



Working with Families Review

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Working with Families Review - Executive Summary

- This review examines Includem's work with families. It assesses the progress made following a scoping exercise in 2010, which established a full picture of the work done with families, and evaluates the impact made by the new "Working with Families" module of Includem's A Better Life practitioners' toolkit.
- Working with families is integral to the Includem model of intervention. We recognise the crucial role played by families in supporting young people and sustaining progress made. Building family resilience and developing parental skills are crucial to better outcomes for young people.
- Includem's theoretical and practical approach relies on building meaningful and effective relationships with young people and their families. These relationships, developed over time in a collaborative way, are the "bread and butter" of what Includem does and are the key to unlocking the potential for change.
- Includem is committed to Getting it Right for Every Child (GIRFEC) principles and is critically aware of the impact of wellbeing on outcomes for children and young people in the short term and in the future. Recent Government policy initiatives, such as the Parenting Strategy, recognise the importance of good family interventions for positive outcomes. Includem has long recognised the need for, and provided, a range of supports recommended by policy-makers.
- In 2010, a scoping study highlighted that, although a significant amount of skilled work with families was routinely undertaken, we needed to make training and development more systematic and provide more resources to assist staff in working more effectively with families. Following this scoping study, we invested in a new "Working with Families" module of A Better Life and delivered practice training to all frontline staff.
- Over the summer, Includem's Practice Champion, Keir McKechnie, undertook an in-depth review of thirty case studies from Glasgow, West Dunbartonshire and Fife. These were selected to represent: where structured family work was requested at referral; where family work was carried out on an unstructured basis; and a random selection which may or may not have featured family work. This detailed investigation allowed us to identify areas for improvement of practice, and to share good practice across the organisation.
- Reflecting the focus of Includem's services, the most predominant reason for referral (84%) was to prevent family breakdown linked to reducing the need for young people to become accommodated. Almost half of cases were female. 20% were 12 or under, 40% were aged between 13-15 years old and 40% were aged 16 or over, with siblings often included in the support provided to families.
- The young people and families with whom Includem work have a wide range of complex needs often associated with multiple deprivation, including substance misuse, domestic violence, mental health issues, past emotional trauma relating to abuse, attachment issues, and coping with a family member in custody. The case studies also reveal that young people's main family support networks can often be people other than their parents, including grandparents, siblings, aunts/uncles or foster carers.

- Supports routinely delivered to young people and their families were wide-ranging. These included; face-to-face contact; goal and boundary setting; planned and focussed work; advocacy support; de-escalation techniques; crisis management; positive reinforcement; a “listening ear”; practical support, and conflict management and mediation.
- More purposeful and a higher standard of support planning was evident when the need for family support was identified at the point of referral. Includem’s new MAPS database will strengthen support plans by providing a clearly defined framework using the GIRFEC wellbeing indicators, Wellbeing Web, setting out desired goals and steps to achieving them.
- Contact logs record a rich variety and wide range of complex work being done to support families. They revealed that, even where structured family work had not been identified at the point of referral, significant work was still being done with families.
- The Working with Families module of A Better Life clearly helps to improve the quality, detail and focus of family work. So far this module is only used by a minority of staff. However a disparity between the amount of family-based work practice in different local authorities is partly explained by the type and age of referrals.
- Analysis of helpline calls showed that families are seeking support for a wide range of issues, including managing aggressive and violent behaviour, help to attend meetings or make contact with various authorities, deal with absconding, school non-attendance, alcohol/drug use, and to report absconding. In addition, proactive helpline support calls were invaluable in supporting families, especially in the evenings. This is when the staff member on helpline duty identified families at known risk points during the day. However, more detailed recording of helpline calls is needed, something which will be aided by the new database.
- The review reveals the importance of consistent support to families to help young people to successfully maintain educational placements. A combination of practical and emotional support to help parents establish new school routines was vital in achieving improved levels of engagement with education. Effective liaison and communication between Includem, parents and school staff was key to managing and averting challenging behaviours. This resulted in fewer exclusions of young people from school and reduced anti-social behaviours in local communities.
- The review demonstrates that building and maintaining trusting and meaningful relationships with young people and their family support networks remains fundamental to our practice; however, some areas of practice could be improved. Moving forwards, our priority is to ensure that the relationships built with young people and families are best used as part of a purposeful intervention, making more routine use of the Working with Families module of A Better Life.
- Report findings have been fed back to every team and individually to every manager across Includem to maximise staff learning and development. Our new database will allow us to streamline and integrate family work, making it more holistic. A follow-up audit of our work with families will ensure that we are effectively using all our tools to deliver improved outcomes for young people, and that the quality of our practice continues to develop and improve.

1 Introduction

1.1 Purpose of Review

Includem has always recognised that working with families is a crucial element of our model of intervention for the most vulnerable and chaotic young people who are our target group, even though our referrals are often focused solely on the young person.

Includem's framework of intervention emphasises the crucial role that families play in building a "scaffolding of support" around young people and sustaining progress made. Supporting development of parental skills and building family resilience are crucial objectives for our services in order to help young people towards a better life.

The intensive support model is at the heart of our theoretical and practical approach. This is essentially based on building quality relationships with young people and their families. A guiding principle is that these relationships are developed with families and young people in a collaborative way. Building meaningful and effective relationships with young people and their family support networks is the 'bread and butter' of what Includem does.

3 years ago we recognised that we did not have a full picture of Includem's work with families, so an internal scoping study was compiled which highlighted that:

- A very significant amount of work was being routinely undertaken to sustain or help rebuild family relationships, parenting skills and family stability
- Staff had developed good skills in undertaking this activity through practice experience but we needed to improve our framework for systematic training and development, benchmarking and quality assurance in working with families
- We were not adequately articulating the extent of this activity and its impact to current and potential service commissioners

A strategic investment was therefore made to develop a new "Working with Families" Module of our practitioners' toolkit, A Better Life, involving families, frontline staff and expert external input. Practice training was then delivered to all frontline staff.

This review of Includem's work with families is therefore an initial opportunity to assess progress made following the scoping exercise, and identify next actions in order to ensure continuous improvement and impact in service delivery.

Findings from the review aim to share good practice across the organisation and identify any areas where practice can be further developed and improved upon. Learning from the review is also helping to shape and guide the practice and implementation of the recently developed Working with Families Module of A Better Life.

1.2 Focus and Methodology

A key feature of building meaningful relationships with families is the ability to understand and implement the SHANARRI indicators within the GIRFEC Framework. These indicators represent the eight areas where children and young people need to progress to do well now and in the future. The review explored in detail how staff carry out their work in relation to supporting families and how effective they are at doing so.

The approach involved selecting 30 case studies. Three types of cases were selected for review:

- 1) Where family work was identified at the point of referral for a structured intervention to deliver identified areas of support to families.
- 2) Where family work is being carried out, but was not specifically requested at the point of referral.
- 3) Some random cases were chosen without knowing whether structured work with families had been identified at the point of referral or not.

This resulted in 16 cases being selected from Glasgow, 5 from West Dunbartonshire, and 9 from Fife. Of the 30 selected cases, 53% were male, 20% involved young people under 12, 40% were aged 13-15, and 40% were aged 16+. Siblings were included in family support in about a sixth of cases.

The most predominant reason for referral (84%) was to prevent family breakdown linked to reducing the need for young people to become accommodated. This included Child Protection cases and addressing risk taking and violent behaviour.

Another common referral reason was to reduce offending behaviour (28% of selected cases), sometimes combined with family breakdown. Furthermore 3 referrals were to help build confidence and self-esteem, and one referral supported a young person through pregnancy and the birthing experience.

In terms of methodology, each case file, and all relevant case information, was reviewed in detail to uncover the range of areas of work being done with families by frontline staff and to assess the quality of the work being done. This detailed case file review was supplemented and corroborated by in-depth interviews with 5 families.

Specifically, the areas focussed upon in each case study are:

- **Support Plans**
- **Use of our Practitioners Toolkit, A Better Life**
- **Contact Logs**
- **Helpline Use**
- **Supporting families and young people in education**

2 Context

2.1 Policy Context

In both Scotland and England there are new and significant Government policy initiatives in the field of working with families. Louise Casey's Working With Troubled Families Report (December 2012) shows "*the life-changing results that good family intervention can have on even the most challenging households.*" The report outlines that family intervention reduces involvement in anti-social behaviour by 59%, reduces involvement in crime by 45% and truancy and school exclusions by 52%.

Casey states that local authorities should adopt 5 key features to ensure effective outcomes for troubled families:

- A dedicated worker, dedicated to the family
- Practical "hands" on support
- A persistent, assertive and challenging approach
- Considering the family as a whole
- Common purpose and agreed action

The Scottish Government's National Parenting Strategy (October 2012) aim "to encourage agencies to work together to improve the support to families across Scotland". The national strategy is part of the Scottish Government's commitment to ensure all families in Scotland "get the help they need when they need it." The strategy is directed towards mums, dads, grandparents, as well as foster, kinship and adoptive parents – in other words anyone bringing up children. It states that parents may need support from time to time and that the levels of support they will need will vary.

2.2 Includem Context

In 2012 Includem worked with 554 young people and their families ranging from 5 to 21 years old. The generic issues prevalent for the young people and families are closely associated with factors of multiple deprivation. The selected cases studies mirror the wide range of complex needs confronting the young people and their families that we support.

The following list is by no means exhaustive:

- Offending Behaviour
- Absconding
- Substance misuse
- Emotional trauma related to physical and emotional abuse
- Domestic violence
- Learning difficulties
- Attachment issues
- Self-harm and suicide
- Low self- esteem and confidence
- Anger management issues
- Bereavement issues
- Non-attendance at school
- Challenging behaviours at home, school and in the community
- Safety in the community issues
- Supporting families through the prison experience
- Supporting families through the Secure Care experience – through Secure Care and transitions back into the community.
- Gang related issues
- Sexual Health issues

2.3 Family Networks of Support

The case studies also reveal the, often complex and shifting, wide range of family members fulfilling a parenting role within young people's lives with whom Includem will work. This includes:

- Both parents
- Single parents
- Grandparents
- Siblings
- Aunts/Uncles
- Foster Carers
- Supported Carers

2.4 Type of Support delivered to Young People and their Families

Drawing on the Case Studies and the earlier scoping exercise, several common themes can be clearly identified with regards to the types of support being routinely delivered by Includem to young people and their families across all areas of the organisation.

Types of support include:

- Specifically planned face to face contact with parents and other family members
- Goal setting and boundary setting with parents/carers, involving setting and establishing routines; putting in place agreed and acceptable behaviours in the home, the community and at school
- Supporting families and young people to maintain educational placements
- Planned and focussed work using A Better Life
- Practical support to attend Panel Hearings, Case Review meetings, Prison visits, G.P. and other health related appointments, getting to school, supervised shopping, housing meetings, Careers Services
- Advocacy Support Work at Panel Hearings, DWP appointments, Case Management meetings, CAMHS/FCAMHS meetings, School Review meetings, college placement meetings, Court appearances
- Conflict Management and Mediation – exploring and identifying thoughts, feelings, actions and consequences. Developing a clearer understanding for young people and their families of their behaviours and the potential impacts of these
- Use of de-escalation techniques – time out strategies and stress management advice and support
- Crisis intervention and use of the Helpline to manage and divert crisis situations
- Providing a “listening ear” to concerns and anxieties raised by members of the family involved with the young person
- Positive reinforcement and praise to parents, and challenging thinking and behaviours that negate positive outcomes

Example of Includem support to one mother and her son

“I’ve got good relationships with all the Includem workers... I can share my frustrations and talk them through. I’m more confident in challenging Dan’s* violence. I don’t so feel nervous about sharing information and getting advice and support from Includem... Includem taking Dan out for activities is good for both Dan and me. Knowing that Includem are coming gives us both a breathing space from each other.

Includem come to see me separately, to find out how things are going with me. I look forward to it. I’ve had a lot of support from talking with Includem ... it’s helped me cope with all the [ex-partner’s] violence and alcohol... I also get welfare benefit advice, it’s important to keep my house running. It’s good to know help is available, they’re good at helping me budget my money.

They also help with me and Dan together; you know to help with any difficult issues where problems are building up. Now I’m much better about taking time out and staying calm. Like I let Dan sit and shout "Aye" loudly when I’m saying something. It stops him going off at the deep end... Yes we still have our arguments but they don't last as long or end up with doors or the house being wrecked any more... Dan’s much more helpful around the house now.”

*Names have been changed to protect identities

3 Review of Support Plans

3.1 Approach to Assessing Support Plans

The focus of analysis of the 30 Case Studies is specific to work being done to support families. For each case study, all available Support Plans were studied with a view to assessing what goals were being set, how these planned goals were being met and importantly, assessing how the Support Plans reflect changes in response to changing needs of young people over a period of time. Three categories have been adopted for scoring the quality of the Support Plans:

1. Very Good
2. Good
3. Poor – requires significant improvement

The report gives examples under each scoring category outlining in more detail what characteristics help to comprise a Very Good, a Good and a Poor Support Plan.

3.2 Findings about the Quality of Support Plans

- 57% of Support Plans were signed by the young person on at least one occasion or more.
- 43% of Support Plans were not signed by the young person on any occasion.
- 33% of Support Plans used the GIRFEC SHANARRI indicators Framework
- 24% of the Support Plans make reference to the role of the Helpline as part of the support on offer to families
- 17% of the Support Plans had Support Planning Meeting Minutes attached to the Support Plans
- 26% of the Support Plans were of a **Very Good** standard
- 51% of the Support Plans were of a **Good** standard
- 23% of the Support Plans were of a **Poor** standard

Where structured and focussed work with families has been clearly identified at the point of referral there is clear evidence from the Case Studies to show that the Support Plans are generally of a higher standard than those where there is no clearly identified locus for work with family members. In these cases, although not all of them, there is far more specific details about what the areas of work with the family are, what steps are necessary, how, when and with whom the work will be carried out.

3.3 Discussion about Good Quality Support Plans

Those Support Plans that were of a Very Good quality had a number of key ingredients prevalent throughout ALL of the Support Plans:

- Signed by the young person
- Reference to helpline use to prevent, manage and avert crisis situations
- Reference to GIRFEC model and/or SHANARRI Wellbeing indicators
- Identifying the general support needs of the family and then specifically detailing what those needs are and the specifics of how these are going to be met – by whom, where, when and why

- Support Plans that respond to changing needs and concerns for the young person and other family members
- Easy to follow adjustments, and to identify clear changes to the Support Plan over a period of time
- Indicate level of contact with family members and clear focus of work
- Focussed work using A Better Life

Example of Very Good Support Planning - Case Study 28

The initial Support Plan under **Parent Contact** states:

- Aim is to discuss the young person's issues with both parents and to offer support and advice when needed
- Workers to contact both parents to arrange suitable times to meet over an 8 week period
- Planned contacts should alternate between both Mum and Dad

Under young person's **Challenging Behaviour** towards Mum :

- Aim is to work on addressing confrontational attitudes of the young person and to address parental inconsistencies.
- This aim will be achieved by implementation of a working agreement with both parents. Both parents to be involved in discussing separate parenting issues relating to their individual homes and parents to sign separate working agreements
- Individual work to be done specifically with both parents .
- Encouragement of both parents to use the Helpline to discuss their decision making and to seek support when required

Under young person **Returning To The Family Home**:

- Identifies need to monitor situation in family home by having a weekly review meeting involving both Mum and the young person, and have structured conversations with Mum and the young person
- With regard to police involvement – Mum is encouraged to use the Helpline to report any issues and seek support with how to engage with the police
- Later Support Plans identify the need:
- To improve family relationships by planning more family outings facilitated by Includem
- To improve communication between both parents by using the signed working agreements and discussing recurring themes on planned contacts
- To improve parenting skills by parents attending parenting classes and by continuing to give on-going advice to implement in the family home

Example of Very Good Support Planning - Case Study 23

The initial Support Plan under **Contact with Mum** outlines:

- Supporting Mum to work on her relationship with the young person and encourage Mum to address any negative behaviours by encouraging her to put in consequences and actions.
- Promote with Mum taking more responsibility for establishing routines and boundaries. This will be achieved by putting in place 1 contact per week with Mum to offer advice and support.
- By encouraging Mum's use of 24 hour Helpline.

Later Support Plans under **INCLUDED** promote :

- Social inclusion and interaction by encouraging Mum to promote positive interactions between the young person and his local community

Encourage Mum to discuss any matters of concern with the young person as they arise. This approach will provide Mum with knowledge of why it is important for the young person to interact

with peers, and will help to give her different ideas for planning various activities for the young person.

Under **Positive Role Modelling:**

- Include to set up pro-social activities in the home setting, to allow Mum to witness positive interactions

Under **Household Routines:**

- Help Mum to establish these around meal times and bed times and to spend quality time with her children
- Encourage Mum to be honest with what she struggles with in the routines and discuss where, when and how positive changes can be made

Under **Budgeting and Shopping:**

- Look at family budget with Mum and help Mum prioritise spending and give advice on healthy eating options
- Promote Mum not to give young person money for sweets on a daily basis. Instead, encourage Mum to help the young person to earn money through positive behaviours, and to praise positive achievements.

Example of Good Support planning - Case Study 11

The initial Support Plan under the category of **RELATIONSHIPS** sets the aim as:

- Support and encourage the young person to respect and adhere to Mum's boundaries within the home environment, via on-going discussions with Mum to reflect on past events
- Encourage Mum and young person to use the 24-hour Helpline for crisis support
- Identifies use of This Is My Life Module to help the young person to improve and strengthen relationships within the home environment on an on-going basis.

The next Support Plan deploys the SHANARRI Wellbeing indicators, and these allow for a far more specific and detailed plan to emerge in relation to what the aims are and how these will be specifically achieved: -

HEALTHY –

- Support Mum to build positive relationships and improve the young person's resilience and attachment to Mum
- Provide emotional and practical support to Mum and young person
- Continue to engage the young person with respite support on a fortnightly basis.
- Support Mum to put in place a clear structure, routines and boundaries in the home.
- Encourage and plan for Mum to spend quality time with the young person on a regular basis
- Mum to encourage the young person to change negative behaviours within the home and school environment
- Structured planned contacts and respite support times are outlined

ACTIVE –

- Outlines a series of activities that Mum and the young person can do together at weekends.

3.4 Discussion about Poor Quality Support Plans

In these Case Studies it was possible to identify that some of the initial Support Plans had some of the ingredients of a good Support Plan; in terms of identifying and setting general goals. The weaknesses within these Support Plans tended to have a number of common characteristics:

- Too general and vague – uses a coded language without being specific about how, when, where or why.
- Repetitive and unchanging over time
- No reference to any family work being done or what methods are being used to do it.
- No evidence of the steps to be taken or how the work is going to be carried out with family members.
- Not signed by the young person
- No reference to crisis support via Helpline.

For example, in one case study, the initial Support Plan uses the SHANARRI Wellbeing indicators. Under **NURTURED** and **SAFE** it states the need to:

- Maintain the young person within the family home
- Promote consequential thinking by encouraging Mum to implement clear rules and boundaries and to encourage the young person to maintain these.

However, follow-up Support Plans make no further reference to any family work being done. The young person then spends a period of time in secure accommodation. There is no mention of any work being done to support the family through this challenging process. On release from secure accommodation the Support Plan does make reference to the need to work with the young person to be able to identify what are positive and negative relationships, but there is no reference to how this may apply to his network of family support. There is no evidence presented or recorded of what work is being done with the young person.

3.5 Review of Support Plans – Conclusion

Both the examples of **Very Good** Support Plans rest on the approach of establishing clearly the general goals to be met within the Support Plan. Both examples then demonstrate far more specific details with regards to identifying the essential micro steps necessary for the effective implementation of the stated goals. They are also characterised by their ability to identify and set new goals and areas of future work over a period of time. They have developed action plans in place, which make it clear how the steps to carry out the interventions to support the family will happen.

The main difference between **Good** and **Very Good** Support Plans are that the **Good** ones, whilst clearly defining the goals, are nevertheless lacking in some specific details about how each of the steps are going to be followed through. These Support Plans will benefit from a tighter focus on the micro steps necessary to implement each identified goal successfully.

Those poorer quality Support Plans will benefit significantly from the new support planning format that has recently been introduced across Includem with the new young person database (MAPS). The new format will assist support planning by using a framework that defines in a straightforward manner what the key SHANARRI Outcomes are, following the initial assessment of the young person's needs, then setting out the desired goals, i.e. what is to be achieved and finally laying out what 3 key steps need to be taken to implement each of the stated goals.

4 Review of Contact Logs

4.1 Approach to Assessing Contact Logs

The approach to assessing the quality of Contact Logs used some general criteria to define the best elements of reflective practice with reference to recording and evidencing completed work by practitioners. The core elements of good recording have been defined as having a balance of the following characteristics:

- Descriptive – commenting on what has happened
- Feelings – what did the writer think or feel about it
- Evaluation – what were the positives and the negatives
- Analysis – what sense can you make of it
- Conclusion – explores what else could you have done
- Action Plan – what will you do next time or what advice to others do you give

With particular reference to work being done with families further attention was paid to assessing whether the Contact Logs make sense; do they reflect what is in the support plan; is there an element of assessment contained; are they of a sensible length; and do the logs evidence what and how work is being done to support families?

4.2 Findings about the Quality of Contact Logs

- In all of the 30 Case Studies there was some evidence in the Contact Logs of work being done to support families. There is a very rich variety and wide range of complex work that is being recorded.
- 75% of Contact Logs were of a good and consistent quality standard in terms of recording the nature of the work being done to support families.
- 25% of Contact Logs contained elements of good recording of work with families, but not to a consistent enough level.
- 85% of the Contact Logs were easy to follow, and the English and grammar were of a good and consistent standard. 15% of Contact Logs had some elements of poor grammar and paragraphing, and it was difficult to make sense of some of the entries.
- 70% of the Case Studies showed some recording of unplanned face-to-face contact with families.
- In the 22 Case Studies where structured working with families has been identified at the point of referral, there is a clearer and more consistent link between the content in the logs and what areas of work have been included in the Support Plan.
- In the 8 case studies where structured work with families has not been clearly identified at the point of referral; it is clear from the logs that significant work is still being done with families but without clear or consistent reference in the Support Plans to what needs have been assessed and what goals have been set to help focus the intervention.

Capturing work with families – Example of Good Contact Logs

This is a very good example of work with family members and the young person being undertaken, and recorded consistently to a very high standard.

The initial contact log records that the worker explored the role of Includem in the family's life, and notes getting a warm reception from the family. Practical support to get the young person to school and then call Mum each morning to reassure her that all is fine is agreed. Conversations with Mum note helping her with establishing routines and reinforcing what has worked well before.

There is clear and recorded evidence of patient relationship building with the parent and the young person. The parent is observed opening up about her anxieties and over-protection of her child and focussed conversations take place about the wider family issues – a very ill close relative and another

relative who is in prison. The worker references the importance of talking to the parent about her anxieties, and identifies the grandparents as an important source of support to help alleviate some of the stress.

Comments are recorded on progress being made with the young person in achieving a key goal of independent travel to school. The parent and the young person are praised for this achievement. The worker then has a focussed conversation with the grandparents to gently push the young person to become more active and to promote more healthy eating options. The logs observe how effective the approach has been as the young person has started attending the gym and has been losing weight.

Liaison with the school to plan the young person's travel times and release from school early is put in place with good effect. There is clear recording of communication and case feedback to the Senior Social Worker and clarification and reviewing of Includem's focus of work with the young person on health and education issues. The focus with Gran and the parent is on positive parenting and promoting healthy eating options.

The logs detail the need for contacts to be planned with the parent before the young person returns from school. There is recording of regular check-ins by phone to monitor how the parent thinks things are going in the home. There are further conversations that note workers listening and responding reassuringly to the parent's worries about the safety of the young person. Later logs then observe the parent being pleased with progress being made by the young person – travelling to school independently, and making new friends.

There is recording of several planned family outings with parent and grandparents and how excited the children are about these. How well the young person engaged appropriately with their peer group is emphasised. Progress in the young person's behaviour and in the parent's ability to manage more confidently is well charted and Mum is pleased with positive changes in the behaviours of the young person.

In the logs, it is clear to see trust developing between the young person and workers, as sensitive issues are discussed at the initiative of the young person and the parent. The reviewing of progress with all family members and the reinforcement of positive changes in the family relationships, behaviour at school and with new friends is very well documented.

4.3 Discussion about Poor Contact Logs

In 20% of the Case Studies there was evidence that the some of the logs entered were either too descriptive or not descriptive enough about work with family members.

Some of the logs were either too long or far too short. This made it difficult to either get a real sense of what the focus of the contact was, how it had gone, and what advice had been given- or there was too much description without prioritising the key information in a coherent order.

In some of the Contact Logs there was good information about the work being done with the young person but no references to the agreed areas of work being undertaken with family members. This meant on occasion that earlier logs had identified key pieces of work being done with parents but then the trail would disappear as to what the outcomes of intervention were in later logs.

An example to illustrate this is instructive. One worker identifies the young person telling different stories to their parents and grandparents about where they were staying at the weekend, and notes the need to clarify with the parents and grandparents where the young person was staying. There is no further comment on whether these conversations took place, and what measures were being taken to keep the young person safe.

Finally, there were a minority of Contact Logs where it was plain to see that the worker had not re-read the log to check that it made sense. The result was words in the wrong place and some sentences that did not make any sense.

4.4 Review of Contact Logs – Conclusion

In all cases, Contact Logs recorded evidence of work being done to support families. General standards were very good. However, the consistency of recording could be improved in some cases.

Where structured working with families was identified at the point of referral, there was a clearer and more consistent link between actual work recorded in the Contact Logs and planned work outlined within Support Plans. Even where family work was not identified at referral, significant work was still being done with families. In these cases, setting out clear and consistent reference in the Support Plans to what needs have been assessed and what goals have been set will help to further focus the intervention.

5 A Better Life and Working with Families

5.1 Approach to Assessing A Better Life work with Families

In exploring in-depth all of the available A Better Life folders it became apparent that the most effective way to establish how staff were thinking about and planning focussed work with the wider family was to assess the amount and quality of the assessment of family related issues being identified from A Better Life work with each individual young person.

There were only a small number of cases reviewed where the Working with Families Pilot module was being used. Comparing and contrasting the work with families using the Pilot materials with work being completed without the new Pilot materials, is very instructive. It is abundantly clear that those members of staff using the new Pilot materials were not only delivering more detailed and focussed work in terms of A Better Life with other family members, but that the quality of the recording of this work in the Support Plans, the Contact Logs and in A Better Life folders was of a consistently higher quality standard.

It is also worth observing that in the EISS area of the service in particular, there appears to be a “bedding in” to the practice of family-based work approaches; with a range of tools and exercises being deployed in the work with young people and their families. In the West area of the service there are some very good examples of work being done with families but the practice is not embedded across the teams as widely in terms of recording or the wide range of materials being used by staff to engage with families in more coordinated and planned work.

This can be partly explained by the types of referral to the East area whereby a significant element of the referrals request specific types of family support work to be carried out. It is also clear that the West area is following in this direction in terms of referrals with an element of focus around working with families being identified at an early stage in the referral process.

5.2 Findings about A Better Life work with Families

- 77% of the Case Studies showed that A Better Life toolkit was being used with the young person and there is recorded work completed with some focus in the sessions on family relationship based work.

- In 20% of the Case Studies it was recorded that no A Better Life work was being carried out with the young person. The age of the young person was cited in most of those cases. Other reasons for non-engagement were that the young person had learning difficulties and on another occasion that work around A Better Life was being postponed until release of the young person from secure care.
- In 16% of Cases it was not possible to find or access A Better Life folders in order to make an assessment of the work.
- 14% of the Case Studies record in the Support Plan and in A Better Life folders that the Family Module Pilot materials were being used to work with family members. In these cases there is very strong evidence of work being done with family members in a more coherent and planned manner.
- In 84% of Case Studies there is no reference to using the new Working with Families module of A Better Life toolkit with any other members of the family.
- In 67% of the Case Studies there is clear recording of the This Is My Life being done with the young person. The most commonly used exercises to establish the nature of family relationships and dynamics is the Relationship Maps , Life Line exercises, and the Mountain Metaphor exercises.
- In 70% of cases there is also evidence of significant family-related issues being discussed and recorded in other modules of A Better Life. These include specifically Managing My Emotions, Reduction of Risk Taking Behaviour, Reducing Offending and People In My Life.

5.3 Discussion about good A Better Life work

The best examples of work using the A Better Life toolkit with families incorporated a number of common features:

- Exercises from the new Module that clearly identify what the young person thinks is working/ not working in their relationships with key family members – e.g. does the young person accept the boundaries set by parents?
- Exercises completed with family members exploring their worries and concerns about the young person, and that go on to detail the support that they are offering to young people and identifying new areas that need a focus.
- Exercises being done with the young person and other family members to identify what makes a good / bad relationship; what relationships would both parties like to change and how would you go about changing these relationships.
- A Better Life work being done with the young person, their sibling and the parent. Exercises in some cases included a Review of the week exploring how Mum felt; agreeing on what went well and not so well and discussing things that could have gone differently. Mum has a record of her support networks and a diary of joint activities for Mum and the young person.
- Signed Family Agreement of what we will do and not do in the family home, with an in-built review of when, who and how to make any necessary changes.
- Exercises with parents about how and when children take responsibilities and how and when parents take responsibilities
- Cognitive exercises with young people and parents exploring key family relationships and linking these with other exercises centred around what is working/ not working, by detailing what are positive and negative emotions and which behaviours go along with each feeling.

- Exercises with family members that outline positive types of support from the family and some of the obstacles that get in the way, eg anger issues.

The characteristic strength of the best work being done using A Better Life is that it explores with the young person and other key family members different aspects of how they feel and how this affects their behaviours. This ground work then allows for alternative ways of thinking and how the whole family can try to practically apply these to home, community and other relationships.

Example of Good Quality A Better Life work with a Family – Case 23

The young person, Mum and sibling each have their own A Better Life folder. Mum's folder has several completed family work exercises of which the quality of work is of a high standard.

A Better Life exercises include:

- A review of the week exploring how Mum felt, good and bad things about the week and how things could have gone differently
- A mapping exercise of Mum's support network
- Weekly diary of activities for the young person and Mum
- Signed family agreement of what family members will do and not do, with an in-built review of when, who and how to make changes.
- Session showing discussion about how and when children take responsibilities and how and when parents take responsibilities.
- Sessions on Working in Partnership with the school.

Throughout this case it is very clear to see cognitive based work being done in a holistic way with all family members, linked to Support Planning.

5.4 Discussion about Poor A Better Life Work

The other successful component found is evidence that information gathered from the A Better Life work is used to shape and guide the planning of future areas of work.

A Better Life work that was of a lower standard had a number of similar features present:

- Vague and unspecific in the Support Plans as to what the specific focus of work is going to be.
- A typical example of this approach is the Support Plan stating the need to build a trusting relationship between the young person and their parents. This will be achieved through “coaching conversations” using A Better Life and it will be done “as and when required.”
- No mention of any A Better Life work being reviewed in later Support Plans, nor any subsequent modules selected.
- No evidence of the family dynamics or relationships being assessed with the young person in A Better Life sessions.
- A Better Life work identified in the support plan but no evidence of this being undertaken or explanation of why it did not happen.

5.5 Review of A Better Life Work with Families – Conclusion

Over three quarters of Case Studies showed that the A Better Life toolkit was being used with the young person, with evidence of some focus in the sessions on family relationship-based work. Most commonly exercises were used to establish the nature of family relationships and dynamics.

There is also evidence of significant family-related issues being discussed and recorded in A Better Life modules relating to Managing My Emotions, Reduction of Risk Taking Behaviour, Reducing Offending and People In My Life.

However, only 14% of Case Studies showed that the Working with Families A Better Life Module Pilot materials were being used to work with family members. In these cases there is very strong evidence of work being done with family members in a more coherent and planned manner.

The outcomes for young people are better and easier to identify in those cases where the materials from the Working with Families Module are being utilised. The key priority is for frontline staff to start using the modular materials. This is a key focus for practice development, and Team Managers will continue to ensure through regular supervision and support that staff confidence and utilisation of the new Working with Families module is of the highest standard.

6 The Helpline and Working with Families

6.1 Approach to Assessing the Helpline and Working with Families

The information for this section of the report was gathered from the Includem Database. Each Case Study was examined for the volume of Helpline calls received from parents, carers and young people in relation to family intervention. The nature of the calls was explored to establish the types of issues for which families are requesting and getting support.

6.2 Findings about the Helpline and Working with Families

- 74% of the families in the Case Studies had used the Helpline in relation to family intervention from the point of referral.
- 18% of the families in the Case Studies had no recorded use of the Helpline in relation to family intervention from the point of referral.
- 50% of the families had used the Helpline on more than 10 occasions in relation to family intervention from the point of referral.
- 20% of the families had used the Helpline on more than 25 occasions in relation to family intervention from the point of referral.
- 80% of the Helpline calls received were recorded under the categories of Information or Worker Contact.
- 20% of the calls related to a range of other matters including carers' distress, police matter, family dispute and missing person.

A typical example of Family use of the Helpline during a crisis period

This example illustrates some of the common themes and recurring issues being raised by family members during a period of crisis through the Helpline service.

In this case study there were 30 calls to the Helpline over a 5 month period. Calls were made by the young person and both parents. The issues being dealt with ranged from personal distress, missing person reporting and family disputes. On two occasions the parent sought support following an assault by the young person, and displayed significant levels of emotional distress.

There are calls relating to the young person being distressed at planned changes to their accommodation, where it is noted that emotional support was given. There are calls from a

grandparent who is distressed that the young person has not returned home safely. On one evening there are 5 recorded calls from a grandparent relating to the young person being put out of the family home. The notes record good liaison with the police to report the young person missing and of Standby liaising with the Helpline worker to get updates and to review risk levels. The Helpline worker also records follow-up conversations with the grandparent to help manage the crisis situation.

6.3 Discussion about Helpline Work with Families

In terms of the quality of recording of the issues that families are seeking support with via the Helpline, there is very basic recording of the issues and what the responses to the calls were in 75% of the case studies. Most of these calls related to parents or carers to clarify the times of face to face contacts or to re-arrange contact times or to cancel contacts.

Examples of good recording and evidencing of practice were found in 35% of the completed Helpline Notes.

The analysis of the of the Helpline Notes available show that there are a wide range of issues that Includem workers are responding to, with particular reference to delivering support to families.

- Managing aggressive and violent behaviour
- Liaison with parents to assist young people to comply with ISMS orders and/ or breaches of curfew times/ Probation Orders.
- Assisting parents to make contact with the police, courts, lawyers and prison services
- Assisting parents to get to custody visits and to arrange transport.
- Parents sharing information regarding young people not attending school, alcohol use and drug-taking levels.
- Requests for practical support to return young people to residential units after absconding
- Requests from parents to get help to attend a range of meetings and other appointments
- Request from parents/cares to liaise with Social Work to access crisis financial assistance

There is clear evidence from the Includem Helpline Report (2013) that pro-active Helpline support calls to families, particularly in the East area of the service, where these types of calls happen routinely, are contributing to helping families establish clear boundaries and routines with young people in the family home. Parents and carers also reported that these Helpline calls in the evening were invaluable in helping to give them confidence, to reinforce any positive decision-making and to allay any anxieties or fears they had about decisions they were making.

Having someone to listen to parents/ carers and to discuss how they were feeling was a dominant feature of the feedback received from parents and carers.

The Helpline Report also illustrated that staff were able to identify the issues that families required support with, and were able to adjust support plans to specifically address any new areas of work which had come to light through the use of the Helpline.

6.4 Review of the Helpline and Working with Families - Conclusions

A general conclusion from the case studies is that, even in the cases where there is a good level of recording of what the issues being raised are through the Helpline, there is a lack of specific detail about what and how the Includem worker actually responded to help resolve the situation. In short, opportunities are being missed to record good quality work undertaken, in terms of recording what was actually done to help manage the crises as well as the outcomes of Includem's intervention.

The recently completed Helpline Report outlines a number of key recommendations that are being implemented across Includem to improve the recording of work being carried out with young people and their families. Includem's new young person database (MAPS) has developed features that will help staff to better record the reasons for helpline calls, and how staff are responding to each individual Helpline call. Team Managers are also reinforcing routinely that helpline calls received during office hours are followed up, and the outcome of any intervention undertaken by staff is then accurately recorded as a Helpline response.

7 Supporting Families to Maintain Young People in Education

A significant finding from almost all of the Case Studies was the importance of giving regular support and advice to parents/carers to help sustain the young persons' educational placement at Primary school, Secondary school or at college.

It is clear from an analysis of the contact logs and the feedback from the face to face interviews with family members, that additional help and support was essential, not only to help many young people to attend school but also to engage with learning and school life more generally.

A number of characteristics emerged, which illustrate the types of support offered to young people and their families that were successful in many cases, promoting a real improvement in the young persons' engagement levels with their school or college placement:

- Practical support to get young people to school after significant periods of non- attendance. These "school runs " were vital in establishing new routines of getting the young person up early in the morning and in supporting parents/carers to manage negative and challenging behaviour during this process
- Promoting independent travel to school by doing "trial runs " with the young person using local transport
- Supporting parents/carers to establish new bedtime and breakfast routines to ensure that young people were getting enough sleep and eating in the morning. This was helped through pro-active helpline calls in the evenings and in the mornings to parents/carers and young people, to ensure that boundaries that young people and their parents had both agreed were being adhered to.
- Providing direct support in some cases to the young person in the classroom itself. This was achieved by agreement with the young person and the school. This allowed Includem staff to minimise any disruptive behaviour in class and thereby to reduce the number of exclusions of the young person from the classroom and from school more generally
- Providing a "listening ear" to parents about the barriers to them providing a more stable environment and offering emotional support and practical solutions to problems as they emerged.

The other dimension to offering effective support to young people in their educational placements was strong and consistent liaison between parents/carers, Includem staff and Pastoral Care teachers, Guidance Teachers and Head Teachers. This took the form, in most cases, of Includem staff promoting clear communication systems by:

- facilitating discussions between parents and teachers in informal and formal review meetings
- school teachers accessing the Includem Helpline at points of crisis to allow for Includem staff to respond directly to help de-escalate crisis situations and to support teachers in effectively managing a young persons' challenging behaviour
- to avert crisis by responding through early intervention to requests from school teachers to support young people in the classroom
- Includem staff playing a mediation role between parents, their children and the school

Delivering structured family support has yielded many positive results, with clearly defined objectives about when and how to support school and college placements:

- improved levels of attendance at school and a lower number of exclusions from school due to disruptive behaviours
- Improved relationships between parents/carers and school
- Less tension in families as a result of children being at school during the day
- Less anti-social and risk taking behaviours by young people in their local communities

8 Conclusion and Recommendations

8.1 General Conclusions

The Case Studies illustrate that there is some very good work being done with families to meet a wide variety of complex needs. Overall, it is evident that building and maintaining trusting and meaningful relationships with young people and their family support networks remains at the core of how frontline staff are delivering support.

However, there is a varying range to the quality of the Support Plans, the Contact Logs, A Better Life work and Helpline work. There are a number of areas of practice that require attention from Includem to continue to improve how staff plan, implement and review the effectiveness of the work being done with families.

On-going analysis will continue across all areas of practice to ensure that core practice standards are being met, and that the quality of professional practice continues to develop and improve in an upwardly direction.

8.2 Recommendations

1. Working with Families Module of A Better Life

The outcomes for young people are better and easier to identify in those cases where the materials from the Working with Families Module are being utilised. It is clear from the Case Studies that only a small minority of staff are currently using the new module materials with families. The best test of how good the new materials contained in the new module are, is the test of practice. The key priority is for frontline staff to start using the modular materials and for Team Managers to ensure this is happening on a routine basis.

This area of work is a key focus for practice development, and Team Managers will continue to ensure through regular supervision and support that staff confidence and utilisation of the new Working with Families module is of the highest standard.

Opportunities for sharing of good practice across the organisation will be a key part of the ongoing learning, development and improvement plan.

2. Using A Better Life with young people

There is also clear evidence that much of A Better Life work being completed with young people has some focus on the young person's relationships with other family members, and that there are many helpful exercises being used which help with the assessment of need, managing risks, support planning and evaluation. The logical next step is for this work to be integrated and coordinated with the work being planned with other key members of the family.

All A Better Life folders should be located next to each young person's case file in order to allow staff, Team Managers and the Development Team to access the materials. This would remedy the difficulties encountered in being able to find A Better Life folders. Within the new MAPS system it is possible for staff to photograph work completed from A Better Life and upload the file into the young person's file. Staff should be encouraged to do this as routine practice.

3. Learning and Development - Feedback to individual staff and Team Managers

The wealth of material and evidence accrued from the 30 completed Case Studies will be instructive in meeting the on-going Learning and Development needs of staff. There is a great opportunity to maximise the learning through feedback to individual staff and the organisation as a whole.

The next step will be to give individual feedback to frontline staff and Team Managers about all of the areas of work sampled. This process will enable staff and Team Managers to have a clearer picture of those areas of good practice, and, where identified, areas for further development of practice.

4. MAPS and the Way Forward

MAPS is Includem's new young person's database for recording, managing, monitoring and reporting on all information about the young people we support; work undertaken and progress towards outcomes. MAPS stands for Management, Analysis, Performance, and Standards.

All frontline staff across the organisation have now completed the Practice Training on the concepts behind the key set of tools used by practitioners. A key element of the training has been to emphasise the importance of understanding the links between support planning, the Wellbeing Web, Risk Assessment, A Better Life and Contact Logs. Using these tools in an integrated way will enable staff to work with all young people and their families in a holistic way, irrespective of individual styles of engagement, needs and risks.

The process of capturing and recording the work using the Working with Families module of A Better Life will continue to be developed over the coming year. Members of the Development Team will be in regular attendance at staff Team Meetings to support Team Managers and to ensure that staff not only know how to use the new MAPS system but that they are also confident in deploying, and are using, all the practice tools designed to achieve best practice in the work being done with young people and their families.

The prize of effectively using all of the available tools is improved outcomes for young people and their families. The Working with Families module is an indispensable tool in achieving this goal.

8.3 Planned Follow-up Sampling and Auditing of Working with Families

The Practice Champion will undertake a general organisational overview of work being done with families over the next 12 months on a 6 monthly basis. This will involve the sampling of a selection of young person's case files. Direct contact with 3 families from both the East and West areas of the service will take place by the end of December 2012, with a view to ascertaining the families' views about how well our service is succeeding in meeting their various support needs.



*If you would like to know more about our work
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