Seven features of practice and seven outcomes

Based on findings drawn from the evaluation of round one of the Children's social care innovation programme

October 2022

Contents

Summary

This document summarises seven features of practice to emerge from some of the most effective projects, funded through the Children's Social Care Innovation Programme.

Using independent evaluation reports from the first round of projects, thematic reports and the final overall evaluation report written by the Rees Centre at the University of Oxford, the Department for Education has drawn together a number of particularly important findings that form the basis for the seven key features. It draws upon findings from projects looking to redesign whole children's social care practice systems, rather than work focussed on a specific group of children or issue.

The framework provides an overview of what the seven features of practice look like on the ground, alongside the challenges and successes of implementation. It also outlines the difference that these features of practice can make to the lives of children and families, and the seven main outcomes achieved by projects that have demonstrated them.

This document was produced in February 2018.

Expiry or review date

This document will be reviewed before March 2024.

Who is this framework for?

This framework is for:

- Children's social care leaders and practitioners
- Social Workers
- Local authorities
- Directors of Children's Social Care

Introduction

By Isabelle Trowler, Chief Social Worker for Children and Families (February 2018)

Four years ago, when we launched the Innovation Programme, we wanted to encourage new ideas and help create new energy into a practice system that had become jaded over time, often found to be over focused on process rather than focused on practice. We wanted to begin to build an evidence base about what is it that we can do to really help families and protect our most vulnerable children. And we wanted to provide a platform to demonstrate that when the right practice conditions exist, Children's Social Care in England can deliver the most responsive, high quality, even transformational, services to local families and communities.

Building an evidence base about the Children's Social Care system is critical. How we should be organised, clarity about who does what and why, what counts as sufficient capacity and resource, and most importantly what we actually do (and shouldn't do!) to help children and families, are questions we should be able to answer with confidence underpinned by strong evidence, and not just because we believe it is ethical or because we have always done it that way. Frustrating as it may seem, we do children and families an injustice by just offering up a wish list of how it should be, rather than offering an argument which is forensic, evidence based, iterative, strategically rigorous and proven in practice. The Innovation Programme is part of a broader national infrastructure being built, to lock good evidence into an institutional memory that cannot be wiped out.

This document is being shared through the first National Learning Conference for the Innovation Programme on 27th February 2018, at which over 200 children's social care leaders and practitioners came together to learn more about the impact of innovation in the sector.

Independent evaluation reports for Round One projects were published in summer 2017, followed by five thematic reports and an overview evaluation report summarising the findings. This document shares a number of the findings that I believe are particularly important to those responsible for social work and the local systems that support it.

Of the innovation projects that show strong indications of positive impact on some key outcomes for children and families, there are a number of features present. This document explores these seven features of practice and the seven outcomes. In particular, it is designed to provide an overview of what the seven features of practice look like 'on the ground', alongside the challenges and successes of implementation, and the difference the features make to children and families. There is a particular focus on the Children's Social Care practice system as a whole.

Of course, the findings discussed are still emerging, and they will be further tested and challenged through the evaluation of Rounds Two and Three of the Innovation Programme, which will use common measures.

Also, this document focuses on those projects which are demonstrating success as evidenced by the formal evaluations but, as with any true innovation process, there were also projects which were less successful. It is crucial that we learn too from those projects and seek to avoid the conditions that hampered their impact.

Background to the Innovation Programme

What did the Children's Social Care Innovation programme set out to do?

The founding objective of the Children's Social Care Innovation Programme was to support improvements to the quality of statutory children's social care services in England, so that families are better supported and children better protected. The Innovation Programme recognised that, two years on from the publication of the Munro Review of Child Protection, there had not yet been a step change in the quality and impact of children's social care. Additional support would be needed to give local authorities and others the capacity and resources to ask themselves fundamental questions about how they could better meet the needs of children and families. The Programme aimed to provide this support – financial, practical, or otherwise – and through robust evaluation, increase the country's understanding of how vulnerable children and families can best be helped. Round One of the Innovation Programme saw £110m invested in 53 children's social care projects across the country. Following overwhelming interest and positive early progress, a further £100m has been invested in 48 projects, up to 2020, through the second and third rounds of the programme.

The full range of emerging findings from all projects can be found on the Children's and Social Care Innovation Programme on GOV.UK.

Seven outcomes

What have the most promising whole-system innovations managed to achieve?

Whilst the time Innovation Programme projects have been running is relatively short, there are already some clear indications of positive impact emerging from successful Round One projects. These include:

Greater stability for children

Twenty-four projects saw reductions in the need for social care interventions in family life (or a reduction in the need to escalate to more intensive interventions). This included reductions in children in care, children in need and children subject to child protection, and increases in reunification of families. Six projects achieved improved placement stability, including the Mockingbird Family Model fostering project which saw a 4% rate of unplanned placement change, compared to 8% nationally.[1]

Reduced risk for children

Significant reductions in the number of children identified as 'in need' or de-escalation from CIN, as well as reductions in numbers of children on Child Protection plans were achieved in eight of the16 projects measuring this outcome (the other eight saw no change or mixed results). North East Lincolnshire[2] and Hertfordshire[3] saw reductions in the need for Child Protection Plans; Leeds[4] saw reductions across child in need and child protection; and the Signs of Safety authorities saw a 22% decrease in the rate of children becoming subject to a Child Protection Plan.[5]

Increased wellbeing and resilience for children and families

Fourteen of 26 projects reported improvements in children's physical or mental health[6]. North Yorkshire reported an improvement in SDQ scores[7] and seven projects reported

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[1] Children's Social Care Innovation Programme, Evaluation of the Mockingbird Family Model, 2016, pg. 9.
[2] Children's Social Care Innovation Programme, Creating Strong Communities in North East Lincolnshire Evaluation Report, 2017, pg. 6.
[3] Children's Social Care Innovation Programme, Family Safeguarding Hertfordshire Evaluation Report, 2017, pg. 12.
[4] Children's Social Care Innovation Programme, Leeds Family Valued Evaluation Report, 2017, pg.
[5] Children's Social Care Innovation Programme, Final Evaluation Report, 2017, pg. 28.
[6] Ibid., 38.
[7] Children's Social Care Innovation Programme, Evaluation of the No Wrong Door Innovation Programme, 2017, pg. 12.

improvements in resilience, mostly for parents.[8] In the Signs of Safety authorities, parents' sense of control of their lives improved significantly.[9]

Reduced days spent in state care

Reduced days spent in state care Fourteen of the 23 projects that aimed to reduce the number of children in care achieved this.[10] Across the five Reclaiming Social Work authorities, 79% of those children identified as highest risk of needing care were successfully supported to stay with their families.[11] In Hertfordshire, the average number of days spent in care per child was halved.[12]

Increased staff wellbeing

Whilst only some projects for which this was an aim saw improvements, a small number saw significant reductions to staff sickness. Two authorities involved in Focus on Practice saw sickness absence drop 40%;[13] and where Hampshire provided highly skilled PAs to support social workers, sickness rates were reduced by 83%.[14]

Reduced staff turnover and agency rates

A small number of projects showed early evidence of reduced turnover and use of agency staff, resulting in more consistency of a social worker for children, as well as savings.[15] In Hertfordshire there was a reduction in the number of allocated social workers for each family, suggesting fewer changes of worker.[16]

Better value for money

Twenty one of 25 projects who reported on this found improvements in value for money.[17] Family Safeguarding Hertfordshire estimates savings of £2.6m in their first year due to fewer care and child protection cases showing improved consistency for

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[8] Children's Social Care Innovation Programme, Final Evaluation Report, 2017, pg. 42
[9] Ibid.
[10] Ibid., 6.
[11] Ibid., 26.
[12] Children's Social Care Innovation Programme, Family Safeguarding Hertfordshire, 2017, pg. 41.
[13] Children's Social Care Innovation Programme, Final Evaluation Report, 2017, pg. 46.
[14] Children's Social Care Innovation Programme, Social Care Innovations in Hampshire and the Isle of Wight Evaluation Report, 2017, pg. 8.
[15] Children's Social Care Innovation Programme, Final Evaluation Report, 2017, pg. 6.
[16] Ibid., 46.
[17] Ibid., 7.

families;[18] while North Yorkshire's No Wrong Door estimates over £1m savings or costs avoided per year for the authority and other local agencies.

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[18] Children's Social Care Innovation Programme, Family Safeguarding Hertfordshire Evaluation Report, 2017, pg. 12.

Seven features of practice

How have the most successful whole-system innovations achieved impact?

Whilst there was huge diversity in the context and approaches of different projects, what is striking is that those projects which showed the most promising early outcomes had much in common. Using the wealth of evaluation data produced by Round One of the Innovation Programme, we have identified seven key features of practice shared by many of the successful projects.

For the most part, these features were not implemented in isolation by projects. In the most successful projects, many of these features can be seen working together and many of the most successful innovations actually demonstrate all seven of these features coming together as part of a comprehensive change programme. The seven features of practice are:

1. Using a clear, strengths-based practice framework

2. Using systemic approaches to social work practice

3. Enabling staff to do skilled direct work

4. Multi-disciplinary skill sets working together

5. Undertaking group case discussion

6. High intensity and consistency of practitioner

7. Having a whole family focus

Seven enablers of improvement

What kind of organisation and culture is required for change to take hold?

The evaluations of Round One Innovation Programme projects also tell us something of the enabling conditions that are needed for the seven features of practice to be successfully implemented. To support innovation in children's social care, the evaluations identified the following enablers:

- Clear objectives which have been agreed across the service that establish a strong commitment to the project
- Strong leaders who create the capacity to innovate
- Relationship-centred ways of working
- Using the existing evidence base alongside ongoing data collection and analysis to inform decisions

Work commissioned by the Local Government Association and undertaken by the ISOS Partnership in 2017 takes this further, looking in detail at the enabling features which need to be in place across a children's services organisation for any improvement to be successful. Their research, which looked in detail at the journeys of nine local areas, four of which have received support via the Innovation Programme, identified seven enablers of improvement in children's services. In summary, the first four describe the importance of getting key people in a range of roles and organisations lined up behind a single, coherent strategy for improvement, and the importance of building the organisational culture, ethos and values to sustain improvement. The fifth enabler describes the need to put in place the foundations or essential "wiring" of effective children's services, and the sixth and seventh describe how local areas should think about how they continue to enhance their practice and sustain improvement.

Seven key enablers of improvement in children's services.

1. Strategic approach - Rigorous and forensic self-assessment; open and honest to external feedback; develop a vision and strategic plan that is right for the organisation.

2. Leadership and governance - Maintain the right, stable, focussed leadership at all levels; don't rush into a restructure; establish effective, professional governance.

3. Engaging and supporting the workforce - Change the rhetoric and avoid the 'blame game'; articulate high expectations and ambitious goals; stabilise the workforce; develop staff from within.

4. Engaging partners - Engage senior partners; align thresholds; review practices through multi-agency audits; remain outward facing.

5. Building the supporting apparatus - Maintain a secure front door; ensure the flow of cases reflects a child's journey; know the business; develop routines to track progress.

6. Fostering innovation - Create a learning culture; test and pilot new ideas carefully; evaluate rigorously.

7. Judicious use of resources - Ensure strategic and financial planning are aligned; invest where it is needed; sustain investment until improvement is embedded; focus on long term priorities.

Seven outcomes, seven features of practice, seven enablers of improvement

Our hypothesis is that to achieve genuinely transformational and sustained change in children's social care, and significantly improved outcomes across the system, the right focus and action is needed at the levels of both practice and organisation.

The ISOS enablers are factors that need to be in place at the corporate, whole organisation and partnership level; whilst the seven features of practice identified through the Innovation Programme are specifically about social work practice – they describe how to create an environment where social workers do better work with families day-to-day.

Action at these two 'levels' is mutually reinforcing. Excellent practice can only flourish where the organisational enablers are in place as a supportive framework, and when there is excellent social work practice that focuses on the seven features it provides the focus, momentum and fuel for wider change.

Table 1: Seven outcomes, seven features of practice, seven enablers of improvement

Number	Features of Practice	Outcomes	Enablers of Improvement
1	Using a clear, strengths-based practice framework	Increased wellbeing and Resilience for children and families	Strategic approach
2	Using systemic approaches to social work practice	Reduced risk for Children	Leadership and governance
3	Enabling staff to do skilled direct work	Reduced days spent in state care	Engaging and supporting the workforce
4	Multi-disciplinary skill sets working together	Reduced staff turnover and agency ratings	Engaging partners
5	Undertaking group case discussion	Increased staff wellbeing	Building the supporting apparatus
6	High intensity and consistency of practitioner	Better value for Money	Fostering innovation
7	Having a whole family focus	Greater stability for children	Judicious use of resources

Seven features of practice in-depth

A look at each feature in detail.

Practice feature one

Having a clear framework of practice means having a widely owned and well-defined set of values and theoretical principles that underpin all work with children and families. These values and theoretical principles must be understood, shared and used across the whole organisation, including by partners, and they must flow from and be championed and embedded by leaders.

A strengths-based approach is one which specifically focuses on identifying families' strengths as well as their difficulties and supports the family to understand for themselves how they can use their strengths to help overcome their difficulties. All of the most successful Innovation Programme projects used strengths-based practice frameworks.

What difference does it make?

Creates a shared understanding of what good practice looks like, alongside clear expectations – practitioners know what is expected of them and families get a more consistent experience, as every social worker is working in a similar way.

Gives all practitioners a shared language – when all practitioners and partners are working with the same practice approach, they can easily discuss cases and get involved in each other's work.

Provides a vehicle for developing direct work skills – through the process of developing staff in a new practice approach.

Children and families are empowered – rather than just being told what they must do, children and families are supported to come up with their own solutions, which gives them a deeper ownership of what needs to change and how they can go about it.

Potential pitfalls

Sending people on training courses is not enough - several evaluations highlighted the importance of a multi-dimensional approach to developing skills, and of coupling training with changes to organisational culture, management expectations and supervision/ coaching.

IT and recording systems can stop the new practice approach taking root – if these systems do not allow practitioners to record information in line with the new approach, there can be duplication of effort and slipping back to old ways of working.

"I'd been qualified for six years, and I remember sitting in one of the sessions and speaking to a colleague and saying, I actually don't know what I've been doing for the last 6 years …because I think the framework gives you so much focus, doesn't it? In terms of identifying risks, strengths, I almost feel like what was I doing before that?" – Social worker, Signs of Safety evaluation, page.47

Using systemic approaches to social work practice

Practice feature two

Systemic approaches focus on the way relationships shape the particular difficulties or challenges that face a family or other caring system. These relationships are considered at the level of the family system and of the wider social system which influences how families operate.

The generation of multiple ideas about how family relationships might be working to keep problems going is encouraged, and systemic interventions focus on whichever of these ideas seems to best fit the family system in terms of supporting relationships to be more helpful and reduce the difficulties that a family faces. This also applies to the relationship patterns that develop between a family system and helping agencies. Systemic approaches are used alongside strengths-based approaches as the two complement one another.

What difference does it make?

Social workers see themselves as active change agents – seeking to catalyse change, not just assess and report.

Children and families are empowered - they are supported to take ownership of their own solutions.

Creates sustainable change – because families help create and own change. Families feel listened to - the approach encourages a deep and inquisitive analysis of what is happening for the family.

Potential pitfalls

Introducing a new practice approach requires change across the whole system - organisational culture, management practices, coaching and supervision, IT and recording systems and training all need to support the practice approach.

Support and commitment from managers is especially important to ensure systemic approaches are widely and effectively used – barriers to systemic approaches being used include not enough time for systemic case discussion/supervision, and some staff finding it difficult to translate systemic theory into their practical work with families.

"[I think] of strategies to break unhelpful patterns ... The questions I was asking in this case seem to always come back and its similar reasons, because of the parents and their relationship and their communication difficulties. So, I was trying to think, OK, what can we do different this time that hasn't worked before, to try and progress. Because otherwise they're going to keep getting re-referrals."[19] - Social worker, Focus on Practice evaluation

"Our focus has been on the kind of training to work differently, and to think therapeutically... I think that's what enables us to kind of pull together and work as a team, in the way that we do."[20] - Project team member, Ealing Brighter Futures evaluation

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[19] Children's Social Care Innovation Programme, Focus on Practice in three London boroughs: an evaluation, 2016, pg. 20.
[20] Children's Social Care Innovation Programme, Ealing Brighter Futures Intensive Engagement Model: Working with adolescents in and on the edge of care, 2017, pg. 17.

Enabling staff to do skilled direct work

Practice feature three

Providing the right training, coaching and supervision enables social workers to deliver higher quality direct work with children and families. Increasing support from non-social work staff, volunteers and/or administrative staff significantly increases the amount of social worker time available for direct work with families.

What difference does it make?

Better support for families – because they have access to more, higher skilled, better supervised support. Several of the evaluations reported positive change in social work practice, and many cited evidence of better experiences for families. More social worker time spent on direct work – because work that doesn't need a social worker is done by others. In Hampshire and the Isle of Wight, the use of skilled PAs led to an increase in social worker time with families from 34% to 58%.[21]

Potential pitfalls

Good administrative support is frequently overlooked - but evaluation suggests that highly skilled administrative support can substantially increase the amount of time social workers spend on direct work.

Caseload alone isn't enough to understand social worker time pressure – whilst it is frequently observed that high caseloads limit the ability of practitioners to use their skills with families, factors such as balance of complexity across cases; practitioner experience and the type of support available all need to be taken into consideration when assessing appropriate workload size.

> *"Social worker demonstrated high level of skill in collaboration, purposefulness, clarity of concern and child focus. It was noted that the social worker 'actively draws on parents' ideas about how to sustain positive changes and consider the impact of positive changes."[22] - Summary of visit observation, Family Safeguarding Hertfordshire evaluation*

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[21] Children's Social Care Innovation Programme, Social Care Innovations in Hampshire and the Isle of Wight Evaluation Report, 2017, pg. 20.
[22] Children's Social Care Innovation Programme, Family Safeguarding Hertfordshire Evaluation Report, 2017, pg. 46.

"Working with the pair of them, I would give them 10/10 … they've really pushed me forward. And I have pushed myself forward at the same time cos they've let me do it my own way." - Feedback from father, Family Safeguarding Hertfordshire evaluation

Multi-disciplinary skill sets working together

Practice feature four

Having different professional disciplines with a range of skills and knowledge working consistently as a team to support the family, and making decisions together, enables better decision making and better responses to families' needs in the round. Innovation Programme projects achieved this in a number of different ways, for example by employing systemic family therapists to work as part of social work teams, or by bringing adult specialists together with children's specialists in a single team. Where professionals form a single team, the risk of families being passed between services is reduced, and the likelihood that the team will be able to meet all of the family's needs in a timely way is increased.

What difference does it make?

Greater coherence for families – multi-disciplinary teams simplify contact with families. Because professionals in a single team can share information more easily, families don't get multiple contacts and don't have to repeat themselves.

Better, shared decision-making – when a multidisciplinary group make decisions collectively, they bring a range of perspectives, challenge each other's thinking and ultimately make better informed decisions.

Easier access to specialist help – where teams include specialists, for example adult workers or domestic violence specialists, the needs of the whole family can be better met within the team without 'hand-offs' and outside referrals

Potential pitfalls

Co-location is important – teams where professionals work together in person on a day-to-day basis are able to make more difference than 'virtual' teams of professionals who work to different managers and separate agency priorities.

It is important to get information sharing right - some projects found information sharing across agencies harder to put in place than multi-disciplinary teams, often because of data protection issues and barriers such as getting access to different IT systems.

Separate lines of management can undermine impact – by preventing professionals working as a genuine team

"In this approach you've got the benefit of going to people from other disciplines and you kind of get the wealth of all of their knowledge... [Historically] I kind of was solo working for most of my cases so it was quite easy to get stuck or keep trying the same things, whereas I think I always get a fresh look at the case in group supervision... which I find massively valuable."[23] - Lead professional, Ealing Brighter Futures evaluation

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[23] Children's Social Care Innovation Programme, Ealing Brighter Futures Intensive Engagement Model: Working with adolescents in an on the edge of care, 2017, pg. 26

Undertaking group case discussion

Practice feature five

Teams discussing and making decisions on cases collectively, within the context of a clear shared approach to practice, enables them to jointly problem solve and test each other's analysis. Crucial elements of group case discussion include the involvement of multi-disciplinary expertise and access to highly skilled senior/ consultant social workers (to clinically supervise and lead the discussion/decision making). This is a move away from isolated practitioners supporting families on their own to a team-based model where the lead practitioner can draw on expertise from a range of professional disciplines.

What difference does it make?

Supports the development of good practice – through role modelling, coaching, and quality professional discourse.

A range of professional expertise is brought to bear on each case – a range of professional disciplines are involved, and therefore able to challenge each other and bring different perspectives.

Better, quicker decision-making – knowledge is easily shared, and case leads are supported to make decisions.

Potential pitfalls

Co-location is important - as well as meeting for group case discussion, day-to-day co-location of the multi-disciplinary team was shown to be important in developing greater understanding between different professional disciplines.

In-depth case discussion takes time – some evaluations highlighted feedback from staff who felt time wasn't sufficiently prioritised for proper systemic case discussion, or discussions were cancelled too easily.

> *"We spend a lot of time thinking about families and it is quite evidence based. It's just about having a different conversation and being able to reflect on what you, as a worker, bring to the family, negative and positive. That way you can be mindful and do things differently if things*

don't work."[24] - Strengthening and Deepening Reclaiming Social Work evaluation

"In locality you always have a social worker and whoever is supervising as the main power, whereas actually [in our team] it's a shared group power... if there's a crisis...this all becomes very helpful...you're getting advice from different people with different expertise."[25] - Ealing Brighter Futures project evaluation

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[24] Children's Social Care Innovation Programme, Scaling and Deepening the Reclaiming Social Work Model, 2017, pg. 49
[25] Children's Social Care Innovation Programme, Ealing Brighter Futures Intensive Engagement Model: Working with adolescents in an on the edge of care, 2017, pg. 29.

High intensity and consistency of practice

Practice feature six

Successful projects often focussed on ensuring children and families had access to a consistent single practitioner within the team who was their main point of contact, with this person providing intensive support over time. In the case of projects working with adolescents, having a specific person focussing on building a positive relationship with the young person was important. This practitioner's aim would be to create a strong relationship with the young person/family, and act as a bridge to other members of the team, to aid engagement.

The consistent single practitioner could be but was not always a social worker. In some projects, using other qualified professionals in this role worked well for children and was a good way to free up social worker time to focus on the specialist tasks which only they could complete

What difference does it make?

Prevents confusing multiple approaches to families – by ensuring planning and action is joined up and routed through one person.

Helps build strong relationships – the young person and family have someone consistent and reliable who they feel is invested in them.

Helps to overcome mistrust and increase engagement – the main contact can be the 'face' of the intervention and others lead aspects of work behind the scenes, in line with their specialist skills. The main contact can act as a bridge to support the family to engage in more specialist interventions as necessary.

Potential pitfalls

Non-social work staff need the right support to manage risk – some evaluations showed that where non-social work staff are in the lead, they need the support of a qualified social worker to feel confident managing risk effectively.

> *"There's definitely more support available, and that's for the parent and the child... with [name of lead worker] being positive, her positive thinking, and saying I was a good mum, and you are making the right choices, and by looking and observing me in my home...it's more like having a relationship and talking and I guess coming into my home and*

seeing how I really am, instead of making assumptions."[26] - Parent, Ealing Brighter Futures evaluation.

"Young people valued their workers being available to meet their needs, rather than only being available by appointment, and sensed that they genuinely cared for them, rather than just going through the motions. Examples were given of workers going the extra mile by seeing young people in their own time and continuing to respond to young people in need even where a new worker had been appointed."27 - North Yorkshire's No Wrong Door project evaluation.

[26] Children's Social Care Innovation Programme, Ealing Brighter Futures Intensive Engagement Model: Working with adolescents in an on the edge of care, 2017, pg. 29

[27] Children's Social Care Innovation Programme, Evaluation of the No Wrong Door Innovation Programme, 2017, pg. 41.

Having a whole family focus

Practice feature seven

While practitioners must always remain focussed on the needs of the child, it is often by working with the whole family that children's outcomes can be improved. How immediate and wider family members relate to each other, as well as to the professional network and wider community, helps build understanding about what life is like for a child. Often adults have their own specific health and social needs. Couples, and parents who don't live together, often have complex relationships with each other and with their children, which need to be understood too. Overall, how families function and why plays a big part in thinking through how best to help.

What difference does it make?

Prevents escalation and tackles root causes of a family's social problems – the needs of parents (for example as a victim or perpetrator of domestic abuse, or because of substance misuse, mental ill health etc.) are often at the root of risks to children, so effective strategies to address these needs are critical to creating genuine improvement and preventing escalation.

Reduces family stress - because of debt, housing, parental conflict and other social pressures, by providing advice, advocacy and social support.

Creates long term, sustainable solutions - the focus is on addressing root causes and improving outcomes for the family as a whole.

Potential pitfalls

Addressing adult needs requires the right skills mix in the team – teams need to include professionals (or have easy access to professionals) able to tackle a combination of adult issues as well as supporting children.

Working with both parents is important – a willingness to work with both parents was flagged up as a potentially important aspect of achieving genuine whole family engagement. This includes working with absent or non-resident parents and their families, as well as with non-family members living in the family home.

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