

## **Stockport Families First Team Procedures**

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### **1. Stockport Families First Team**

Stockport Families First Team specifically work to achieve a high level target of safely reducing the number of children becoming looked after. They do this through delivery of coordinated wrap around services for Children and young people aged 0-18 on the edge of care including:

- Short Breaks
- Intensive Support Workers
- Family Group Conferencing
- Consultation with clinical psychologist
- Two in house Children's Homes and Broadfield Children's Home (inc Outreach Family support)

The Stockport Families First Team provide intensive practical support, with support available during core business hours as well as evenings and weekends, working directly with young people and their families to prevent them from becoming Looked After or supporting rehabilitation home plans for looked after children.

The range of interventions builds on a family's strengths and coping strategies, and incorporates a strong degree of challenge including crisis intervention. The team provides time-limited and intensive support up to seven days a week if this is required. On average, families are referred to the service for up to 6 months and at the end of the period, if appropriate, the family is then linked into existing family support services as part of a 'step-down' approach.

The following behaviours are indicators for parents seeking support and subsequently putting the young person at risk of entry to care:

- Aggressive responses to family boundaries;
- Persistent episodes of staying out late/missing from home and sexual activity (sometimes later found to be exploitation);
- Disengagement from education;
- Association with a 'suspect' peer group;

- Being "deceitful and manipulative"; and
- Parents feeling powerless to 'control' their child.

## **2. What is 'Crisis Intervention'?**

Crisis intervention involves defusing the immediate and precipitating crisis within the home that leads to the referral, with support workers engaging the young people and their family, liaising with other agencies, assessing the problems, developing specific, measurable goals and helping everyone in the family to acquire the skills to achieve them.

Research suggests that crisis intervention models are most successful with families where problems are acute rather than chronic, and that their effectiveness depends to a significant degree on the extent to which they are linked into other local services, to provide young people and families with continuing support after the crisis is over.

The team will provide intensive support specifically dealing with children and young people who are at the edge of care and where their needs are complex and enduring.

The Stockport Families First team will be focusing primarily on those young people aged 0-18 and their families with the specific needs highlighted within level 4 need.

## **3. Referral Criteria**

The Stockport Families First Team referrals will have the following priority measures:

- Age range: 0-18 - however the team will work with younger siblings where risk of entry to care is identified;
- Young person at imminent risk of entry to care;
- Where a rehabilitation to home plan is in danger of breakdown;
- Where the Domestic Abuse Child Sexual Exploitation Team / GMP Missing Officers identify that a child or YP is at risk of coming into care due to frequent missing episodes and/or risk of sexual exploitation;
- Family breakdown related in some way to child's behavioural difficulties;
- No effective boundaries set by parents;
- Neglects to use self-care skills due to alternative priorities, e.g. substance misuse;
- High level of conflict/aggression between parents, child and siblings;
- Permanently excluded from school or at risk of permanent exclusion;
- Parents unable to provide "good enough" parenting that is adequate;
- Family chronically socially excluded;
- Parents inconsistent / highly critical or apathetic towards child;
- No supportive network currently available.

## **4. Key Aims and Objectives of Stockport Families First Team**

## **What does the Stockport Families First Team aim to do?**

The overall aim of the Stockport Families First Team is to working safely to prevent and reduce the number of children and young people who are looked after and to manage the risk associated with maintaining young people within their families and communities.

It aims to provide direct intensive support to young people within the 0-18 age range and their families where there is high risk of family breakdown. The team aims to provide

- A prompt, intensive persistent, and flexible approach, which is based on listening to the views of the young person and the family and building on their strengths, as well as providing input to improve resilience in areas of difficulty;
- Support and strategies to young people to help them cope with situations prevalent in their lives;
- Support to parents and/or carers in successfully managing those issues within their own family network;
- Parents and Carers support in managing challenging behaviours.

Provision of support to families aims to meet the wide range of needs that families experience when faced with coping with challenging behaviour.

The outcomes appendix outlines the key areas that the Stockport Families First Team will focus on, these include:

- Where there is conflict in the family relationship due to a young person presenting with a number of difficult behaviours leading towards a possibility of family breakdown;
- Where there is frequent missing from home episodes that may result in a young person coming into care;
- Where a young person is at risk of, or is involved in, sexual exploitation that may place the young person at risk of entry to care;
- Where a young person is neglecting themselves through other priorities such as using drugs/alcohol to an extent where family breakdown is imminent;
- Where a young person has entered care as a short term intervention to avert escalation of a crisis with a view to support the rehabilitation home;
- Where a young person has previously had a period in care but rehabilitation home is at risk of breakdown and re-entry to care is a prominent risk.

The outcomes the team will evaluate its impact against are:

- Improved behaviour including anger control, offending or anti-social behaviour;
- Improved school attendance and attainment;

- Improved family and peer relationships;
- Raised confidence and self-esteem;
- Increased aspirations and employability;
- Improved physical living conditions;
- Improved mental and physical health;
- A lessening of risk to the young person's safety and well-being;
- Reduction in missing from home episodes.

### **The Objectives of the Service will be:**

#### **What:**

- To prevent immediate accommodation of a young person into care;
- To support families in offering stability when young people are in difficulty and on the edge of care referred to the team

#### **How:**

- By providing intensive crisis support to young people and their families within the family home and the community;
- Approach which builds on the strengths of the family;
- Persistence, reliability and flexibility including the speed of response;
- Provide intensive practical support to young people and their parents and carers working with key partners to achieve the outcomes required;
- Provision of a key worker assigned to each case with opportunity to consult with clinical psychologist;
- Working to structured task centred methods and models including solution focused brief interventions therapy open and honest communication, including in relation to what was and was not acceptable behaviour an approach which valued family members, listening to, respecting and understanding the family's perspective;
- Working from a menu of support which is considered at point of referral clarity about expectations and what needed to be done to achieve improvements and the consequences for the family of not doing so identifying and addressing the needs of all family members working alongside the family to achieve shared goals;
- Regular reviews and outcome monitoring of the service enables the key worker to identify interventions that would be most appropriate to provide on-going support, considered as a step down approach;
- Use of short breaks provides respite to young people and their families in conjunction with the overall support plan which is regularly reviewed;
- Use of Family Group Conferences - The Family Group Conference (FGC) model facilitates planning meetings with children's extended family, to enable

them to make plans to support children where concerns have been identified about their care;

- Use of children's home placement if required providing safe accommodation to young people
- Working closely with the Children and Family Social Work Teams to provide effective ongoing support to families via a 'step up -step down' approach

**When:**

- Providing support to young people and families through core business hours, evening and weekends working 2pm- 7pm with provision until 10pm (team operating hours 8am – 10pm this will be reviewed at timely intervals to provide evidence based data to any changes to times of service delivery).

**Where:**

- The team is currently based within Stockport Family at Stopford house, 17&18 Grand Central Square, Wellington Road South, Stockport SK1 3TA
- The team will work with young people living within the determined boundaries of Stockport (and may be beyond area boundary with manager approval).

**Who:**

The Team Manager Stockport Families First will provide management oversight to all cases and will chair the Stockport Families First panel to provide a coordinated whole family support package.

The Intensive support workers using an intensive intervention approach will provide direct support to small caseload at any time.

This will be undertaken through the provision of practical support: for example, improving the home environment, getting young people to school as well as advocacy and in some cases respite provision i.e. short breaks, placement within our children's home or providing family group conference. Support can also be given by providing information to assist the family member gain a level of knowledge that improves how they understand and deal with their circumstances.

## **5. Stockport Families First Team- Process and Procedures**

There is a clear process once a young person has been identified as requiring access to the Stockport Families First Team.

### **Step 1: Notification request**

The team works intensively with up to approx 30 families at any one time and therefore the Team Manager prioritises referrals received based on urgency and capacity to change and impact.

The process begins with a Request for Intervention by completing the Stockport Families First Team Referral Form and can come from any of the Social Work Teams including Out of Hours for young people known to children's social care services who are at risk of coming into care.

The Stockport Families First Team will have representation at IPEP and the team referral criteria linked into key decision making forums i.e. Legal Gateway, care Planning Meetings, Child Protection Conferences, Statutory Review meetings to ensure that children and young people are appropriately identified and there is consistency in ensuring the right service/support is being offered for children and young people considered to be edge of care.

When a referral is received the Team Manager or team representative will contact the Social Worker on the same day or if requiring an immediate response within 2 hours of the contact to agree arrangements for the initial visit. The team will allocate a named worker to the family on the same day where possible or within 1 working day to a worker.

The Team Manager within the Stockport Families First Team will be responsible for co-ordinating a multi-agency approach, the oversight of all direct work and providing support, advice and robust line management to the support worker.

## Step 2: Intervention

### Notification Received

<b>NOTIFICATION RECEIVED:</b> Initial enquiries can be taken verbally however must always be followed up with a written initial referral form and risk assessment	<ul style="list-style-type: none"><li>• Discussion with the Social Worker and checks notification meets the criteria;</li><li>• Takes information /considers any immediate response and agrees next steps;</li><li>• Check that the family are aware and if not that they need to be made aware;</li><li>• Check family details that are required are available and if not confirm those detail with Social Worker;</li><li>• Access to existing assessments on EIS</li><li>• Request agenda item on Eligibility Meeting</li></ul>
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## Step 3: Intervention

<b>ASSESSMENT:</b> A Social Work assessment should be carried out to inform the specific intervention	<ul style="list-style-type: none"><li>• Access EIS to review records (Social Care Records) for existing assessments and information about YP and Family;</li><li>• Arrangements for initial visit in conjunction with the Case managing Social Worker;</li><li>• Assess current presenting situation with Social Worker;</li><li>• Social Worker updates and or completes required assessments;</li><li>• ISW worker notifies the FGC service (where applicable);</li><li>• Observation;</li><li>• Discussion;</li><li>• Analysis;</li><li>• Multi agency information sharing;</li><li>• Assessment outcome discussed and appropriate intervention agreed.</li></ul>
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## Step 4: Crisis Response

The SFF team will respond accordingly to the urgency and needs of the presenting concerns if an immediate response is required the Team Leader will intervene with the young person and family in agreement with the social worker (subject to risk assessment). Attempts will be made to avert the imminent crisis within the family home until a more formal plan of intervention can be agreed and arranged at the Eligibility Meeting. The key ethos of the team is to 'make every contact count' and engage with the young person and their family to help them begin thinking about change.

<p><b>CRISIS RESPONSE:</b> Initial visit</p>	<p>In an emergency ISW workers may undertake 'same day' initial visits with the SW if possible but should not be delayed.</p> <ul style="list-style-type: none"> <li>• This is the start of our potential relationship with the family- we need to take the time to listen, assess the situation on a case by case basis;</li> <li>• Briefly explain the Stockport Families First Team to the family;</li> <li>• Build an initial rapport with the YP and their family;</li> <li>• Meet with YP and parent's cares separately to establish their views and concerns. ISW provides short term strategies to help dilute current issue/s;</li> <li>• Outline that there is an expectation of engagement from the YP and family and what this means;</li> <li>• This may include mediation between family members or short term time out/ short break for young person away from the home or on-call telephone support;</li> <li>• Gathering the family's views on their situation with the aim of establishing a context for the team's intervention and exploration of wider family members who can offer immediate support;</li> <li>• Establish which other professionals and agencies are involved with the family.</li> </ul>
<p><b>FAMILY MEETING/s:</b></p>	<ul style="list-style-type: none"> <li>• Attended by family and identified agencies chaired by social worker (i.e. TAC, Core group etc.);</li> <li>• Clarify the reasons for Request for Intervention/s being made;</li> <li>• Explain the Stockport Families First team approach to the family;</li> <li>• Clarification of roles of other professionals, address any duplication of roles;</li> <li>• Seek agreement from family members to engage in schedule of interventions and any further assessments;</li> <li>• Gather the family's views on their situation if this is possible;</li> <li>• Establish which other professionals and agencies are involved with the family and check out the family's understanding of others involvement;</li> <li>• Begin observations and questions (where appropriate) to inform risk assessment;</li> <li>• Check that the CSC compliments &amp; complaints procedure has been explained;</li> <li>• This is the start of our potential relationship with the family- we need to take the time to listen, assess the situation on a case by case basis;</li> <li>• Things to think about: are the family ready to talk and engage with services</li> </ul>

	<ul style="list-style-type: none"> <li>• Let the family know that working with the team is a voluntary agreement, but be realistic- what may happen next. What are we able and unable to do.</li> <li>• Inform and update the risk assessment;</li> <li>• The worker must make the referrer and the family aware that all Stockport Families First team cases are reviewed regularly at SFF panel.</li> </ul>
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### **Step 6: Delivery of Intervention/Menu of Support**

- Direct intensive support with young person to understand the reasons around the key issues for the young person and his/her story;
- Establish the key facts about the child's journey providing information - To assist family members gain a level of knowledge that improves how they understand and deal with their circumstances;
- Parenting skills - strategies based on evidence based interventions and programmes
- Mediation - To improve trust and communication between family members;
- Signposting - To signpost and physically support in accessing other services, educational opportunities and contacts with other family members, and help them maintain their self-esteem and confidence;
- Family Group Conference- To collectively support families through the difficulties they may be facing and seek family generated solutions
- Direct Practical support - subject to risk assessment e.g. short time out activity with young person, improving living environment etc.;
- Mental Health support from range of interventions offered by KITE and Healthy Young Minds.

Support in approaching extended family to provide respite opportunities where appropriate;

- Advocacy - To assist the young person by giving them confidence to ask questions and obtain support or services to help meet their needs;
- Direct referrals to services such as Family Group conferencing, Healthy Young Minds etc.;
- Telephone support - for times when direct support is not available or convenient.

## Step 7: REVIEW

<p><b>REVIEW:</b> Consistent &amp; timely review of intervention is important in ensuring that the support plan is on track and to provide evidence on appropriate points for withdrawal and next steps.</p>	<ul style="list-style-type: none"><li>• Regular review of progress with YP and family;</li><li>• Team Manager arranges Team Eligibility Meeting to consider new referrals and clinical peer support for reviewing programmes to ensure that the plans are progressing and considers appropriate step down processes;</li><li>• Regular progress review meetings with the young person and families if TAC at minimum at regular weekly intervals (if CP or LAC minimum of statutory review processes)</li><li>• Family and all involved professionals to attend;</li><li>• Progress measured against targets and goals is updated to measure progress and risks at each review meeting;</li><li>• Service type reviewed to ensure appropriate to meet need;</li><li>• Date set for next review or closure meeting arranged Children's Social Care case managing Social Worker to chair final review meeting as part of the 'handover process or to provide oversight in ensuring there is an appropriate exit plan in place.</li></ul>
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## Step 8: CLOSURE

<p><b>CLOSURE:</b> May be seen as being one of the most important parts of the intervention. Well thought out withdrawal of the service will ensure that the risk of return or breakdown in the future is minimised.</p>	<ul style="list-style-type: none"><li>• Closure meeting to be arranged.</li></ul> <p>To close the intervention worker needs to know:</p> <ul style="list-style-type: none"><li>• Where outcomes have or have not been achieved and why;</li><li>• Plans for ongoing work with the family;</li><li>• Roles for professionals that may remain involved with the family;</li><li>• To highlight where a Step down may need to be completed and a lead professional identified;</li><li>• Identification of dates for follow-up work and by whom;</li><li>• Confirm step down lead practitioner is in place if appropriate;</li><li>• Explain future contact arrangements to family;</li><li>• Exit strategies to look at any remaining issues and reinforce strategies family have in place;</li><li>• Date given to close case;</li><li>• Closure form completed.</li></ul>
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## Step 8: Evaluation of the Service

Intervention Form	Feedback	Feedback Form worker seeks completion of the form - young person and Family views are ascertained
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