to really understand what life is like for them. Are things getting better (or worse). Use age appropriate tools, observations, play to help the child(ren) engage with you and tell you what life is like for them. See SFSC Toolkit for some ideas
- ♣ Strengthen the Positives. What's Working Well? In all situations there will be some things that are working well, some strategies that are making a difference (even a small one), times when the risk/problem isn't there or is less than usual.
 - Explore these with the family and understand why. Which strengths / protective factors strategies they already use are working? Which aren't? Why? Are there small changes that could make them even more effective?



Create opportunities for Change – What will good look like? What needs to happen?

For sustainable change to happen families need to understand what needs to change (and ideally agree it needs to change), believe they can change and want the difference that change will bring. Opportunities for change need to be developed together with the child/family. What does the child/family think need to stay the same/change and why? Where change is identified as needed, it's really important to be clear about what outcomes need to be achieved and how the impact of change will be measured. Who will notice change has happened and how? Sustainable change will impact not just the family's behaviours / routines etc it will also affect their thinking, values and beliefs.

Derbyshire County Council created a **Safety and Well-being Grid** (see Figure 2) as a core solution focused tool for the Stronger Families Safer Children, Practice Model. It combines the four key statements and scaling in one place. Scaling can be used, if it is helpful to track improvements for the child and inform decisions around threshold and the level of intervention needed.

The Grid has multiple uses, it can be used as a direct work too with children and families, in case discussions or supervision, in meetings, with partners etc. It can be used as a tool on its own or combined with other tools. Child Protection Conferences focus their discussions around the sections of this Grid to add gravity and a continual reminder to place the child/ren at the centre of the meeting and to ask all participating to keenly focus on the current and potential impact risks are having on their lives.

Whenever used it should be clear who has contributed to the Grid and the context in which it was used. The evidence to back up any statements made on the Grid should also be made very clear; so, the distinction between facts, opinions and hypotheses is evident. When used with families (in particular) the Grid should be completed in clear and simple language, without any jargon. Emphasis should be placed on completing the Impact Statement, which should really bring to everyone's attention what life is like for the child. Where it is safe to do so the child's views, words and feelings about what is happening can really make this section come to life. This section of the Grid has proved to be very powerful in enabling parents to really understand the impact their behaviour is having on their child(ren) and what could happen if that behaviour doesn't change.



Elements of the four key statements and the Safety and Well-Being Grid have been built into many of our work processes and forms.

Figure 2 - The Safety and Well-Being Grid and Guidance

What's working well?		What are we worried about?	
HoWhWhHo	nat helps keep the child/ren safe? w are their needs being met? nat support is in place currently? nat are parents/carers doing well? w does the child 'come first'? nat's important to the child?	 What has happened? Was it harmful for the child? Is the child likely to suffer sign in the future? 	iificant harm
10	Impact Statement / Safety a	nd Wellbeing Score	0
	<	\longrightarrow	
	fe like for the child? What might they b	e worries and the strengths in a baland oe seeing, feeling or experiencing? Ho sense of self and emotional wellbeing?	ow does this
who hap Who the Who Hoo Thi ach fam	nat will life look like / be experienced en the change needed has opened? nat do we want to see that is keeping e child safe? nat will be different? w will people help/be involved? w will the child be involved? is section needs to be realistic, nievable and respectful of each nily's context. We are striving to nieve better outcomes for children d young people.	 What actions need to be put into place? Think about making goals SMART (Specific, Measurable, Achievable, Realistic and Timely) By whom, how and when? How will the child, the parents and other professionals be involved? How will you monitor the situation to make sure the child is safe? What will happen if the child is still unsafe? How will be know what we are doing is 	
	Vhat will 'good' look like?	What needs to happen?	

Figure 2 – The Safety and Well-being Grid and Guidance Document

What's working well? What are we worried about? Positives/Progress/Strengths and Safety Factors Risks/Worries/Concerns/Issues that could affect development and wellbeing The opportunity to record positives: comment on the strengths and safety factors, and any progress the The opportunity to be clear and specific about what is happening, has happened or may happen to the child that is harmful or detrimental to their safety, wellbeing and development (e.g. neglect child, young person and family members have made. This could be a bullet point list rather than a emotional, physical, sexual, developmental delay, disability) narrative and consideration does need to be given to whether the positives address the concerns and the Some of these may relate to parents/carers but the focus should always be on the impact on the impact this is having on the child. SAFETY: Actions of protection by parent/caregiver, specifically related to the current dangers and HARM: describes what has already happened or is currently happening to the child. concerns, demonstrated over time (sustainability). Often parents/caregivers take steps to protect RISK: describes what we believe what will happen in the future if nothing changes. children that are insufficient but could be built upon. Learning from SCR: complicating factors such as issues which make safety more difficult to achieve STRENGTHS: A positive attribute, good intention, a positive act, a positive change in mindset (e.g. (for example the toxic trio: parental mental health, substance misuse, domestic violence). Not recognition and acknowledgement of impact on child). These can become safety factors over time. allowing parental issues to take the focus off the child. Closing cases when parents were uncooperative/hard to engage. Failure to "adequately engage with the children, and to see things Learning from SCR: Being too optimistic about a parent's abilities/intentions. Interpreting 'disguised from their perspective" and to explore what lies behind challenging or unusual behavior. Fixed views compliance as cooperation. Misinterpreting positive behavior in young people as resilience, need to - for example, about fathers. The need for good quality information gathering, sharing and recording explore how the child feels/what they are experiencing. Disability - ensure see the child not the 'disability' and keep expectations high. Impact Statement: This is specific to the child and enables all to understand what life is like for the child at this moment in time, the child's development needs (Refer to Assessment Framework) and emotional wellbeing should be addressed. We need to ask "What could happen if things don't improve?" also and be clear about this. The statement will be written in jargon free language that the family understands. The score will relate directly to the Threshold Document and assist around decision making: different views on score should be recorded if a consensus is not reached. Learning from SCR: Lack of "curiosity" - about the child's experience, who is living in the household etc. Need to explore' the emotional development, attachment and (quality of the) parent - child relationship. Act on and take seriously disclosures by the child This is where to describe the steps (actions/action plan) that will move the child/family from where The opportunity to record what life would be like for the child if our worries had been addressed and they are to 'What will good look like?'. They will address the worries in a manageable way with the there was limited negative impact on the child. This needs to be realistic and achievable dependent on safety and wellbeing of the child paramount. This is the opportunity to focus on ACTIONS and family/child circumstances (e.g. disability, learning needs, mental health) it is also understanding and respectful of each family's context (e.g. race, culture, sexuality, religion) as long as this doesn't OUTPUTS adversely impact on the safety and wellbeing of the child. Where appropriate, need to be Specific, Measurable, Achievable, Realistic, Timely and demonstrate We need to consider professional views/parents views/child's views, are they the same? Does it shared responsibility and ownership by the family/child and professionals. The steps need regularly matter? If the views do differ the safety and wellbeing of the child remains paramount. reviewing to reflect any change that has occurred and if actions and plans are not having positive This is the opportunity to be clear about OUTCOMES outcomes and a positive impact on the child the actions need to change! Learning from SCR: Having unrealistic expectations of improvement, Professional tolerance of unacceptably low levels of care and poor home conditions and community environments. Failure to Learning from SCR: Avoiding case drift. Becoming too SMART! - Too much prescriptive activity driven "respectfully challenge" parents and professionals. by procedural tasks and following recommendations that are easiest to translate into actions that may not foster safer, reflective practice. What would good look like? What needs to happen?