

Shropshire Council

Early Help Family Hubs

Engaging Families Guidance

June 2019

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‘Helping families involves working with them and therefore the quality of the relationship between the family and professionals directly impacts on the effectiveness of help given’

Munro 2011



Foreword

This guidance has been developed to support the Shropshire Early Help Offer by assisting workers with the effective engagement of families in the offer of support at the earliest opportunity.

It provides guidance in recognising, understanding and responding to difficult to engage and risky behaviours which may be encountered when working with families, especially those with complex needs.

This guidance underpins the Early Help Family Hubs Practice Standards and responds to learning from national and local serious case reviews

Key Messages

- The quality of the relationship between the worker and the family makes the most significant impact on the effectiveness of the engagement;
- Persistence of workers to engage the family in the offer of support at the earliest opportunity is critical;
- Adopting a whole family approach is key, being mindful that child and parental issues do not sit in isolation;
- Families and workers may present barriers to effective engagement;
- Families who present with a range of multiple and complex needs require a clear and timely plan of support rather than episodic intervention if long term sustained change is to be achieved;
- Practitioners need to adopt an authoritative approach ensuring that they are always mindful that their primary aim is to improve outcomes for children and young people.

‘To establish a rapport implies an interaction that is meaningful... it describes the quality of a particular interaction... and the way thoughts and feelings have been shared and understood... (it) involves creating a climate where the interviewee can begin to gain confidence in our favorable conditions necessary for people to be able to discuss and reveal problems or difficulties...’

(Trevithick 2005, p147-148)

Engaging challenging and/or resistant families is a complex task. This reflects the complexity of the family structures and relationships involved. Consequently, there is no simple formula that will provide easy and quick solutions.

It is important to remember family engagement is not a one-off event, i.e. getting through the front door to get the family to consent to being involved and accepting of help and support. It is also about engagement in the ongoing process of working towards positive outcomes for the children, young people and their parents and carers.

Effectively engaging families can be split into three stages:

1. The process of first attracting or motivating a family to attend the service for the first time;
2. Enabling the family to recognise the benefits, goals and expectations of the service;

3. Building a relationship between the practitioner and the family members and engaging them sufficiently to begin delivering meaningful and beneficial support that is accessible and suitable to the individual and their family.

The Munro Review (2011) highlighted the importance of professional relationships in improving outcomes for children, young people and their families and the skills and experience of workers in being able to achieve this.

A key feature in many serious case reviews has been the lack of persistence of workers to engage the family in the offer of support as well as the lack of co-operation and/or hostile attitude of a small number of parents/carers. **When there are child wellbeing or protection issues, a failure to engage with the family may have serious implications and escalation to Children's Social Care should be considered.**

It is now well established that it is important to intervene early if more serious problems are to be avoided later in life (Shonkoff & Phillips, 2001). The risk factors that increase a family's vulnerability are well known **and effective services are available to support these families.** One of the major barriers to service delivery is that vulnerability increases the likelihood of refusing the offer of services. The more vulnerable families who do engage are also more likely to disengage before positive outcomes are met and sustained (Sanders & Cann, 2002).

Principles for successful and sustained engagement with families:

- be child centred;
- be open and transparent;
- apply relationship-based practice to build an effective and trusting relationship with the **whole** family;
- apply Motivational Interviewing techniques to help the family see that change is possible;
- recognise that the most effective relationship to enable change is a partnership;
- set professional boundaries with the family setting clear ground rules from the start of an intervention;
- workers and parents must be willing to listen to and learn from each other;
- acknowledge that families are the experts in their own lives;
- focus on family strengths first and foremost;
- acknowledge that all families have the potential to change;
- be honest with families about the sharing of information, especially in relation to safeguarding;
- use persistent and proactive approaches to engage the family;
- apply a multi-agency approach to supporting the family;
- regular and effective support and supervision for workers is essential as this encourages reflection, guidance and evaluation;
- make sure that when ending the intervention this is effective to support the family's next engagement experience.

Techniques and approaches to engage the most complex and resistant families:

To ensure that the principles for successful and sustained engagement are put into practice the following approaches could be considered:

- be clear with the family from the outset about the purpose of Early Help and the role of a Family Support Worker, explaining the benefits of engaging in support offered to the whole family. Introduce a working agreement with the family to be clear about expectations for both the family and the worker. Be transparent about why engagement is necessary and model positive behaviours. This should help to reduce any fears that the family have about engaging in support;
- be child centred, keeping the child or young person's voice, wishes and feelings in clear focus. Where consent to work directly with the child is in place build a relationship with the child first (see **Establishing good relationships with children and young people** section within the Early Help Practice Standards). This can be done through support sessions within school. If the child engages they will tell their parents/carers how positive your involvement is and this may act as an route in to the rest of the family;
- start with and build on family strengths. If a worker only focuses on the family's problems this will set a negative tone and act as a barrier to the family engaging. Being positive will show the family that they can achieve positive change;
- focus on building and sustaining a relationship with the whole family through actively involving them at the assessment and planning stages, establish what support the family feel they need to give them some ownership of their Early Help plan and to share decision making with them. Through this the worker will display a non-judgemental, respectful attitude and will demonstrate to the family that their views are important. Show an interest in what the family are interested in. This will help the family to feel empowered and valued;
- to support early relationship building offer to meet the family at the Early Help hub or other local community venue as an alternative to the family home for the initial meeting. Home visits will need to take place once trust has been built. In cases where neglect has been identified home visits will be crucial to support the assessment of need and to identify any safeguarding risks;
- clear communication using a variety of methods. This can include telephone calls and/or text messages. Ask the family how they prefer to be contacted. Be mindful that 'official' looking letters may bring fear to a family, and in some cases parents/carers may not be able to read and may therefore be ignored. Any written correspondence should clearly state dates and times of scheduled home visits/support sessions/meetings and clearly state the venue if not taking place at the family home. Avoid the use of jargon when communicating with families. The use of text reminders to a family prior to a home visit or meeting can be effective;
- visit the family jointly with a professional from another agency who may already have a positive relationship with the family. This will provide a route into the family through a partnership approach. If the family sees that a 'trusted' professional feels your intervention would add value, then they may be more likely to engage;
- try and be at the child's school at drop-off and collection times. This will provide an opportunity to see the parents/carers and engage them in support;
- carry out unannounced visits to the family home if scheduled appointments are being ignored or cancelled. Unannounced visits should only be carried out by workers who have undertaken Lone

Worker training and have access to a Lone Worker Monitoring System. The worker must carry out a dynamic risk assessment to ensure their own safety and unannounced visits must not take place to families where risks have been previously identified. Discussions with line managers are essential prior to decisions regarding unannounced visits being made;

- ensure non-resident parents and/or significant others in a child's life are actively engaged to participate in the offer of support. Do not rely on just one parent/carers view and be mindful of one parent restricting engagement or the voice of another being heard;
- use persistent, assertive and proactive approaches to engage the family. Provide a persistent message that you are there to help; persistently challenging behaviours encouraged parents to take ownership of the issues that need to be addressed, whilst ensuring they are clear about the implications and consequences of their behaviours;
- adopt professional curiosity.

Fauth et al (2010) confirm that empathy and established relationship skills (although necessary) are not enough when working with resistant families. These essential skills need to be balanced with an 'eyes-wide-open' bounded and authoritative approach that contains anxiety and ensures the child's needs remain central.

Authoritative practice

The quality of the interaction with families on behalf of children by Early Help practitioners is a determinant in achieving the best outcomes. Shropshire Council requires that staff are always mindful that their primary aim is to improve outcomes for children and young people.

Authoritative practice is that which intervenes on behalf of the child with official authority.

It requires practitioners to:

- Avoid the tendency to believe what they are told but to always question and have professional curiosity.
- Take all plans seriously and work towards them.
- Hold a tight grip on intervention, being purposeful in their work.
- Clarify and check all family members and significant others, including those who do not live with the child.
- Be tenacious and exercise respectful uncertainty in examining and challenging adults' accounts of situations.
- Practice in a way that makes demands on parents, and objectively measures their progress in reducing risks and meeting the needs of their children.

Barriers to effective engagement

Effective engagement is crucial to work with all families but especially with families with multiple and complex needs, particularly since many of these families have a history of non-engagement and often have actively disengaged or rejected previous support for a range of reasons.

As fore-mentioned in the key messages barriers to engagement may come from either the family or the worker.

Some practitioners find it difficult to engage due to:

- not having the necessary skills needed to address families' defensiveness and anxieties;
- misunderstanding the practical and emotional difficulties that impact on people's ability to engage;
- lack of time to build meaningful, trusting relationships with all family members;
- the workers own values, beliefs and attitudes may be different to those of the family and lead to value clashes;
- Pressure from the service to engage and make changes within a family quickly.

Some families find it difficult to engage due to:

- previous negative experiences of agencies;
- experience of intervention as a young person;
- not understanding professionals' concerns, or having them explained fully to them using language they understand without jargon;
- cultural differences;
- genuine fear – will my children be removed?
- anti-authority stance, dislike or fear of authority figures;
- lack of communication from professionals;
- not wanting to have their privacy invaded;
- having something to hide;
- having experienced services where their problems have been treated in isolation, so they disengaged because they were overwhelmed by the other needs they face;
- having very low aspirations or being daunted by how services present themselves;
- unidentified needs for example, mental health issues or learning disability, which may have previously stopped the family from engaging in support or making progress;
- wider problems they face are not being considered. For example, appointments might not be kept due to ongoing circumstances which workers are unaware of;
- individuals failing to acknowledge their own needs, or to acknowledge the impact that their needs and/or behaviour are having on others. For example, a parent with mental health needs may fail to recognise the impact that their behaviour is having on their child's needs being met;
- a family may have engaged with services and received support in the past, but the support may not have been sustained for a long enough period causing the family to regress once the support ceased. This may mean the family is now not motivated to re-engage;
- a chaotic lifestyle (for example, substance misuse, mental health needs, domestic abuse or lack of time management skills) may have previously led to missed appointments and being discharged prematurely from a service, leaving the family member feeling de-motivated to try again;
- feeling inadequate, stressed or threatened by the support being offered or being unable to see its practical benefits they are more likely to avoid participating;
- not understanding what is expected and why;
- resentment of staff changes;

- fear of oppressive judgements (e.g. parents with additional needs, substance misuse or ex-offenders);
- fear of stigmatisation;
- being overwhelmed by emotional pain, depression, anxiety or guilt;
- having nothing to lose, if children have already been removed;
- not feeling comfortable seeking help. Sometimes this occurs when families are most in need of support;
- a difference of opinion between parents and professionals around the presenting needs of the family;
- a history of not receiving the help when requested by the family and only when identified by a professional.

Practitioners identifying an issue arising from concerns about poor access/engagement should seek to promptly:

- discuss the concerns/issues with a manager;
- ensure all discussions and attempts at engagement are clearly recorded;
- gather information from other services known to the family;
- consider what other agencies need to be informed of the engagement difficulties;
- consider how quickly it is necessary to respond; is there a need for immediate action?
- hold a multi-agency meeting with the professionals involved with the family to discuss barriers to engagement and agree an action plan to address and overcome these.

SSCB Child Protection procedures must be followed where there are concerns regarding the welfare or safety of a child or young person or if a crime has been committed.

‘Management support and oversight in the form of effective supervision that challenges constructively and develops curious practitioners is vital to providing challenge when working with resistant and complex families. This needs to be underpinned by transparent audit processes that demonstrate a learning culture and an acceptance that where errors are made these will be learned from.’

(Shaheed, Research in Practice, 2012)

Definitions of non-engagement

Non-engagement by families can present in different forms on a continuum from superficial and ineffective engagement to, in a minority of cases, hostility, threats and violence. Behaviours may include:

- **Ambivalence:** consistently late for planned appointments or cancelling appointments; changing the subject during discussion to avoid dealing with issues. Ambivalence can be common and doesn't necessarily mean long-term non-engagement. It can occur due to the family being unclear about what is expected of them or because of previous poor experiences with services;
- **Avoidance:** avoiding or failing to turn up to appointments; being unavailable for planned visits or cutting visits short. Avoidance is often associated with a lack of trust;
- **Non-compliance:** actively sabotaging implementation of the Early Help plan either through actions or omissions;
- **Disguised compliance:** giving an outward appearance of cooperating to avoid raising suspicions and to minimise agency involvement. Parents/carers may align themselves with certain professionals and may only engage with certain elements of the Early Help plan which will result in no significant change being made despite significant input. Change in one area of functioning is not matched by change in other areas and change may only occur because of external agencies/resources, not parent/carer efforts. Persistent failure to keep appointments is also a feature of disguised compliance. Children are sometimes 'coached' to suggest that all is well and in some cases a child's report of the family situation conflicts with that of the parent/carer. These factors can result in highly manipulative behaviours from parents/carers who are very accomplished at misleading professionals (see further definition of **Disguised compliance** within the Early Help Practice Standards);
- **Confrontation:** challenging professionals, disputing facts, provoking arguments, extreme avoidance (not answering the door when obviously at home), dismissive body language;
- **Hostility; threats or actual acts of violence against workers:** this includes intimidation and behaviours deliberately used to keep professionals at bay, or to have the effect of keeping professionals at bay. This this will only apply to a minority of cases but is the most difficult and challenging of the hard to engage behaviours to work with and professionals may find themselves seeking to avoid difficult or challenging interventions with the family, either consciously or unconsciously. Parents/carers and young people may have previous experience of getting their way through violence and intimidation. They may also use, or threaten to use, complaints systems to change or control professionals.

Where families are hostile or hard to engage practitioners must ensure they do not develop low expectations of what can be achieved (Laming, 2009:23). Hostile behaviour is often a distraction technique. If as a practitioner, you became fearful during a visit you should discuss this with your manager. Think how a child or young person may feel in this situation. Being 'seen' does not mean a child is safe. Ask yourself: 'what's it like to be this child?' Ensure also that you ask them this when you see them on their own.

'Families lack of engagement or hostility can hamper practitioners decision-making capabilities and follow-through, with assessment and planning leading to practitioners focusing too heavily on small improvements rather than, keeping families' full histories in mind.'

(Fauth et al, 2010)

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