

Core Skills Resource Book

Children, Young People and Education



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Introduction

This resource book is intended to support practitioners to engage children and young people in their assessment and future interventions in a supportive and enabling way. The importance of the child's voice in assessments cannot be underestimated. Not only do children and young people have a clear right to express their views and to be involved in decisions about them, their views and wishes can be a powerful focus for intervening in family life in ways which promote positive change and maximise potential for positive development.

The tools contained within this resource book are based on the content of the Core Skills training that has taken place all over Kent during 2019/20. The tools have been gathered from a variety of sources and they are underpinned by key concepts such as 're-framing' and strengths based intervention.

The tools are designed to follow the child or young person's journey through Integrated Children's Services. However, we would encourage you to use them flexibly wherever you feel they will be useful. We would also encourage that you continue to develop your own tools and ideas for communicating with children and young people and to share those with your colleagues.

Acknowledgements

This toolkit has been compiled by the Practice Development Team.

Many thanks to the following for their ideas:

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Foreword

The core skills training which was co designed with our young apprentices has opened a useful dialogue around practice and a recognition that people present with complex needs and issues and there is no one size that fits all! Our aspiration as a practice development team was to embed a foundation of the learning which will in future months be strengthened by more intensive learning and training transfer.

By creating this resource book, we have attempted to capture as many direct work tools as possible, it is not an exhaustive list. There are so many ways of engaging children, young people and families in direct work and we have attempted to offer our frontline staff a compilation of these, that will inevitably grow in time. Please use these tools and share them with your colleagues internally and in other agencies. If nothing else by using these tools together we will develop a language that is unique to Kent and understood and helpful to our communities.

Susan Ashmore



Principal Social Worker





Kent's Practice Framework

The **principles** at the foundation of our framework are that ecological, systemic, familial, cultural and environmental factors and change can occur within relationships.

We aim to **develop** practitioners who are skilled and able to identify, understand and respond to the needs of families and the contexts that impact on their lives.



Creating practice for you

Motivational Interviewing can support children, young people and families to think about making changes to overcome hurdles and remain motivated.

The Practice Framework enables us to take a much broader **strengths-based** approach in our work with children, young people and families.



We recognise that children and families do not exist on their own, but have ties and **Interconnections** with others that can be sources of **strength and resilience**.

Social Connectivity practice may help identify and build a lasting support network, which can support that child's journey into adulthood and towards independence.

Sometimes we may not be aware of trauma, therefore it is important that we take a **trauma-Informed** approach to our work.

Solution-Focused methods can help to empower children, young people and families by shifting their thinking from being 'problem-based' to identifying the possibilities for change.

Appreciative Inquiry helps identify all the things that are working well. Sometimes strengths and successes go unnoticed, yet they can help to build resilience during difficult times.

A **Contextual Safeguarding** approach helps identify community guardians and businesses that can improve the safety in a neighbourhood, or consider how a space can be changed and re-purposed for the benefit of the wider community.

Restorative Approaches can support young people who are in conflict or affected by crime to communicate, repair harm and find solutions for the future.

Core Skills Feedback

Staff were asked to share their views about what changes they would make in their practice and what had been helpful learning for them during the Core Skills workshops.

I will really involve the child or young person - include them in what I do and what I say.

I will remember that what you record in your notes is someone's history.

I now have a greater understanding of the practice framework. Thank you.

Core Skills training has made me think more about professional curiosity.

After today, I will think about the wider networks around a family for support and information.

Luke's story re-enforced the importance of how professionals can be wrong.

I feel encouraged to think outside the box and widen my observations and questions.

This workshop has given me a greater understanding of contextual safeguarding.

Today has given me time to reflect on my practice as I don't always get the opportunity to do.

I have considered how the restorative approaches could be used to prevent placement breakdown

I have found this training very thought provoking.

I have considered what is best tool to use rather than the easiest one or the most familiar.

Getting alongside children and young people

It is important to take time to help children and young people understand why you are visiting so that they can be clear about what involvement they can have in their assessment and planning. In terms of relationship-based practice, engaging is a first step to developing a positive rapport with a child or young person.

What is it?

There are many ways you can talk to the child or young person about the reasons for involvement, why you are assessing their family and what you will be looking at to make decisions. Whichever way you explain an assessment to a child or young person it is important careful explanations are given at the engagement stage of work.



Tools to explain the assessment process

2: Example of how to explain assessment

You are important and sometimes we need to make sure that you are happy about things like home, school, your family, or friends.

It is my job to talk to you and your family about where you live and go to school, about your family and what like to do.

To do this I will talk to you and I will listen carefully to what you want to say.

To help us do this we have some activities like drawing, fun sheets to fill in, games that we can do to help us remember to talk about all the important things and to make it easier for you to say what you want to say.



I may need to talk to other people who can help me understand how things are for you.

Then we will decide if you and your family need anything to help keep you healthy and happy.

When I've talked to you, I will write down what you tell me, and this will help us to decide if anything needs to be done to help keep you healthy and happy.

We will decide together what you want to say in the report.

I don't have to write down everything that you say but if you or any other child is being hurt then I will HAVE TO do something to make you safe. Here is how to get in touch with me.



3: Example of how to explain assessment

Why am I having an assessment?

We need to do an assessment to make sure that you have all of the things that you need to help happy and be healthy.



This means that I would like to talk to you about how your life is at the moment, about who you live with and other people that you see. We may also talk about what sort of things you like to do, school or college and other places that you go, how you feel about home, school, friends and any problems that you may have.

If you have any questions or I have used any words that you haven't heard before, please ASK ME and I will explain them.

What you think is very important?

I would like to hear about the things that you like about your life and what you would like to change.

I will also need to talk to the other people that know you best, parents or carers, perhaps a teacher that you get on with or someone else in your family. We can discuss who I should talk to and you can help me to plan that.

After I have talked to you, I will write down what you tell me and this will help us decide if anything needs to be done to help keep you healthy and happy.

Then we will decide if you or your family or carer need extra help to make sure that you have the things that you should have and need to help keep you healthy and happy. I will write a report that will be A PLAN of what we are going to do. I will write your views into that report.



Not everything that you say needs to be written down. We will decide together what you want to say in the report and who gets to see which bits of it.

But if you or any other child is being hurt then we HAVE TO do something to make you safe.

Then I will plan a meeting where all the people who can help to sort things out will come together to think about what needs to happen next.

I will talk to you again about that meeting and we can think about how we can make sure that your views are heard there.

Here is how you can get in touch with me:

Getting to Know You Board Game

What is it?

This is a simple idea of a board game for 2 players (Cooper, 2011) it helps develop a trusting relationship with the child because it involves the worker and the child sharing information instead of just the child having to reveal information.

Also, it gives the child something to focus on while you are talking about difficult topics. It can be used with any child happy to play it with you. A simple version is often good for an initial meeting or for those at earlier stages of development. A more complex version can be devised for follow-up meetings or with older children.

What do I need?

You need a piece of card or paper (it can sometimes be useful to have a pre-prepared and laminated one for repeated use), dice and two counters.

What do I do?

The board should have squares around the outside like a 'monopoly' board. There should be a "start" square and then each square should alternate with either "like" or "dislike" or "happy" or "sad". See opposite for example.

Show the board to the child and choose who is going first.

When a player lands on a square, they should give an example of something that they like or dislike or makes them feel happy or sad (depending of which version you are using). A more complex version can be devised with a greater range of emotions (with things that make you angry, disappointed, embarrassed etc).

It is important that you and the child play and give examples together. As the child gives examples, make sure you ask follow-up questions such as what, how and so on, but do not pressurise them or make them feel as if they are being interrogated.

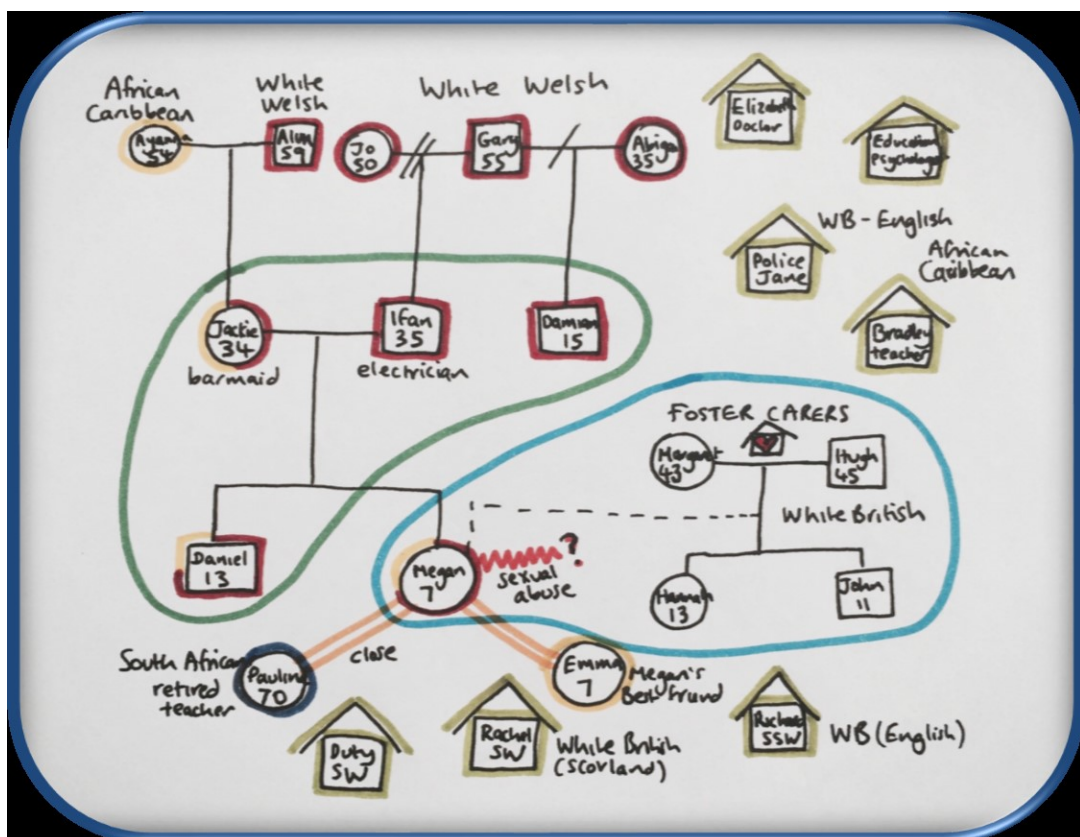
Start	Like	Dislike	Like	Dislike
Like				Like
Dislike				Dislike
Like				Like
Dislike	Like	Dislike	Like	Dislike

Genograms

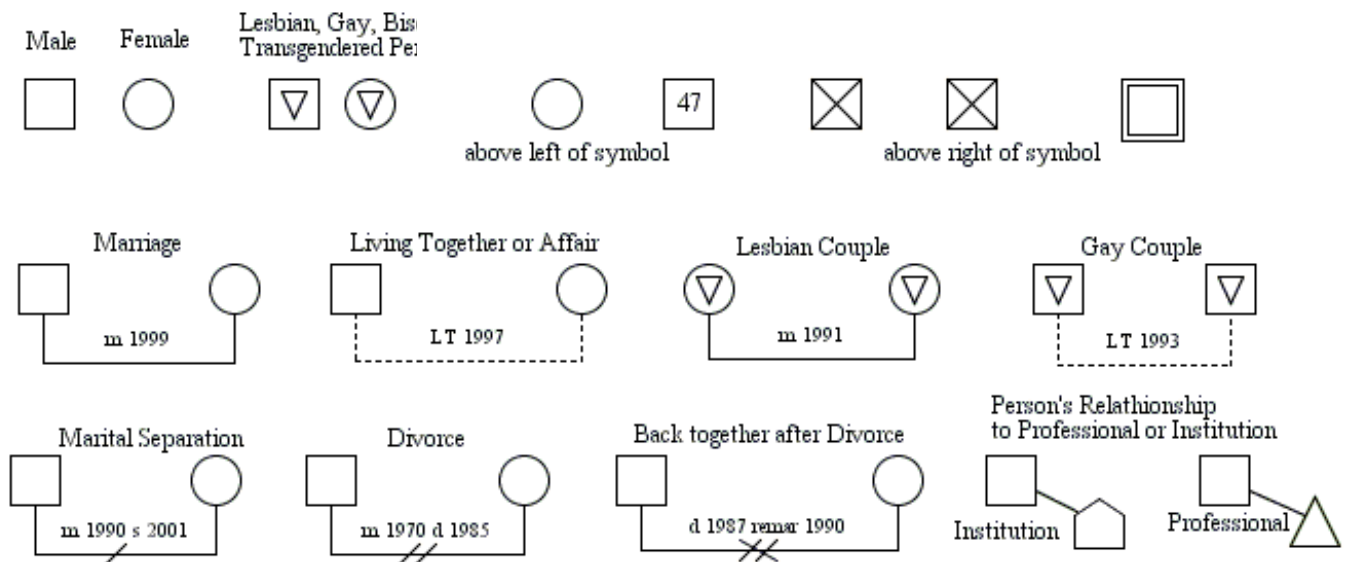
Understanding the child's view of what is happening and what they would like to change is a central part of any assessment. What is communicated should be made explicit and inform the assessment.

Genograms help us to understand the child's or young person's family. It is a visual representation of the family that displays information on the quality of relationships and patterns of behaviour amongst the family. They help to unpack family dynamics and give the practitioner a good understanding of people in the child or young persons' life.

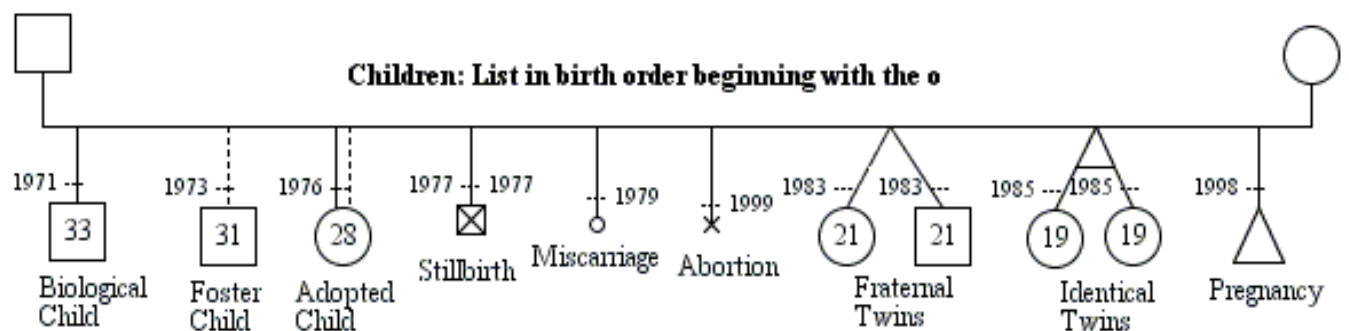
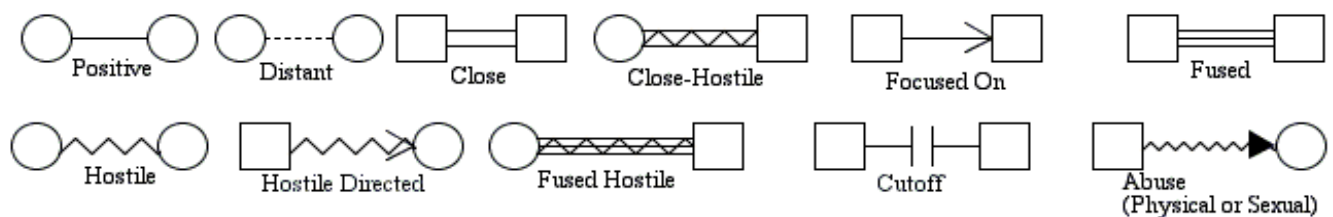
- Start with the oldest child, work from left to right, highlight the key child
- Go back at least three generations
- Include a key
- Use colour
- Add as much detail as is relevant – age, heritage, diagnoses, etc.
- Group households together
- Include anyone including pets if important to the children



Standard Genogram Symbols



Symbols Denoting Interactional Patterns between People



- The child's voice is a phrase used to describe the genuine involvement of children and young people.
- It means more than seeking their views, which could just mean the child saying what they want, rather than being really involved in what happens and decision making.
- Lord Laming said of Victoria Climbié that no-one could describe a day in her life.
- Allowing the "voice of the child" to be heard is more difficult than it initially appears... Some of these children are not readily able to "raise their voice" or share their feelings
- Every child, whatever their age or ability, is capable of self-expression. Children's imaginations, ideas, opinions, feelings, needs and worries can be expressed in so many different ways – through words for those able to talk or sign, as well as physical movements and body language, non-verbal sounds, or creative expression like play, dance, music and art. Children's voices must be heard, listened to and understood.
- Children and young people should have the opportunity to describe things from their point of view. They should be continually involved, and have information fed back to them in a way that they can understand. There should always be evidence that their voice has influenced the decisions that professionals have made.
- Ask yourself: Do I see the child as an active partner who can usefully add to what is being set up, or do I see them as a passive victim who needs to be saved? The answer may not be at either extreme, but the more you see the child as a passive victim, the less they will be able to influence events.

Tools to explain the assessment process

Three Houses

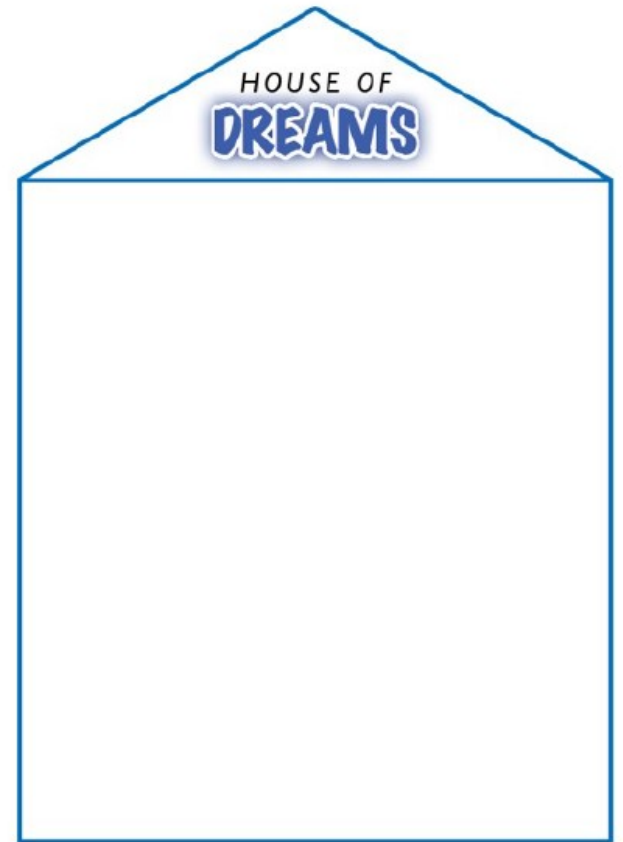
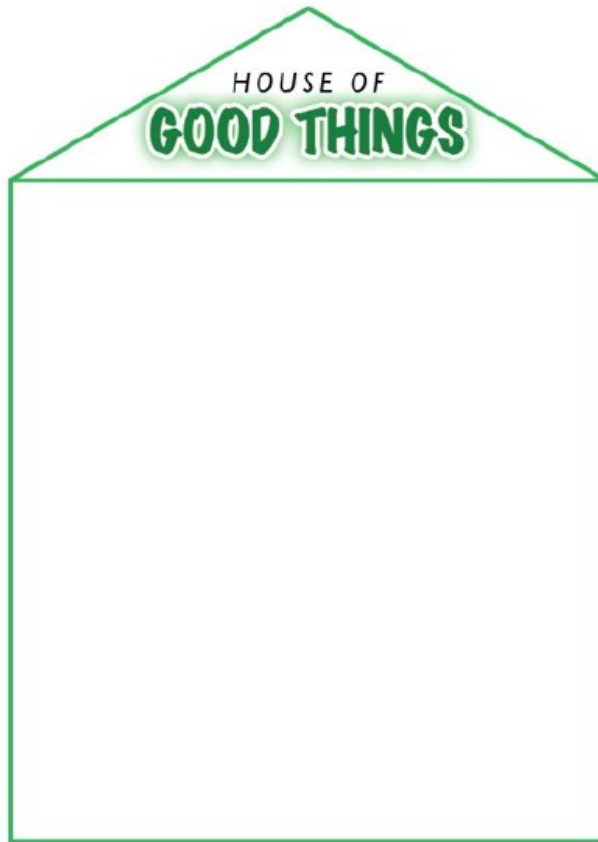
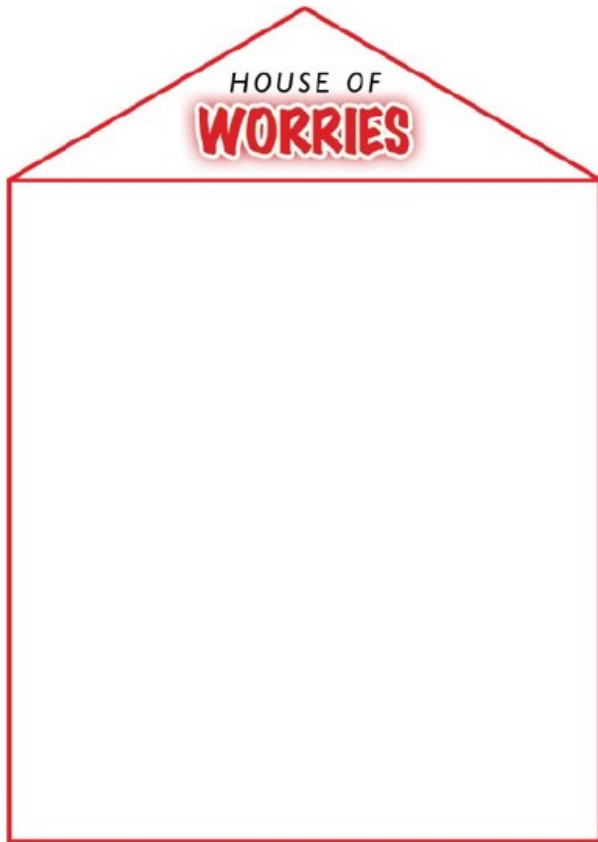
What is it?

The tool is designed to help children think about and discuss risks, strengths, hopes and dreams. They mirror a risk assessment tool from the signs of safety approach (Turnell 2012) which asks professionals and adult family members to think about 'what is going well', 'what are we concerned about' and 'what needs to happen'. It was developed by Niki Weld/Maggie Greening in Australia.

What do I need?

You need three large pieces of paper, one for each house, and pens, crayons or pencils (see template below).

1. Preparation: in preparing to do the 'Three Houses' with a child or young person, it can be helpful to find out as much background information as you can. At a minimum, you will need sheets of paper (preferably one for each house, as well as some spares) and some coloured pencils, crayons or pens. Choosing a venue where the child is likely to feel most comfortable is important, particularly for your first meeting.
2. Inform parents and obtain permission to interview child/ren or young person. Sometimes, in child protection, the worker has to interview the child/ren or young person without advising or seeking the permission of the parents or primary caregivers. Wherever possible, the parents should be advised/asked in advance and showing the 'Three Houses' tool to the parents can help them to understand what the worker will be doing.
3. Decide whether to work with child or young person with/without parents present. Again, sometimes in child protection workers need to insist that they speak with the children without a parent or caregiver present. Wherever possible it is good to make this a matter of choice for the parents and the child, but when this isn't possible, all efforts should be made to provide an explanation to the parents as to why the worker feels it is necessary to speak to the child on their own.
4. Explain and work through the 3 houses with the child or young person using one sheet of paper per house. Use words and drawings as appropriate and anything else you can think of to engage the child in the process. They can change the houses, use their favourite toys (dinosaurs/unicorns/fairies/rockets), Lego houses, picture cut outs etc. Give the child the choice where to start. Often start with 'house of good things' particularly where the child is anxious or uncertain.
5. Explain to and involve the child or young person in what will happen next. Once the 'Three Houses' interview is finished, it is important to explain to the child or young person what will happen next and obtain their permission to show the 'Three Houses' to others, whether they are their parents, extended family, or professionals. Usually children and young people are happy for others to be shown their 'Three Houses' assessment of their situation, but for some children there will be concerns and safety issues that must be addressed before proceeding with presenting what they have described to others.
6. Present to parents/caregivers usually beginning with the 'House of Good things. Before showing the child's 'Three Houses', it can be useful to ask the parents/caregivers: "What do you think the child would say is good/worried about/dreams of?"





House of good things

I don't get shouted at
when I am with dad.
I like living with daddy
because I get lots of hugs.
When I'm with daddy I can
play with my toys.



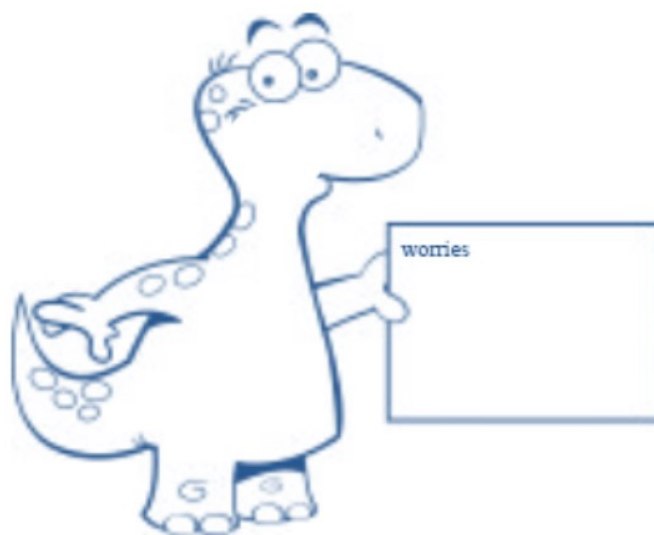
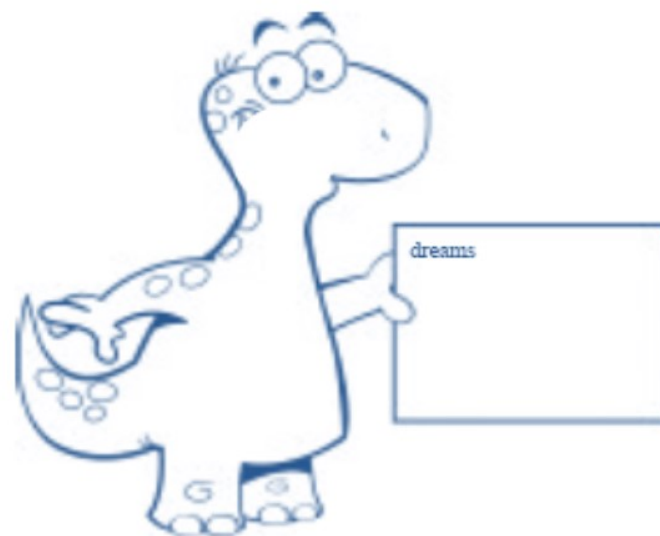
House of worries

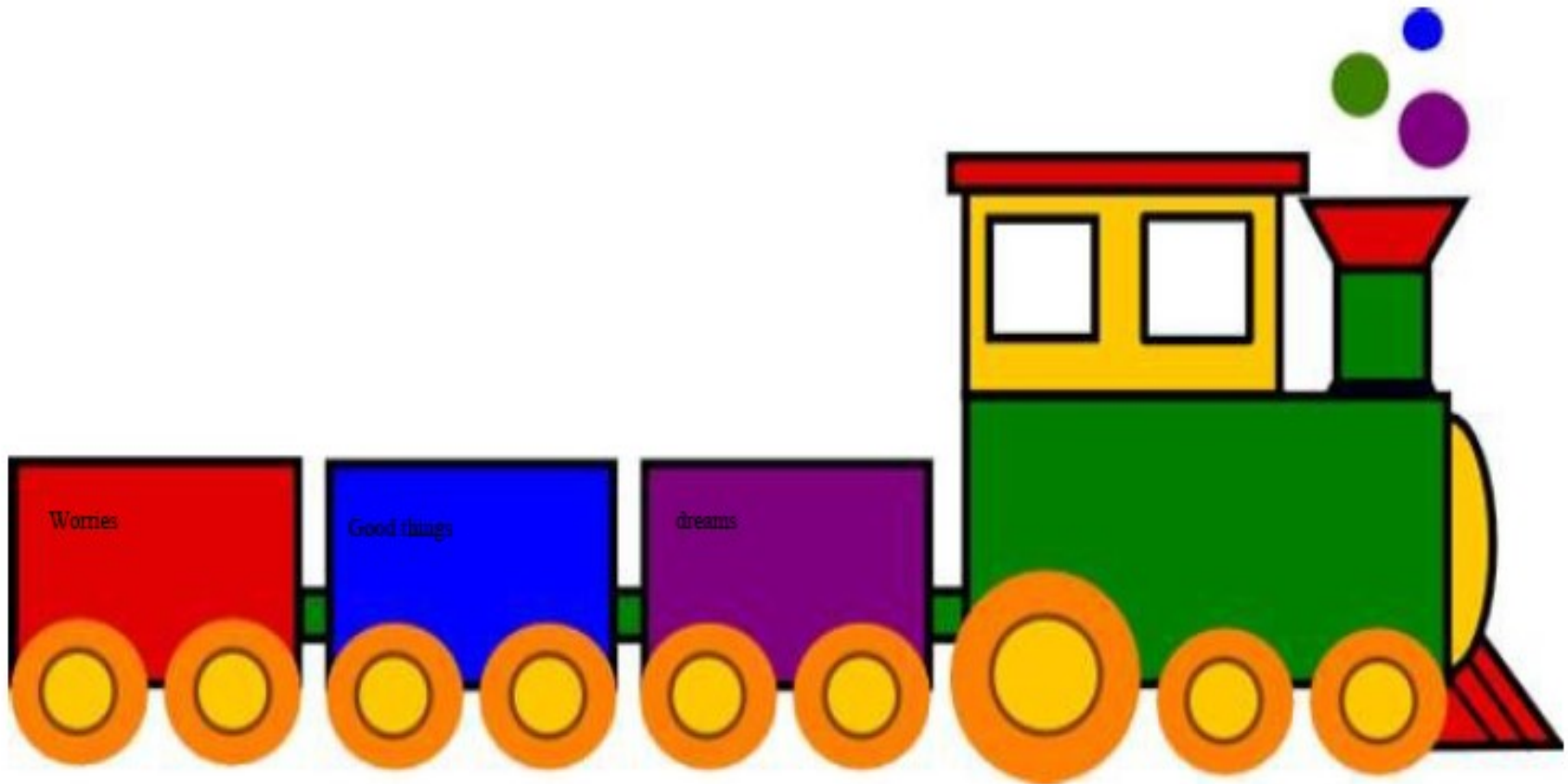
I was not happy at my
mam's house because she
shouted at me a lot.
Mam locked all of my toys
away and I didn't get all of
my Christmas presents
they were put in mam's
wardrobe.



House of wishes

My wish has come true.
I'm living with my daddy
and brothers.
I wish we had a big house
so we had our own room
and didn't have to share
our beds.





The Wizard and Fairy Tool:

Vania Da Paz, a Senior Practice Development Officer working in the Western Australian Department for Child Protection, was involved in the 1996 Signs of Safety six-month development project. Vania has always been determined to "Find ways to involve children and young people in her child protection practice and following the initial training in Signs of Safety she developed a very similar tool that serves the same purpose as the Three Houses tool but with different graphic representation. Rather than Three Houses, Da Paz explores the same three questions using a drawing of a fairy with a magic wand or a Wizard. The method often breaks the ice for preschool and early primary school aged children since young children engage quickly with the picture of the wizard or fairy. The worker can present the child with a pre-drawn outline or begin with a blank page and draw the wizard or fairy from scratch asking the child to help depending on what best suits the situation. Da Paz uses the Fairy's/Wizard's clothes to explore and write down, together with the child, the problems/worries from the child's perspective. The Fairy's wings and the Wizard's cape represent the good things or what's working well in the child's life, since the wings enable the Fairy to 'fly away' or 'escape' her problems; and the cape 'protects' the young Wizard and 'makes his problems invisible for a little while'. In the star of the Fairy's wand, and in the spell bubble at the end of the Wizard's wand, the worker and the child record the child's wishes, vision of their life, and the way they would want it to be and explores hopes for the future.







There are six areas in our lives where we can promote resilience: feeling secure, friendships, talents and interests, education, emotions and behaviours and health. If a person is having significant difficulty in one or more of these areas it can make it more difficult for them to manage during tough times. The good news is that there are many things that can be done to strengthen these areas too, increasing a person's ability to 'bounce back' during difficult times. These tools have been tried and tested by the school and community workforces and have proven to be a successful and effective way of talking to young people about their all-round wellbeing and plan changes and improvements with young people to promote and increase their resilience.

Resilience Conversation Tool

The Resilience Conversation Tool has been designed for use to enable a more in-depth conversation. Using the wheel diagram, young people will consider the areas of resilience, with consideration for themselves, their family, significant others and the wider community.

Although it is welcomed that within the wheel these areas are RAG (red, amber, green) rated, young people have said that for this tool to be something they can reflect on, it is encouraged that notes from the conversation are added to the wheel.

This tool can be used as part of the initial meeting with a young person. It will aid you in getting to know the young person, and as it provides focus, the young person may feel more open to discussion, and can pull out the areas that they feel confident about.

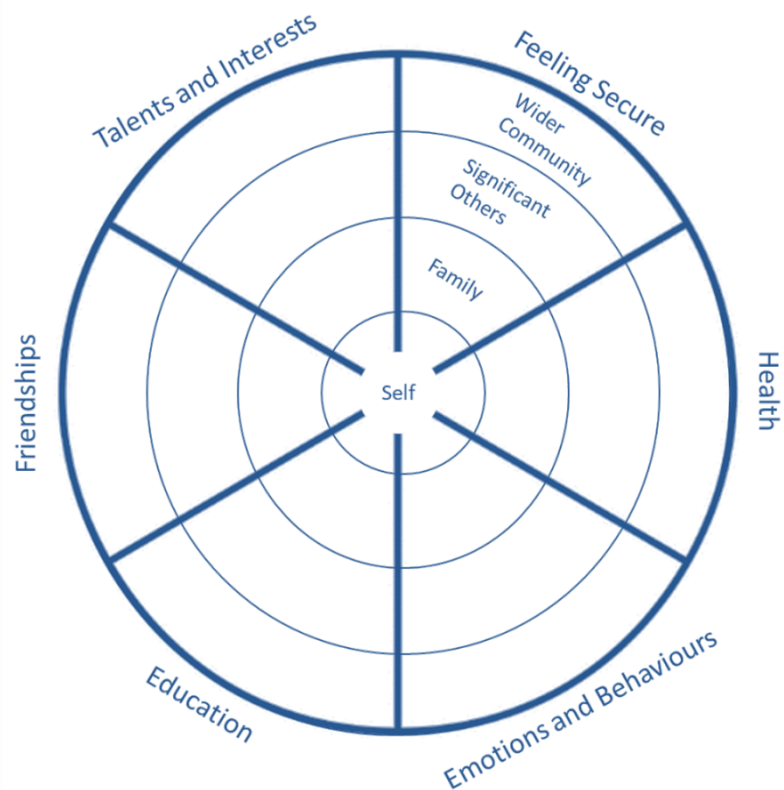
Here are some tips on getting started when having a Resilience Conversation with a young person:

- The Resilience Conversation is a tool to help you have confident and strength focussed conversations with young people. If you have the option of choosing when to have a conversation with a young person, think of who is best to have this conversation and think of your environment – use a table, for example, and think of your body language to create a calm atmosphere
- Ask the young person to read the consent box at the bottom of the page and to sign/date it if they are happy for their information to be shared

- Explain to the young person that the areas link with one another, for example, a strong friendship (green) with a friend from school may help a young person improve their talents and interests (red or amber) by getting them to go along to a school club. Here the young person will be using a strong part to boost a weaker part
- If needed, model one of the parts yourself as an example. The young person may be confused at first but don't panic!
- Give the young person 3-4 minutes to RAG rate their areas using three coloured pens. This must be their own views and not others. If you don't have red, amber and green pens the young person could write the letters on instead, e.g. R, A and G
- They now have an accessible, visual representation of their own resilience
- Focus on the greens first. Ask them what is going well in their lives? Ask them why they put green for those areas
- Allow the conversation to flow. The young person should lead the conversation, but you may need to prompt with further questions. Don't overthink the conversation – you are likely to be having these sorts of conversations on a regular basis but maybe not covering all the parts and in this detail
- Gradually move on to amber and reds – ask the young person why they chose that colour. This may happen organically, or you may need to ask further questions
- Ask what would make a 'red' better? – This will become an action to be written in the table on the conversation sheet. There may be just one action for one part or the young person may want more actions to be written down, this is personal to them. It is not necessary to have an action for each part

If appropriate, you may suggest the young person visits the school or community safe space/s, see a peer mentor, try online counselling, or access one of the other HeadStart services, e.g. volunteer mentor, intensive mentor, talents and interests grant, family

First Name:	Surname:	DOB:	Date of conversation:
Name of worker having conversation:	Organisation:	Young person's school:	



Area of Resilience	Action
Feeling Secure - <i>How secure you feel in yourself, in physical places, and with those around you.</i>	
Health - <i>Your wellbeing and physical health and of those around you.</i>	
Emotions and Behaviours - <i>Having the skills to manage your emotions and behaviours as well as feeling positive about the future.</i>	
Education - <i>Your learning, trying new things, and the support from others to help with these.</i>	
Friendships - <i>The importance of having friends, positive peers, and being a good friend.</i>	
Talents and Interests - <i>Being able to access activities you enjoy, are good at, or want to do.</i>	



Signs of Safety Assessment and Planning form

What are we worried about?	What's working well?	What needs to happen?
<p>Past harm to Children Action/Behaviour – who, what, where, when; Severity, Incidence & Impact</p> <p>Complicating Factors Factors which make the situation more different to resolve.</p> <p>Danger Statements: Future Danger for Children Worries for the future if nothing changes</p>	<p>Existing Strengths</p> <p>Existing Safety/Protection The Strengths demonstrated as protection over time</p>	<p>Safety Goals: Future Safety/Protection What must the caregivers be doing in their care of the child that addresses the future danger?</p> <p>Family Goals What does the family want generally and in relation to safety?</p> <p>Next Steps What are the next steps to be taken to move towards achieving the goal?</p>
<p><i>(Scaling 0-10 number on the continuum)</i></p>		

Scaling

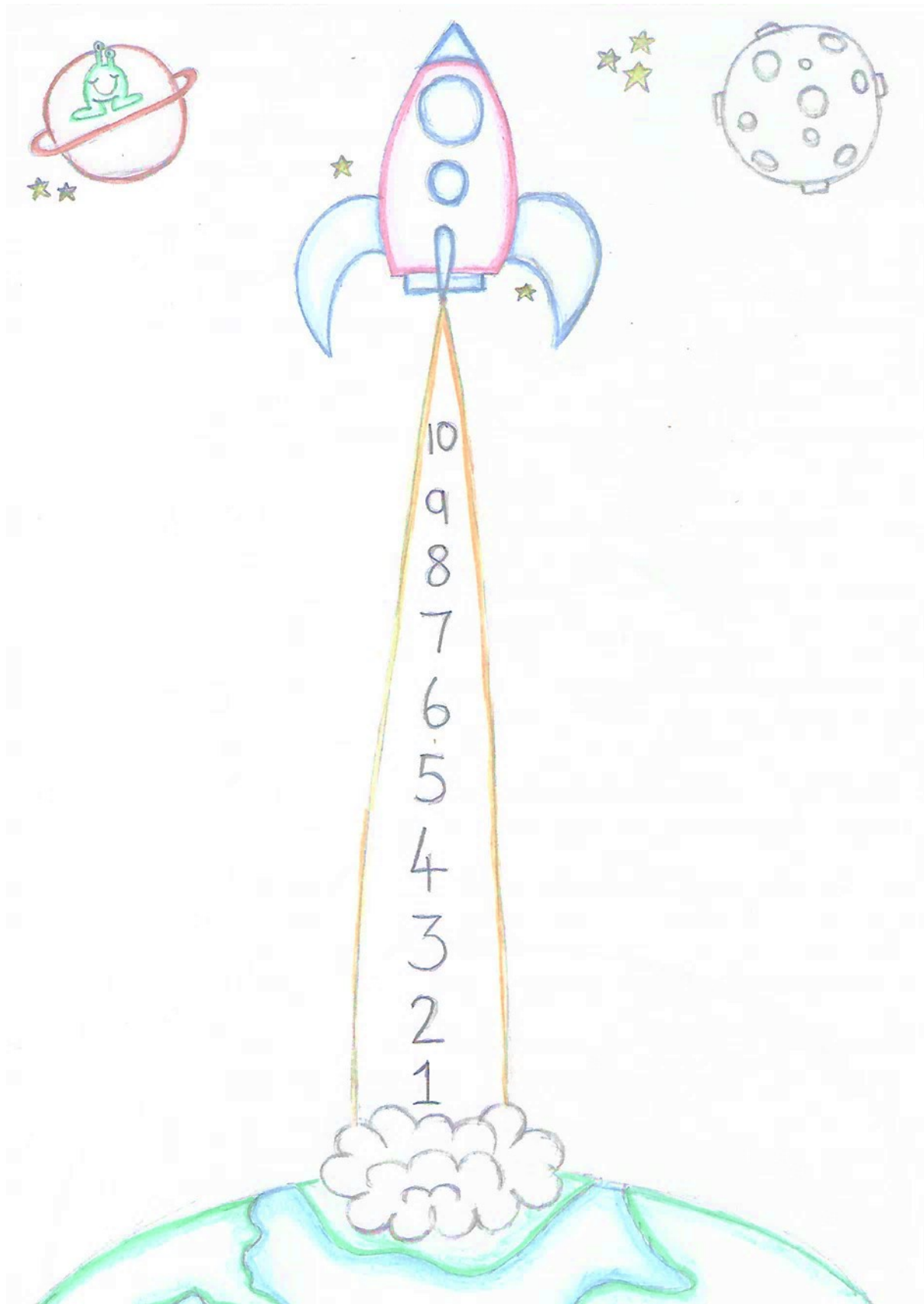
What is it?

Scaling is used in Signs of Safety, solution focused and motivational interviewing approaches. Most commonly used in the context of assessments, 0-10 scales are used to measure how worried the child, family and professionals are about a variety of aspects of a situation. Scaling questions can be particularly useful when thinking about how improvements will be measured in the planning process.

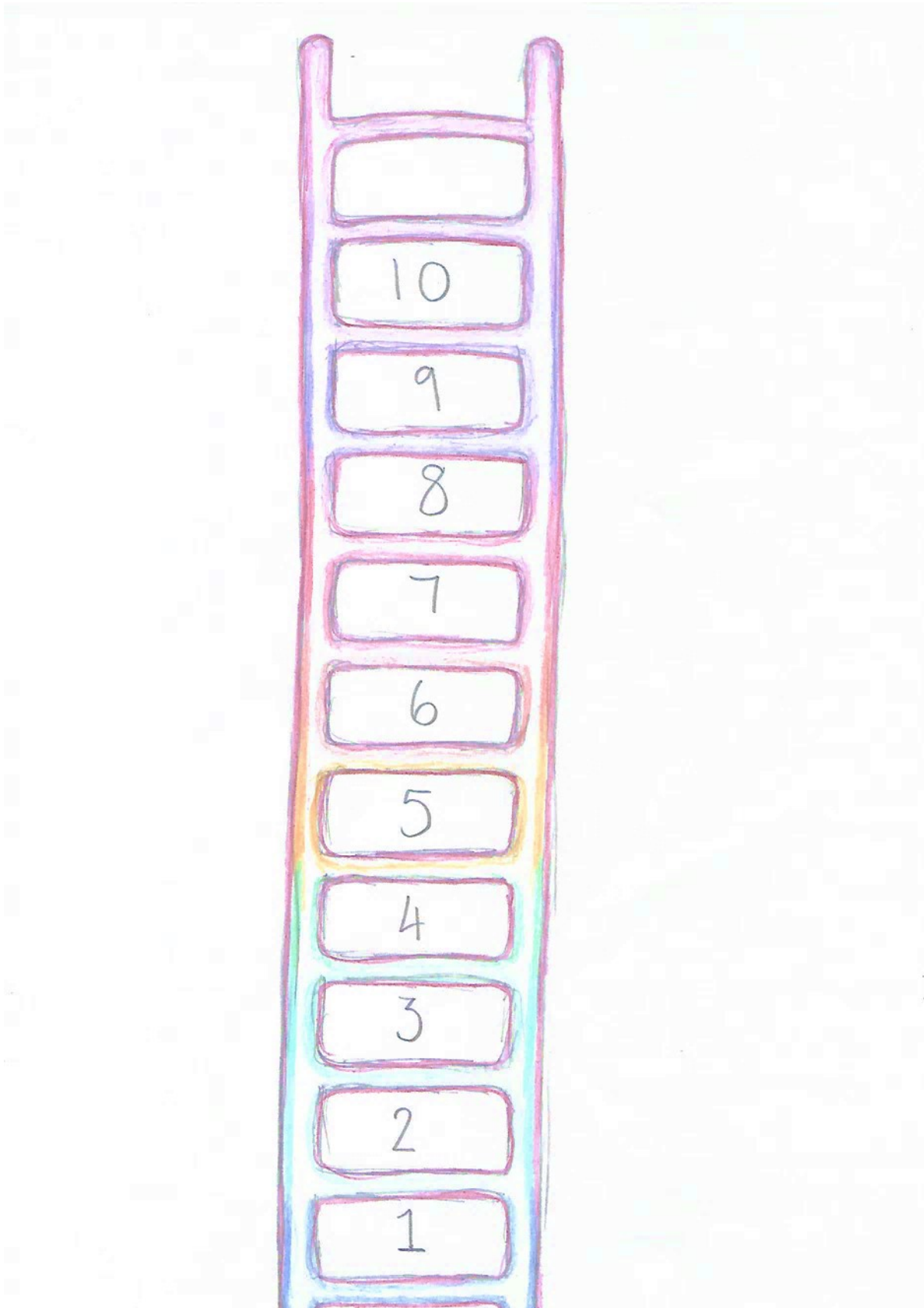
- Scaling is used to make a judgement about the impact of a situation on a child/young person.
- The scale goes from 0 – 10
- When scaling, make sure you define what 0 and 10 mean, and always present 10 (what we are working towards) first.
- The scale would usually be based on the Danger/Worry Statement at 0 and Safety/Wellbeing Goal at 10.



Scaling Rocket Tool



Scaling Ladder Tool



Worry Statements

What is a Worry Statement?

Worry Statement(s) give the reasons we are working with the family in **clear, simple language**.

They include what we are worried could happen if nothing changes and the impact of this on the child/young person.

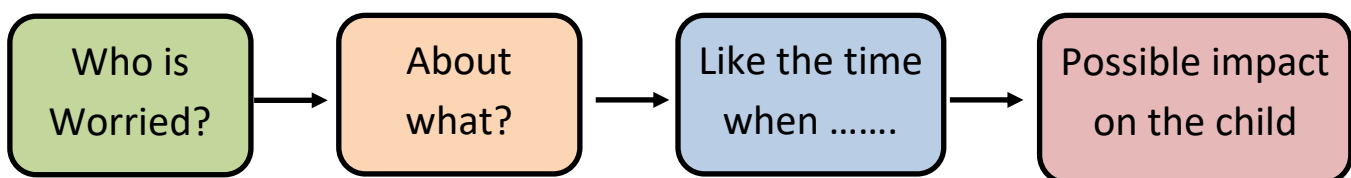
How to write a Worry Statement:

There should be one Worry Statement for each issue. Try not to have any more than three.

1. Start with **who is worried**
2. Then say **what we are worried about** – describe what has happened in the past that has caused us to be worried, be specific and factual 'like the time when...; give examples. Try not to use professional language like 'domestic violence; or 'neglect' – say what the behaviour is.
3. Then describe the potential **impact on the child/young person** in the short and long term if nothing changes.

Worry Statement Formula

Sonia the children's centre worker, Rebecca the health visitor and Grandma Phyllis are worried that without support the family will struggle to manage Callum's behaviour and may hit him, like the time when mum smacked his leg when she dropped him off at nursery. If this happens again Callum may become sad and frightened of his mum and even get hurt. He may also repeat this behaviour and hurt others which will mean that children will not want to be friends with him, and he will grow up feeling lonely and that he is not loveable.



Wellbeing Statements

What is a Wellbeing Goal?

Wellbeing Goals are the mirror image of worry statements.

They are **what we need to see the parents/carers doing differently with their children so everyone will know the children are safe and their needs are being met?** It shows everyone what we are working together to achieve.

How to write a Wellbeing Goal:

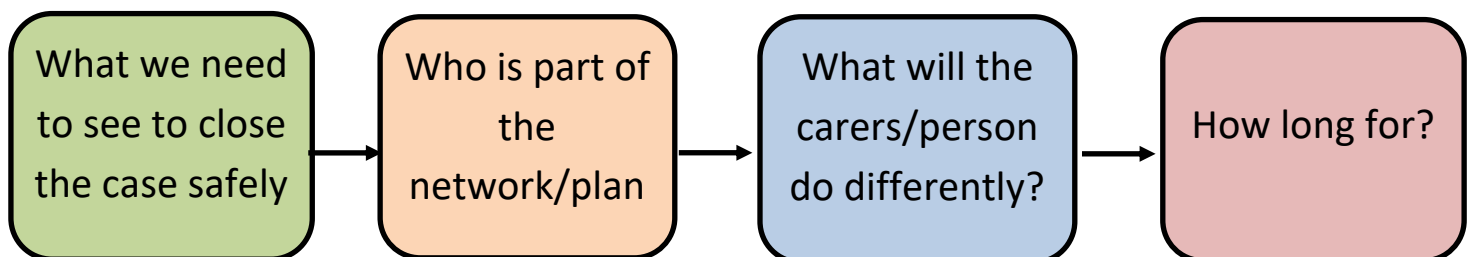
There should be one Wellbeing Goal for each Worry Statement.

1. Start with 'For us to close the case we need to see...'
2. Explain who in the **family network** will be part of the support plan to build resilience and sustain changes.
3. Describe the behavioural changes that we need to see in order to feel the worry has been addressed.
4. Say how long you will need to see the plan working or **how long you need to see the changes being maintained** to be satisfied that this will continue in the long term.

Wellbeing Statement Formula

Wellbeing Goal:

For us to close the case we need to see Mum and Dad supported by Grandma Phyllis all using the same ways of managing Callum's behaviour that doesn't involve hitting, so the home feels calmer and Callum feels safe and loved by all his family and have the opportunity to have positive friendships. We would want to see this happening for 4 weeks.



Re-framing

These are just suggestions on how you can turn a perceived “negative” into a “positive reframe.” Keep in mind, looking at life through a positive reframe doesn’t mean you ignore the stress, pain, and suffering in life, but it does help you deal with these problems more efficiently by seeing them in a different light.

Negative	Positive re-framing
Argumentative	Truth Seeking
Bossy	Good director/natural leader
Clingy	Affectionate
Compulsive	Efficient/attention to detail
Conceited	Confident
Crabby	Communicates needs
Dawdles	Easy Going
Defiant	Strong beliefs/courageous
Demanding	Connected
Doodles	Creative
Dramatic	Emotionally aware/expressive
Fearful	Thoughtful/careful
Foolish	Fun loving
Fussy	Specific tastes/strong sense of self
Impulsive	Spontaneous
Loud	Exuberant/confident
Manipulative	Gets own needs met
Messy	Open minded/easy going
Mouthy	Expressive/has strong views and opinions
Naughty	Independent/explores boundaries
Nosey	Curious/reflective
Quiet	Thoughtful/reflective
Rigid	Organised/knows what they want
Shy	Introspective/respectful of boundaries
Silly	Good sense of humour
Stubborn	Determined/persistent
Talkative	Good communicator/expressive
Wants attention	Speaks out needs.

Ecological Perspective

Bronfenbrenner's structure of environment:

The **microsystem** – this is the layer closest to the child and contains the structures with which the child has direct contact. The microsystem encompasses the relationships and interactions a child has with her immediate surroundings (Berk, 2000). Structures in the microsystem include family, school, neighbourhood, or childcare environments. At this level, relationships have impact in two directions both away from the child and toward the child. For example, a child's parents may affect his beliefs and behaviour however, the child also affects the behaviour and beliefs of the parent. Bronfenbrenner calls these bi-directional influences, and he shows how they occur among all levels of environment. The interaction of structures within a layer and interactions of structures between layers is key to this theory. At the microsystem level, bi-directional influences are strongest and have the greatest impact on the child. However, interactions at outer levels can still impact the inner structures.

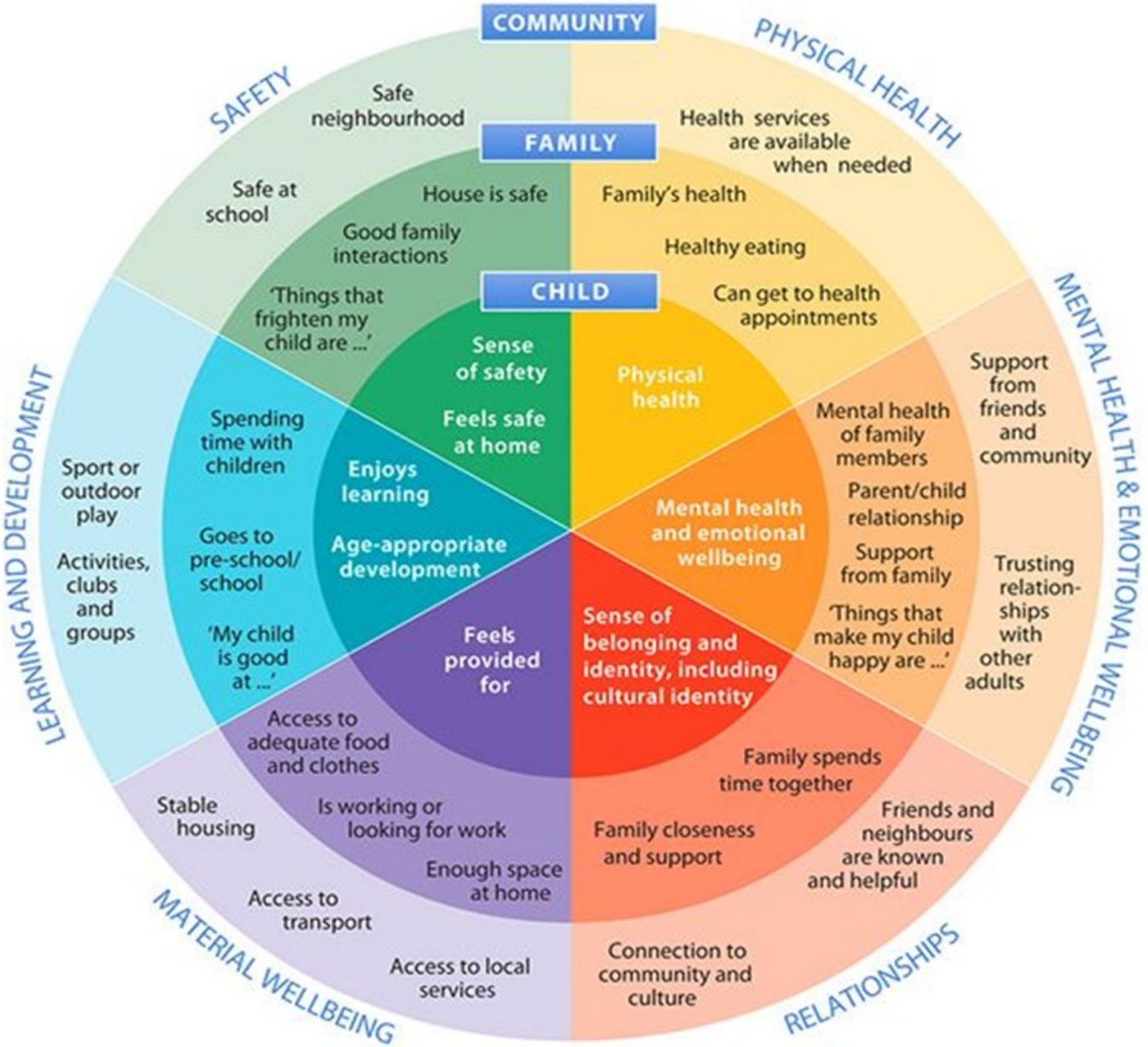
The mesosystem – this layer provides the connection between the structures of the child or young person's microsystem (Berk, 2000). Examples: the connection between the child's teacher and their parents, between his church and his neighbourhood, etc.

The ecosystem – this layer defines the larger social system in which the child does not function directly. The structures in this layer impact the child or young person's development by interacting with some structure in their microsystem (Berk, 2000). Parent workplace schedules or community-based family resources are examples. The child may not be directly involved at this level, but he does feel the positive or negative force involved with the interaction with his own system.

The macrosystem – this layer may be considered the outermost layer in the child's environment. While not being a specific framework, this layer is comprised of cultural values, customs, and laws (Berk, 2000). The effects of larger principles defined by the macrosystem have a cascading influence throughout the interactions of all other layers. For example, if it is the belief of the culture that parents should be solely responsible for raising their children, that culture is less likely to provide resources to help parents. This, in turn, affects the structures in which the parent's function. The parents' ability or inability to carry out that responsibility toward their child within the context of the child's microsystem is likewise affected.

The chronosystem – this system encompasses the dimension of time as it relates to a child's environments. Elements within this system can be either external, such as the timing of a parent's death, or internal, such as the physiological changes that occur with the aging of a child. As children get older, they may react differently to environmental changes and may be more able to determine more how that change will influence them.

Ecological Perspective



Professional Curiosity

Professional curiosity is the capacity and communication skill to explore and understand what is happening within a family rather than making assumptions or accepting things at face value.

This has been described as the need for practitioners to practice 'respectful uncertainty' – applying critical evaluation to any information they receive and maintaining an open mind. In safeguarding the term 'safe uncertainty' is used to describe an approach which is focused on safety but that takes into account changing information, different perspectives and acknowledges that certainty may not be achievable.

Professional curiosity can require practitioners to think 'outside the box', beyond their usual professional role, and consider families' circumstances holistically.

Professional curiosity or respectful uncertainty is needed when working with families who are displaying disguised compliance. Disguised compliance involves parents or carers giving the appearance of co-operating with agencies to avoid raising suspicions and allay concerns.

Professional curiosity is a combination of looking, listening, asking direct questions, checking out and reflecting on information received. It means not taking a single source of information and accepting it at face value.'

'Think the unthinkable'

'Dig deeper'

'Respectful uncertainty'

'Do not make assumptions'

'Do not accept things at face value'

'Be open to the unexpected'

'Be curious'

Questions to ask yourself when assessing....

What is life like for the child?

Who is their main carer?

Who visits the home?

What is the impact of parental behaviour on the child?

Have the child or young person been spoken to alone?

Questions to ask young people....

Who wakes you up in the morning?

Who is in the house when you wake up?

What do you like to eat for breakfast?

How do you get to school?

Who are your friends?

What do you like to do when you are not at home?

What are your worries about life at home / school?

What are you good at?

What do you enjoy doing?

Eco Map

An Ecomap is a diagram often used by frontline practitioners to show the social and personal relationships of an individual with his or her environment. Ecomaps were developed from a strengths-based and client-centred perspective and they help the formation of a relationship in which the child, young person or family and the practitioner work together toward client self-determination and empowerment.

In initial sessions, practitioners should focus on listening and learning about the client's important life events, key relationships, resources, and needs. Using the Ecomap as a visual tool to engage and elicit information is one way that frontline practitioners can effectively build relationships at the early stages of an intervention. They can be an excellent visual map of a family's connections to the external world and provide a useful tool for assessment of family, social and community relationships and highlight the quality of these connections.

Eco-maps can be particularly useful in working with migrant and refugee families to get a detailed picture of their social and family relationships and/or to map areas of isolation or disconnection that may need to be addressed.

Ecomaps are essentially diagrams that place the child, young person or family at the centre, and visually display the key social and personal relationships they have with the external environment. Ecomaps help to understand the various systems with which they interact in their current lives, giving a snapshot of the client in "their dynamic ecological system."

How to Draw an Ecomap

The worker, the child, young person or family, or both, can draw an ecomap, using simple circles and lines with a key/legend.

1. The first step is to draw the child, young person or family in a large circle in the middle (or ask them to pick a toy or button or item of choice if you are using more creative methodology).
2. Next, smaller circles drawn around the individual represent each of the people, groups, institutions, and entities with which the client is in relationship. These can be family members, friends, churches, places of employment, educational institutions, etc., with the name of each entity written in the centre of the circle.
3. Finally, and perhaps most importantly, the individual and worker should discuss and draw the types of connections between the client and each of the external entities in the smaller circles. Different types of lines can be used to denote different types of connections. For example, a dashed line might represent a distant connection, while a double line represents a strong connection – any type of line can be used in the drawing, but the definition of each should be noted in the Ecomap's legend. If using toys or buttons, then note the distance that the individual places between themselves and what the toy/button represents and explore with them their meaning behind the closeness or distance.
4. Arrowheads can also be used at the end of each line to indicate the direction in which resources flow or the level of mutuality of the relationship. Arrowheads "indicate the direction of influence for each relationship." For example, a healthy relationship between mother and daughter would likely have an arrowhead on both ends, showing the reciprocity of the relationship, while one-sided relationships would have an arrowhead pointing in only one direction.



Appreciative Inquiry

WORRIES		STRENGTHS	GOALS
ELICIT First Questions	What are we worried about? What harm has happened to any child in the care of these adults? What is the danger to this child if left in care of this mother? What makes this situation more complicated?	What's working well here? What are the best attributes of this mum / dad's parenting? What would the child say are the best times she has with their mum / dad? When has the mum fought off the depression and been able to focus on the child?	What needs to happen? What do you need to see to be satisfied the child is safe enough we can close the case? What would the mum say would show everyone the child can come home? Where would the teenage say he wants his life to be at 18? What do you need to do to create a relationship where we can talk about difficult issues?
AMPLIFY Behavioral detail: what would you see?	When has that harm happened? How often? How bad? How did that incident affect the child? What language can we use to say that so the mum and child can easily understand? How long has this abuse been happening? Give me the first, worst and most recent examples of the abuse?	When has that good thing happened? How often? How did mum fight off the depression? How else? How does the neighbour help? How did you get her to open up? How is the parenting programme making things better for the child? What else did the dad do to make those contact visits enjoyable for his kids?	Describe the details of the behaviour you would want to see that would tell you this child is safe? How many people do you think should be involved in this safety plan? What is the father's willingness / capacity to do this? Is the plan written up in a way the child would understand? How will the mental health services involvement help make this plan work?
REFLECT Meaning	Which of the danger statements do you think the most important (or easiest) to deal with first? Which danger would worry the parents most? Of all the complicating factors, which do you think is most important to deal with?	Which of the strengths are most useful in terms of getting this problem dealt with? Which aspects of their parenting / family life would mum, and dad be most proud of?	Where do you rate the child's safety with this mother on 0 to 10 scale? Is this a plan that the parents believe in? What confidence on a 0 to 10 scale would they say they have in it keeping the child safe?
START Over	Are there any other worries that we have missed?	Are there any other good things happening in this family that we have missed?	Are there any other important things that we have missed in the plan?

Trauma Informed Practice

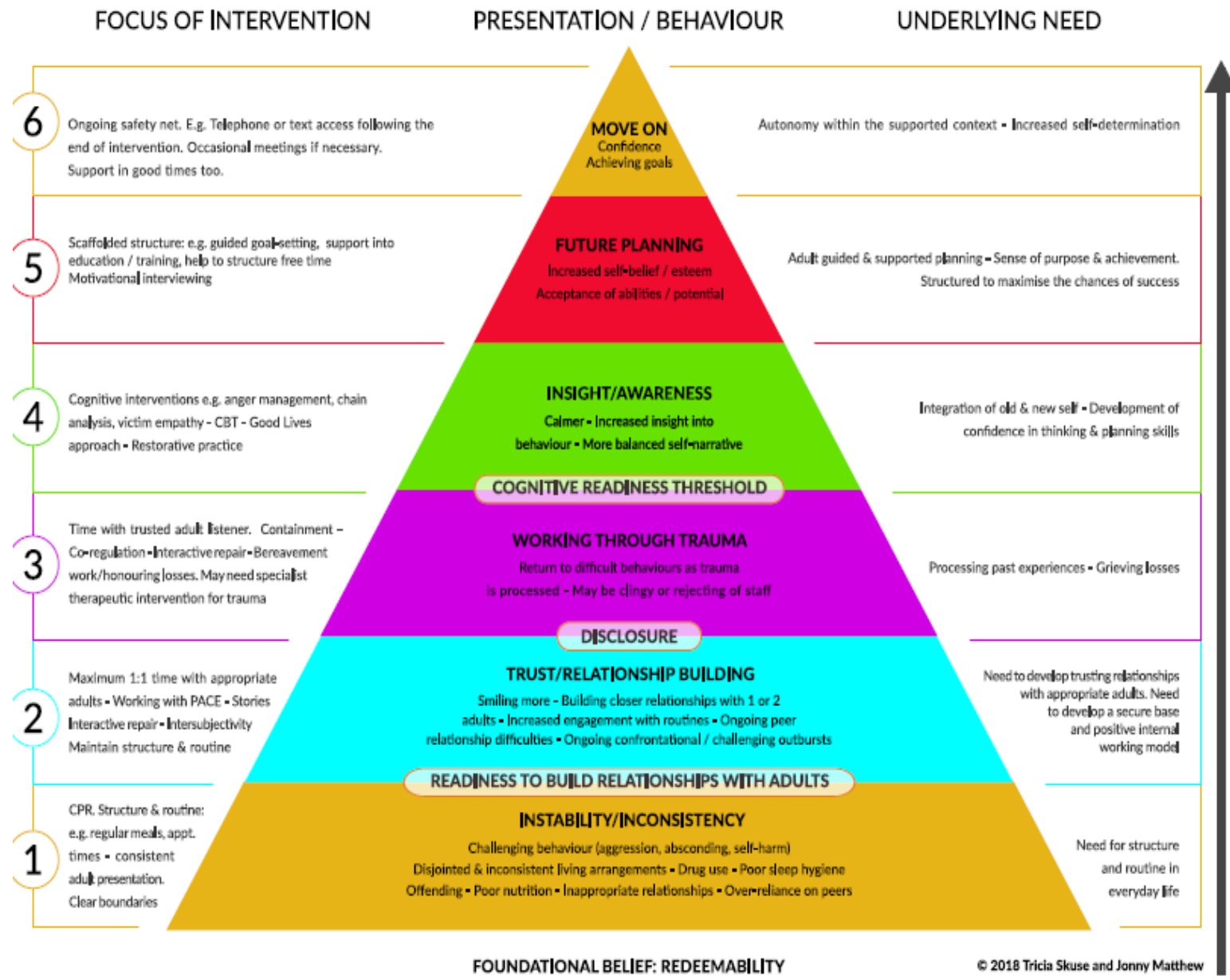
Adopting a ***trauma-informed approach*** means that we will build relationships and work collaboratively with families, recognising that they are the experts of their own lives and contexts. It also means involving extended family members, neighbours and other supporters to help build resilience and sustain change.

The concepts of *trauma-informed care* have evolved over the past 30 years from a variety of streams of thought and innovation. They are now being applied in a wide range of settings, from mental health and substance-abuse treatment providers to child welfare systems and even schools and criminal justice institutions. In the simplest terms, the concept of trauma-informed care is straightforward. If professionals were to pause and consider the role trauma and lingering traumatic stress plays in the lives of the specific client population served by an individual, professional, organisation, or an entire system, how would they behave differently? What steps would they take to avoid, or at least minimise, adding new stress or inadvertently reminding their clients of their past traumas? How can they better help their traumatized clients heal? In effect, by looking at how the entire system is organised and services are delivered through a “trauma lens,” what should be done differently? The answer can be used to guide practice, policy, procedures, and even how the physical caregiving environment is structured.

Trauma can be associated with many areas of an individual’s life and many of our clients young and older have experienced or maybe experiencing complex trauma. As a result, they may be struggling to self-regulate, process information, make and maintain relationships. Kent County Council’s Integrated Children’s Services aims to move from a deficit-based model to working with people in a strengths-based way so as not to amplify shame and guilt but to promote resilience and recovery.

The following diagram will help practitioners to consider using the Trauma Recovery Model in their practice.

Trauma Recovery Model



- **Level 1.** The first level is based on the idea of 'redeemability' i.e. young people can be supported to have better lives and better outcomes.
- **Level 2.** The second level of the model follows Maslow's hierarchy of needs which proposes that healthy psychological growth can only occur where basic physiological and safety needs have been met. As a result, the second level of the model is the need for support to focus on helping to establish structure and routine in everyday life, e.g. safe accommodation, regular meals, regular bedtimes, personal hygiene, educational routine, consistent boundaries and expectations of behaviour.
- **Level 3.** Once these basic needs are starting to be met, the model states that young people are more likely to be ready for, and open to, developing trusting relationships with appropriate adults. As a result, staff working with children, young people and families at this stage should support them to build constructive relationships.
- **Level 4.** The fourth level of the model proposes that once strong working relationships are developed, the child, young people or family member is able to start engaging with and disclosing current or historical trauma. It is not until they have successfully negotiated the first two layers of the model that they feel safe enough, perhaps for the first time, to begin to think about and articulate what has happened to them in the past. The sorts of disclosures that typically emerge include complex bereavement, abuse, neglect, maltreatment, exploitation, incest and domestic violence.' Staff need to work sensitively here and/or to refer to specialist therapeutic interventions where necessary to help the individual work through traumatic experiences and losses.
- **Level 5.** When the child, young people or family member have completed the first four stages of the model they may not be able to fully understand their current situation, their behaviour or how to address the impact or implications of their trauma. As a result, it is only at stage 5 that staff can start working with them on topics such as consequential thinking skills, empathy, and restorative approaches.
- **Level 6.** By the penultimate layer of the model the child, young people or family member should have developed an increased sense of self-belief and a greater acceptance of their abilities and potential. Nevertheless, they still require a significant amount of support in the form of guided goal setting.

Strength Based Questions - Samples

Tell me about what a good day looks like for you? What makes it a good day?

What are you most proud of in your life?

What achievements have you have made?

How did you make them happen?

Have you ever done something differently the second time around?

What inspires you?

What do you like doing? What makes this enjoyable?

What do you find comes easily to you?

What do you find you learn most easily?

What do you want to achieve in your life?

When things are going well in your life – tell me what is happening?

What are the things in your life that help you keep strong?

What do you think helps you bounce back?

What are three things that have helped you overcome obstacles?

What do you value about yourself?

What would your family and friends say you were good at?

Which of your friends in your phone contacts make you feel positive?

What are three things that are going well in your life right now?

What gives you energy?

What is the most rewarding part of your life?

If the children were to say what's going well in the family, what would they say?

If you had the opportunity what would you like to teach others?

RESTORATIVE APPROACHES

The Restorative Approaches studies how to improve and repair relationships between people and communities. The purpose is to build healthy relationships and communities, increase social capital, decrease crime and antisocial behaviour, and repair harm. Restorative practice includes education, psychology, social work, criminology, sociology, organisational development and leadership. It concentrates on repairing the harm and finding a positive way forward



Step one — unique stories

"What's happened?", "What's was going on?"



Step two — linking thoughts to feelings

"What were you thinking?", "What were you feeling inside?"



Step three — harm and affect

"Who has been affected by what has happened?", "How have they been affected?"



Step four — needs and repair

"What do you need to feel better about this?"



Step five — putting things right together

"What do you think needs to happen to put things right?",
"What could you do to put matters right?"

Finding Strengths for Families

Wake up on time!

Get up at a time that gives you enough time to get ready without having to rush out the door. If you feel like you're not getting enough rest, try going to sleep earlier!

Prepare for your day!

Think about your schedule for today. Do you have any tests? Is there something happening after school? Knowing what to expect can help your day go smoothly!

Get clean and dressed!

This includes taking care of your hygiene. Shower, brush your teeth, comb your hair, and make sure that your clothes are neat.

Eat breakfast!

Eating breakfast helps keep you energized during the day. Eat something that will keep you full until lunchtime!

Morning Chores!

Are there any chores that you are responsible for in the morning? This might include making your bed, feeding your pet, or cleaning up your room.

Pack up!

Before you leave the house, you want to make sure that you have everything packed that you'll need for school.

<u>M</u>	<u>T</u>	<u>W</u>	<u>Th</u>	<u>F</u>

Weekly Mood Chart

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
6 AM – 10 AM							
10 AM – 2 PM							
2 PM – 6 PM							
6 PM – 10 PM							
10 PM – 2 AM							
2 AM – 6 AM							

Emotion Chart

5	 <p>Angry</p> <p>I've lost control. I'm not listening Anymore. I could hit, kick or bite. I need a quiet place to calm down.</p>	
4	 <p>Overwhelmed</p> <p>Everything is too hard. I'm losing control and need to leave the environment I'm in. Give me space</p>	
3	 <p>Frustrated</p> <p>I'm not getting it, I'm showing signs of stress I should take a break now.</p>	
2	 <p>Anxious</p> <p>Trying to stay focused, but having a hard time staying on task Use calming strategies now</p>	
1	 <p>Happy</p> <p>Ready and willing to Work</p>	

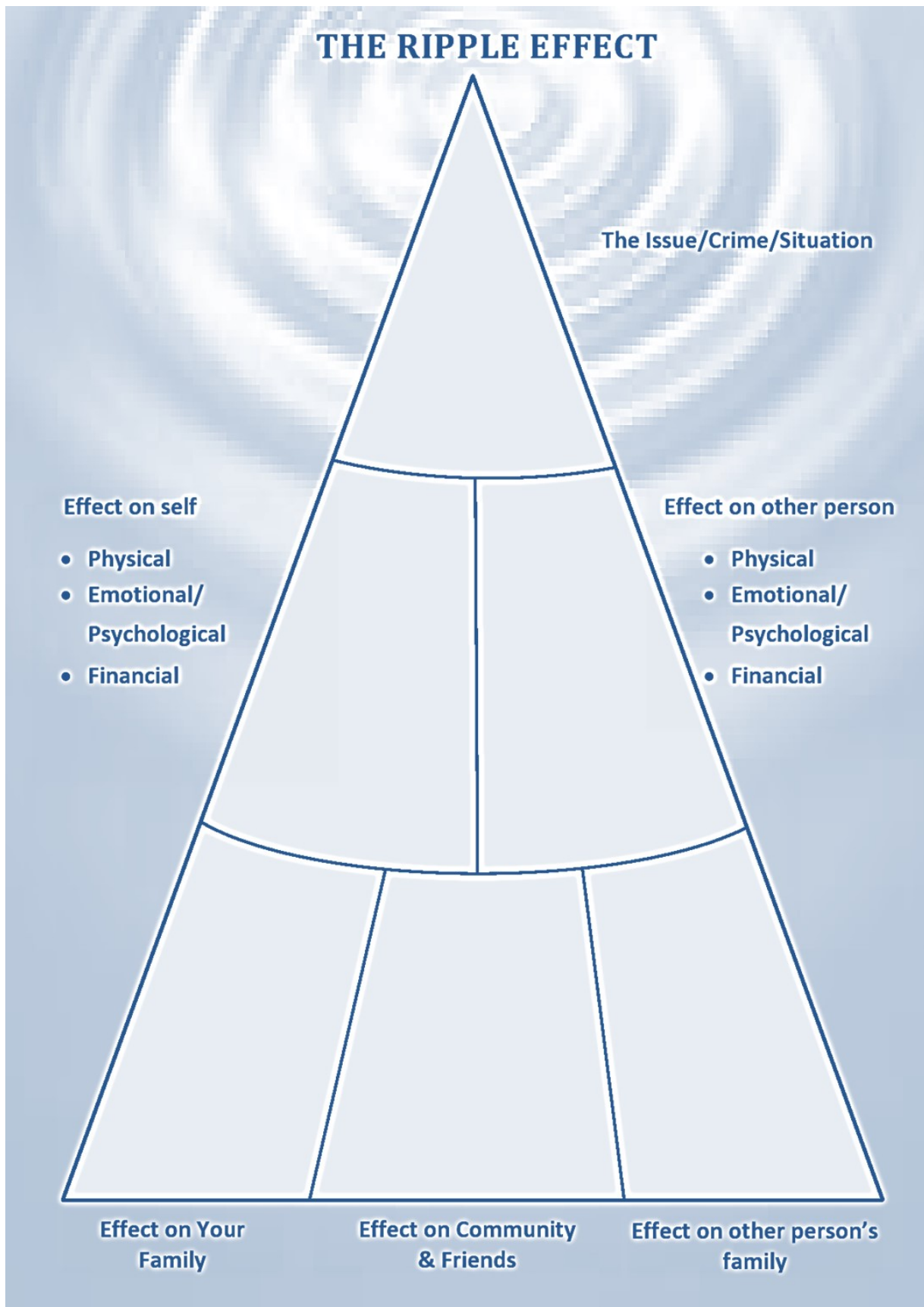
The Ripple Effect

This activity is a great way of ensuring you and the young person or family member get the whole picture to an event. It makes it very clear to see everyone who is affected by a young person's behaviour and the impact on them physically, emotionally, psychologically and financially. Practitioners can even create a life size chart on the ground with some chalk and get the individual to actually stand in each segment and speak as if they are the people in question.

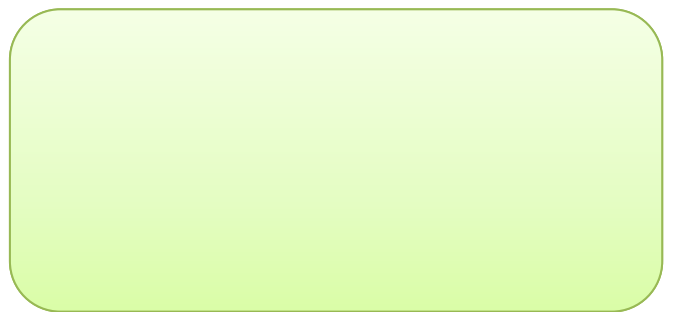
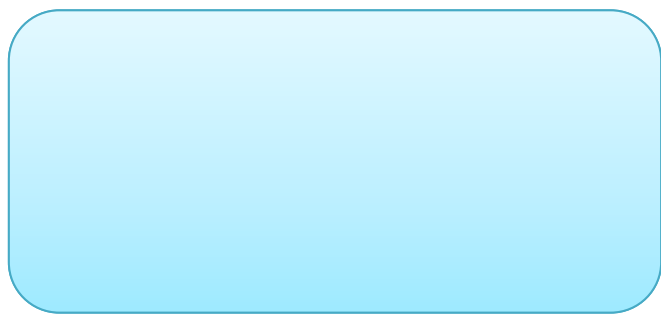
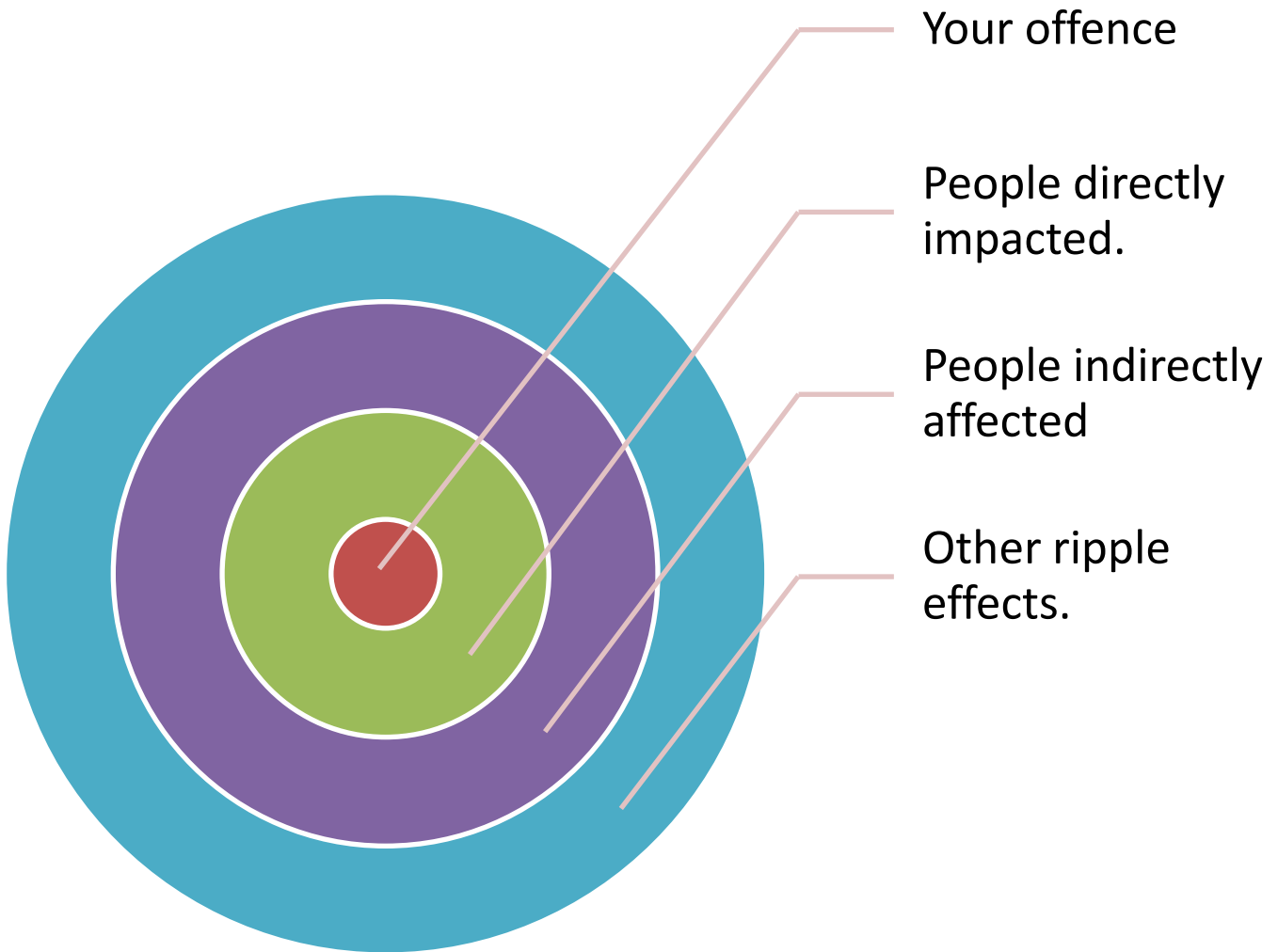
For some, thinking of the impact of their behaviour on themselves and others is phenomenally difficult as they do deep down have a profound sense of shame. They may be desperately trying to avoid facing this because they would like to continue with their negative behaviour and they know acknowledging the effects on others will force them to change, and they really don't want to. Or it might just be that they are afraid of the emotional floodgates opening and the thought of that is too dreadful and damaging to their hard-boy or girl image.

In these cases, it can often be useful to look at third-person scenarios and victims first, to ease them into this way of thinking. This is a great method to use for to engaging teenager as it is far less intimidating and stressful than placing them in the spotlight from the start. Trust can be built, and this can encourage self-reflection. To do this, choose some stories from popular soaps, movies or even news items and complete the ripple effect chart for those scenarios. For example, the BBC 'Our Crimes' series has a wealth of material for exploration in relation to youth crime. Primarily focusing on how teenagers have recorded their crimes and then used social media to share their exploits, it also explores the effect of these crimes on the victims. The series has covered material such as robbery, rioting, car crime and violent crime.

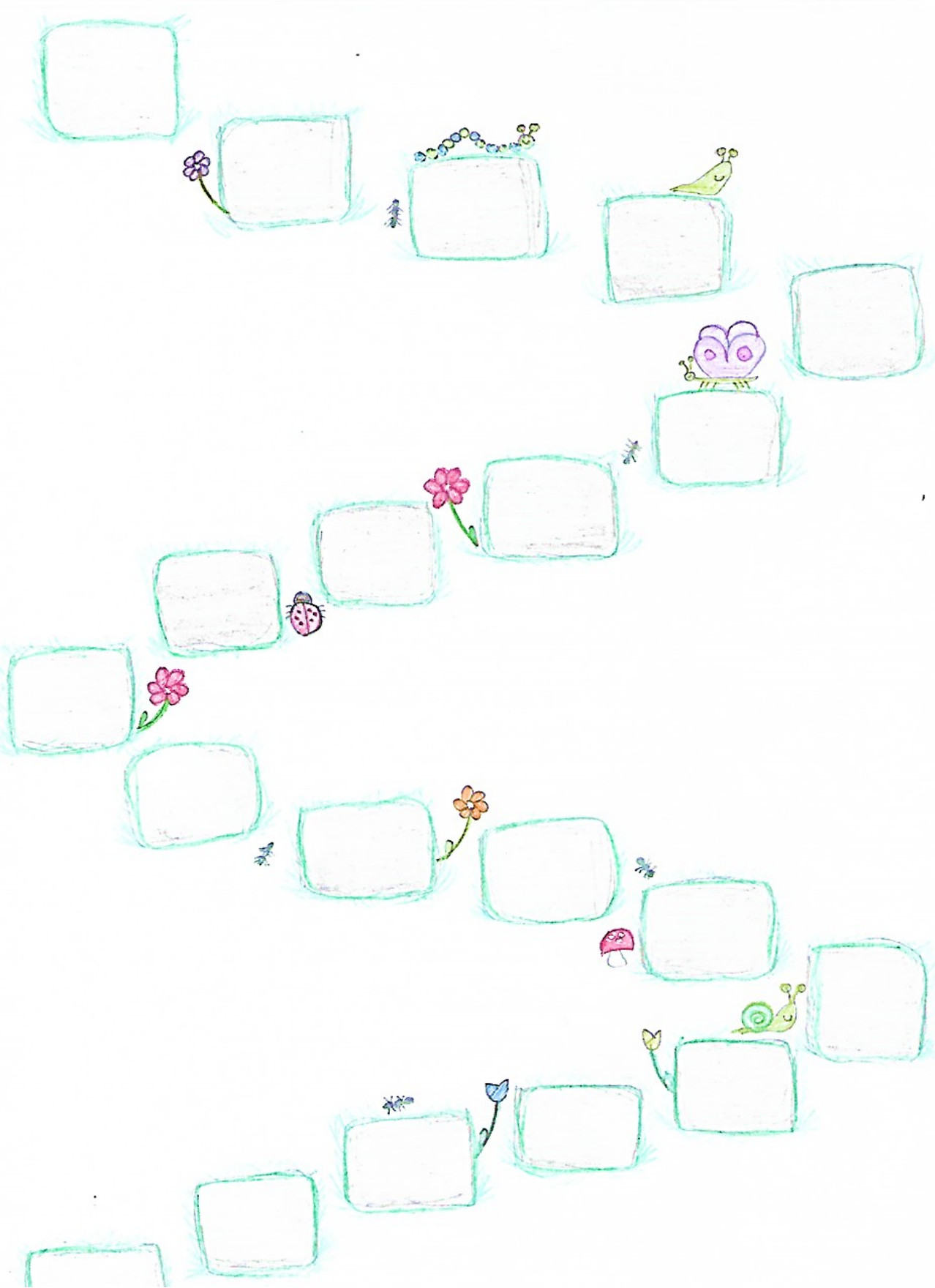
The ripple effect process is also a great tool to help challenge the tendency to minimise the consequences of behaviour or justifications like "the insurance will cover it", or "it didn't really bother them, so it doesn't matter". It forces the individual to go deeper than one-liner brush-off statements and to think about behaviours more thoroughly.



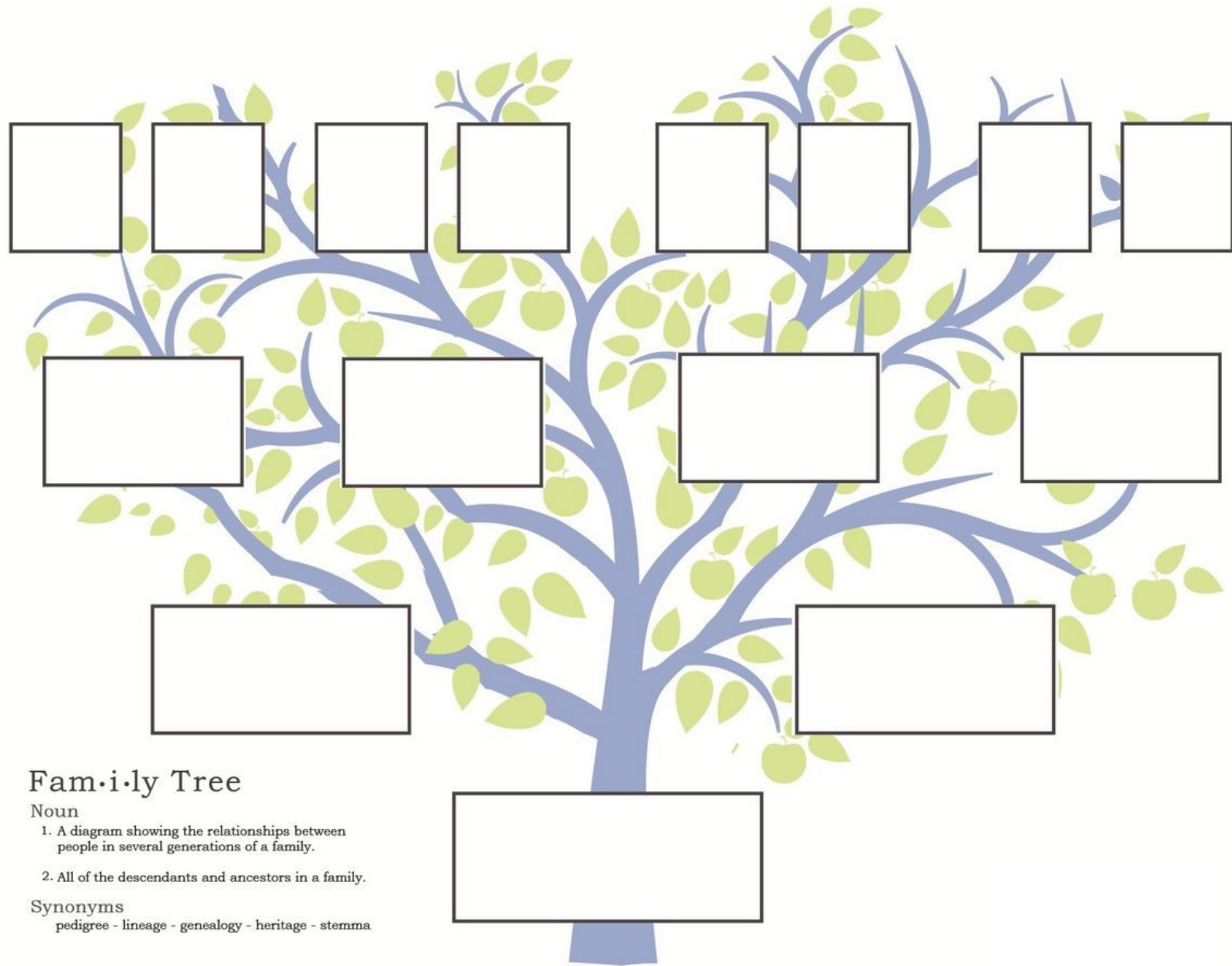
The Ripple Effect – Example 2



Life Path Tool



Family Tree Tools



MASLOW - The Hierarchy of Needs

Maslow's hierarchy of needs is a motivational theory in psychology comprising a five-tier model of human needs, often depicted as hierarchical levels within a pyramid. The needs lower down in the hierarchy must be satisfied before individuals can attend to needs higher up. From the bottom of the hierarchy upwards, the needs are - physiological, safety, love and belonging, esteem, and self-actualization.

Maslow stated that people are motivated to achieve certain needs and that some needs take precedence over others. Our most basic need is for physical survival, and this will be the first thing that motivates our behaviour. Once that level is fulfilled the next level up is what motivates us, and so on.

The hierarchy of needs (shown in the diagram) has five stages which are:

1. **Physiological needs** - these are biological requirements for human survival, e.g. air, food, drink, shelter, clothing, warmth, sex, sleep.

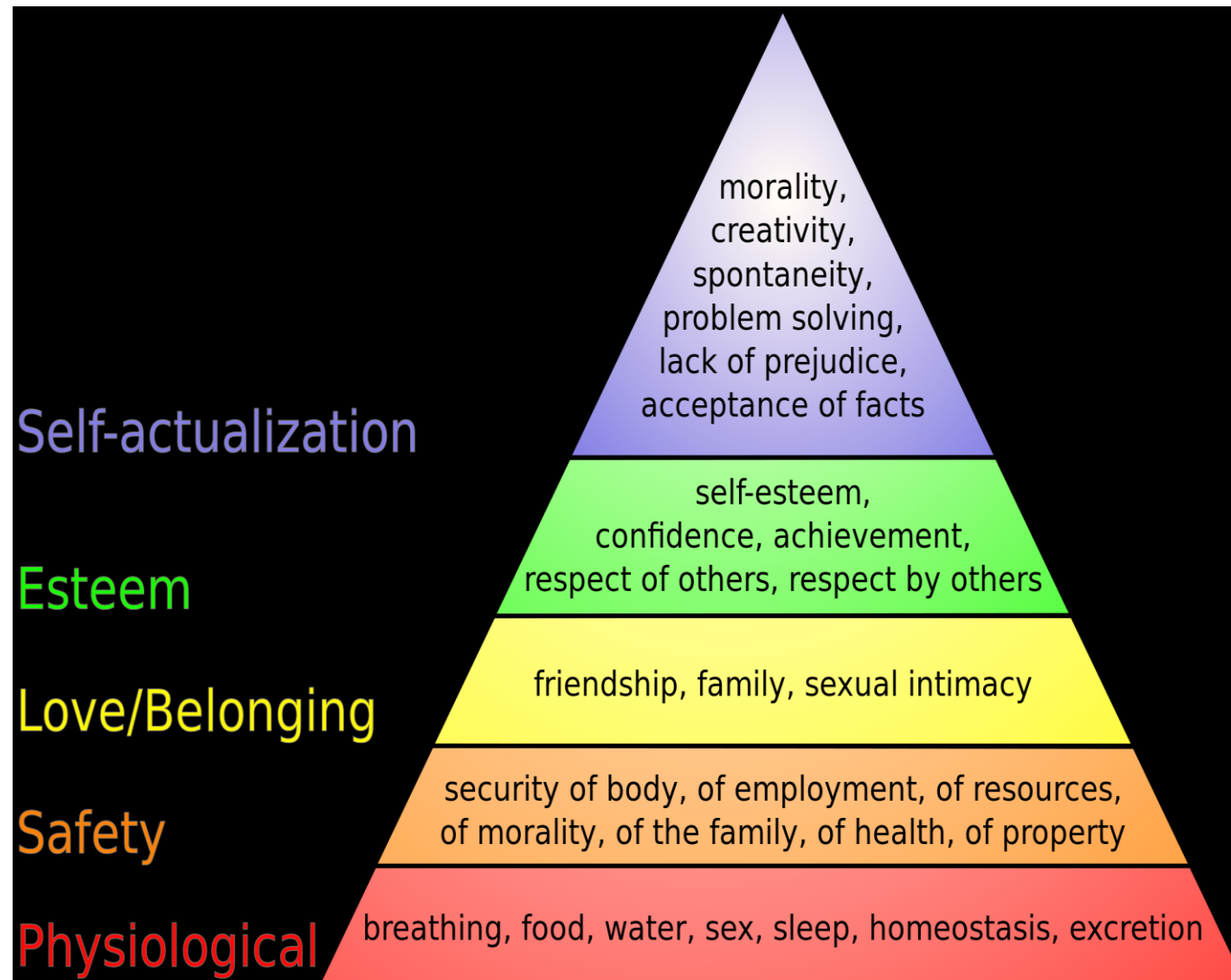
If these needs are not satisfied the human body cannot function optimally. Maslow considered physiological needs the most important as all the other needs become secondary until these needs are met.

2. **Safety needs** - protection from elements, security, order, law, stability, freedom from fear.

3. **Love and belongingness needs** - after physiological and safety needs have been fulfilled, the third level of human needs is social and involves feelings of belongingness. The need for interpersonal relationships motivates behaviour. For example, this includes friendship, intimacy, trust, and acceptance, receiving and giving affection and love.

4. **Esteem needs** - which Maslow classified into two categories: (i) esteem for oneself (dignity, achievement, mastery, independence) and (ii) the desire for reputation or respect from others (e.g., status, prestige). Maslow indicated that the need for respect or reputation is most important for children and adolescents and precedes real self-esteem or dignity.

5. **Self-actualization needs** - realising personal potential, self-fulfillment, seeking personal growth and peak experiences. A desire "to become everything one is capable of becoming".



Recommendations: curiosity check list (after Broadhurst et al. 2010)

PRACTITIONERS	EMPLOYERS	EDUCATORS
Am I remaining curious and inquisitive about what I am seeing and assessing?	Is the “front-door” organised to ensure optimum conditions for the receiving and recording of information?	Is a culture of openness promoted in relation to practitioners’ anxieties and uncertainties?
Am I open to new information?	Am I able to prioritise the needs of people with TBI over performance targets where necessary?	Are students set practice orientated examples & role plays which stretch them, but are still achievable?
Would I be prepared to change my mind about this case?	Do assessment forms encourage the recording of gaps in understanding?	Are students taught how to critically scrutinise evidence?
Is there sufficient quality and quantity of evidence for judgement?	Does the culture allow for professionals to challenge each other’s findings?	Are students encouraged to challenge their biases?
Am I exploring process as well as content?	How are habitual practices avoided?	Are students taught how to observe and listen?
Am I able to challenge this person?	Can I recognise when staff are under stress?	Are students taught how to clearly pass on information?

Relationships

Relationships are the most significant factor in promoting child safety, permanency, and well-being.

Mapping can help us to critically think through a case AND to determine better ways to improve our partnerships with families to build safety for children.

Trauma-informed practice reminds us that most healing takes place in the context of safe and trusting relationships

Key Questions for the Critical Thinker

- What is the purpose of my thinking (goal/objective)?
- What precise question (problem) am I trying to answer?
- Within what point of view (perspective) am I thinking?
- What concepts or ideas are central to my thinking?
- What am I taking for granted, what assumptions am I making?
- What information am I using (data, facts, observation)?
- How am I interpreting that information?
- What conclusions am I coming to?
- If I accept the conclusions, what are the implications?
- What would the consequences be if I put my thoughts into action?

Poverty Aware Practice

- Poverty restricts people's options, leaving them in impossible situations like choosing either to heat their home or pay their rent. With rising living costs and unstable work, our economy is holding people down and stopping many from choosing their own path.
- Economy locks people in poverty- low paid unstable jobs mean more and more families can't put food on the table. It is hard to break free from the restrictions our economy places on people.
- A fifth of our population live in poverty and more people are relying on food banks
- Factors which pull people into poverty are low wages/increasing living costs/losing a job/relationship break up/health difficulties/care responsibilities.



Top Tips

1. Poverty-aware practice belongs across the whole practice continuum.
2. Anti-poverty practice should be embedded in routine processes such as assessment, planning and review.
3. All assessments should include consideration of socioeconomic circumstances, the impact on the individuals concerned, on household functioning and on people's capacity to change.
4. Do we unthinkingly make demands of parents, perhaps in child protection plans or risk management plans that create financial pressure?
5. Do we demand standards of personal behaviour and self or household management that anyone would struggle to meet?

Family Finding

Four key concepts...

- Every child has a family and they can be found if we try.
- Every child has/had a father and paternal family.
- As children grow older and access the community nonrelative adults will learn to care about them.

Every child and person will encounter human beings in their future who can radically change their lives in enriching ways.

Tools used:

- Family produced Genograms.
- Mobility mapping – (strength-based exercise where young person highlights the supportive people within their lifetime)
- Calendaring - (identifying where the positive interactions are on a daily basis for a young person).
- Network meetings - used to identify key people for young person's network and identify what contribution they can make to supporting a young person.



Mobility Mapping

A Mobility Map is a child's memory of his or her life put to paper. The mobility mapping process allows the child to rediscover the important people and places from his or her past. The process can reveal a child's daily activities and significant relationships, as well as distinctive community or neighbourhood features, structures, or geographic characteristics. It is likely the child will share personal stories of family and friends, places frequently visited, and favourite memories. The information revealed can provide children with knowledge about where they came from and important emotional connections from their past. This information contributes to their identity development. It can also provide caseworkers with opportunities to reach out to the people identified through this process and encourage connections with the child.

This activity can be done with children and adults. It is important to allow several hours to complete this activity, depending on the age of the child and how many moves the child experienced.

Prior to completing the Mobility Map, explain to the child the purpose of the activity:

- To stimulate the child's memory,
- To generate discussion between the child and caseworker,
- To explore diverse topics, and
- To draw out information useful for locating connections that have been lost.

Strategies for engaging the child

- Be patient and encourage the child to draw pictures.
- Be mindful of the individual's developmental stage.
- Allow the child to take the lead.
- Work with child at their convenience.
- Encourage caregiver's involvement only if the child feels comfortable with their participation.
- Keep a sense of humour.
- Be flexible.
- Respect individuality.
- Remember the unique cultural aspects of the child.
- Understand that a genuine rapport with a child takes place over time.

Materials Needed: An assortment of writing tools: markers, pens, coloured pencils, or crayons; at least one pad of poster size paper, tape, and a private space with plenty of wall space. The child needs to feel safe in order to share information without concern of others overhearing. It is preferred that the Mobility Map be done in the child's home.

Instructions:

1. Tape paper along several walls in the room at a height the child can easily reach.
2. Prepare the child by telling them things such as:
 - “We are going to have fun today and draw a big picture of the story of your life.”
 - “We are only going to focus on positive memories, and you can skip over any negative memories or negative times in your life.”
3. Explain to the child that you want to be able to remember all of the things he or she tells you so you may go back and ask questions or write notes.
4. Use the questions below as a guide to help you get started or stay on track during the mobility mapping. These questions are not all inclusive as each child will require individualised attention and guidance to successfully complete a mobility map. The child should write the names of the individuals they draw as well as the locations, including addresses if known, or other geographical information.



Think back as far as you can in your life.
Where was the first place you remember living?
What did it look like?
Can you draw it for me?
How old were you when you lived there?
Who lived there with you?
Can you draw them for me?
What were their names?
How old were they?
Do you remember your neighbours?
Can you draw their houses?
What were their names?
Did you know them well?
What school did you go to?
Did you ride the bus?



Did you have a favourite teacher?
What was their name?
Can you draw the school and your teacher in it?
How about a favourite coach or other school people?
Did you go to church or other religious services?
Can you draw the place you went to?
What did you do for fun when you lived there?
Did anyone come to visit often?
Did you go visit anyone?
Where did you live next?
How old were you when you moved?
Who lived with you in this place?
Can you draw them and the house and how old they were?
Repeat this until you get to the place they live now

Other Clarifying Questions

Who in the family would know relatives' last names?
Who planned family reunions or events?
What foods did you eat and did anyone have an accent?
Do you remember any landmarks or street names?
How big is your family?
What are some fun memories or stories?
What social media sites do you use?

Instructions:

5. Ask the child to go back with a different colour marker and put a mark next to the people with whom they feel safe.
6. Ask the child to repeat this with a different colour marker and mark the people with whom they do NOT feel safe.
7. Ask the child to identify the people from the safe list with whom they would want to reconnect.
8. Ask the child what five things are missing in their life right now. This can include people, places, things or unanswered questions.
9. Ask the child to identify their top five needs.
10. Ask the child to place a number next to the need in order of importance with 1 being the most important and 5 the least important.

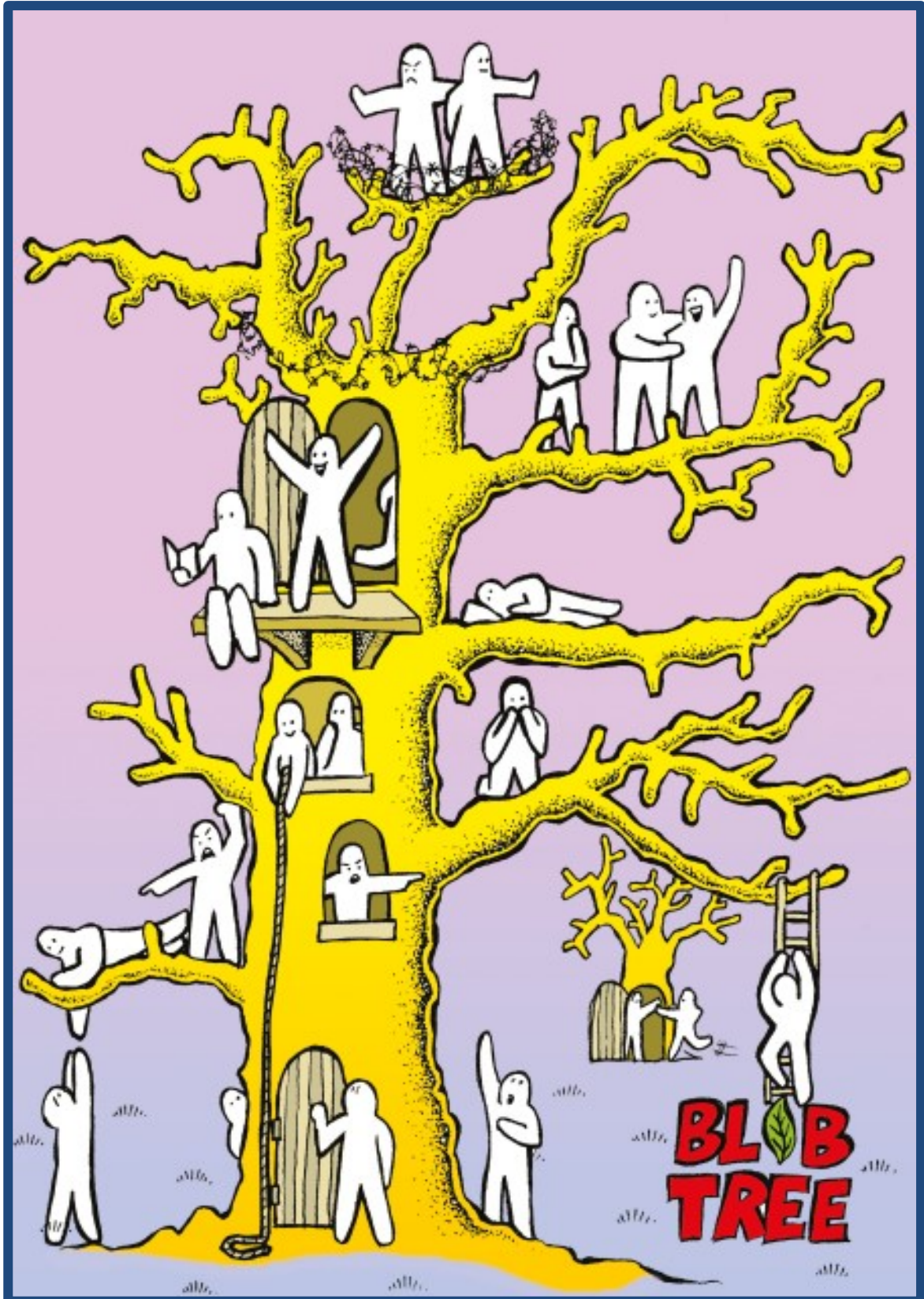
Remember to encourage the child often and to redirect away from negative memories. Tell them that you can focus on the positive things during this activity.

Prior to giving the Map to the child, take a picture and scan the image. Once the map is complete, give the child the final Map.

Adapted from Kids Central, funded in part by the Children's Bureau/Administration for Children & Families/Health & Human Services for the following projects: Grant # 90-CF-0026 Family Finding, 2011

The Blob Tree

Ask the child to identify which cartoons in the diagram represents each member of their family, friends or significant person you want to check with them. This can be a springboard to ask them why they made that choice and what it reveals about the person.



Discrepancy Matrix

This model can be used either alone to aid you with your cases or in supervision. The primary aim of the discrepancy matrix is to identify any flaws in the information you have about a case and any information that you're lacking and need to know. The overall aim is to turn all information you have from ambiguous information or missing information or assumption-led information into Firm Ground or Intelligence, which as we can see from the diagram shown below is both strong evidence and a strongly held view. Any other information is either irrelevant and not useful in your assessment or is evidence which would not be substantiated in Court.

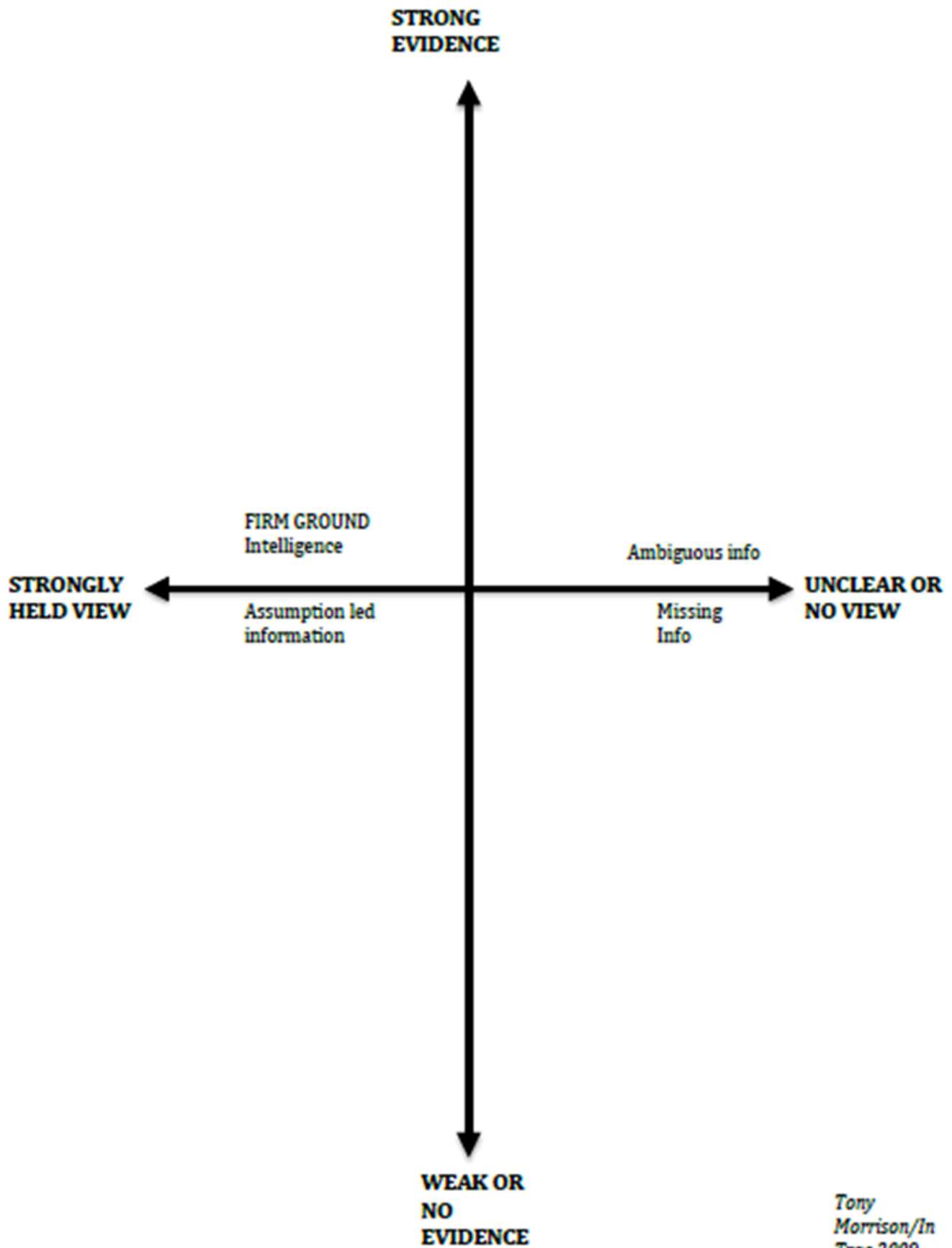
Consider with your families; what information do you actually know for certain? What information is actually caused by what others have informed you and you've assumed is true, or based from your own assumptions?

As workers we need to reflect on and accept that our own values and both personal and professional experiences will cloud our views and cause us to make assumptions with the families that we work with. The Discrepancy Matrix helps us to identify that information and allows us to decide whether this needs to be pursued and clarified.

Consider the information we have about a case. What is the Intelligence (the information we know for certain)? What information do we assume? What information is missing? and what information is Ambiguous? Plot this detail into the diagram.

The next step once the above information is identified is to turn the information into intelligence; meeting with the child, young person or the family and assessing where you have placed information in the matrix should then spark useful conversations.

The Discrepancy Matrix

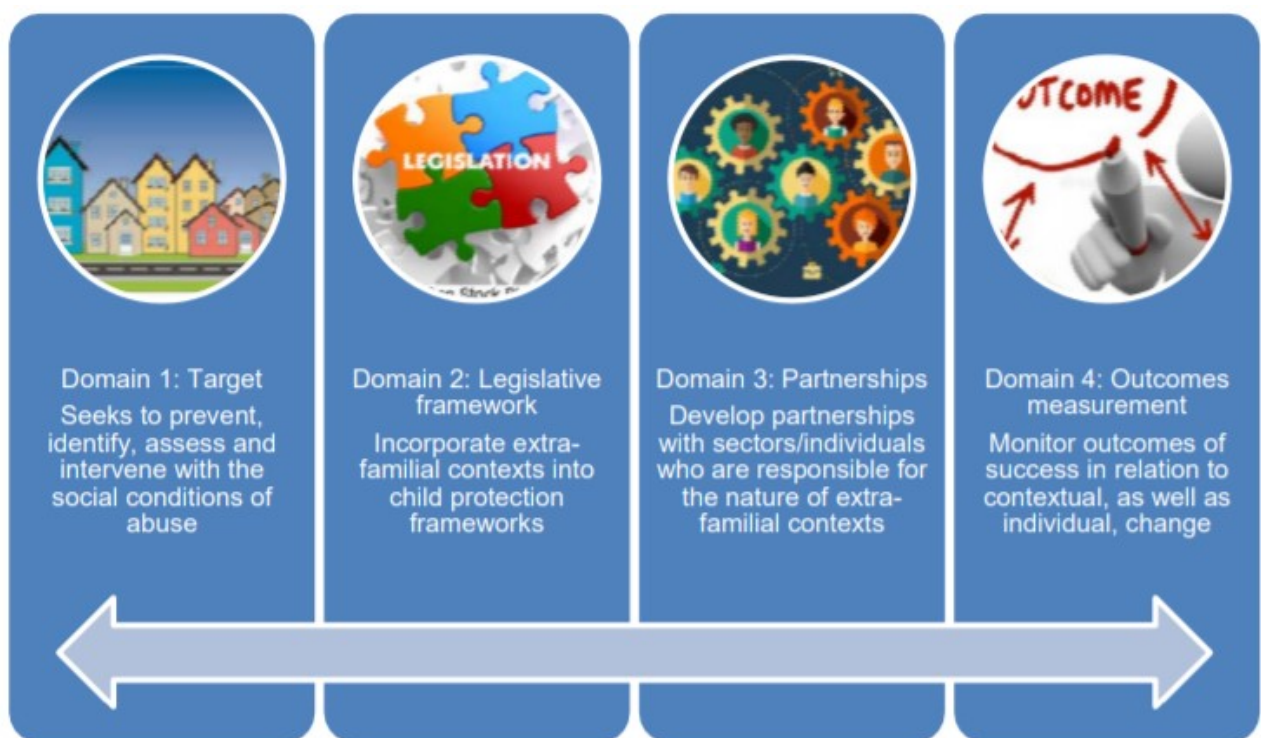


*Tony
Morrison/In
Trac 2009*

Contextual Safeguarding

Contextual Safeguarding is an approach to **understanding, and responding to, young people's experiences of significant harm beyond their families**. It recognises that the different relationships that young people form in their **neighbourhoods, schools and online** can feature violence and abuse. Parents and carers have little influence over these contexts, and young people's experiences of **extra-familial abuse can undermine parent-child relationships**. Therefore, practitioners need to engage with individuals and sectors who do have influence over/within extra-familial contexts, and recognise that **assessment of, and intervention with, these spaces are a critical part of safeguarding practices**. Contextual Safeguarding, therefore, expands the objectives of child protection systems in recognition that young people are vulnerable to abuse in a range of social contexts.

To be working in a contextual safeguarding approach, you'll need to address the four domains.



Firmin et al, 2016

Safety Mapping

Locations, people and further details	
I feel safe in this area 	
I could be safe in this area 	
I do not feel safe in this area 	
Safety Plan	

This is a tool that you can use with a young person. You can print off a local area map or ask a young person to draw their own (e.g. of their school, park or neighbourhood). The purpose of the map is for the young person to explain where they feel un/safe or unsure – this could colour code this Red, Amber, Green.

A safety map needs to be completed by the professional who has the best relationship with the young person.

This might be different to the 'hotspots' and intelligence that Police and other agencies may have, which is why it is welfare-led rather than crime prevention-led.

Talking Mats

Talking mats are often used with children with autism but they can also be used more generally in direct work with verbal children. The idea is that you can identify a topic you want to talk about. For example, you could go through aspects of domestic violence or aspects of grooming in CSE. You can ask the child if they have ever encountered these aspects in their lives which can act as a springboard to discuss the issues further. You can use the blank table below to write out certain statements you want to explore with the child and then cut them out. You can then go through each one in turn asking do they apply: yes, no or not sure and list them out on the floor.

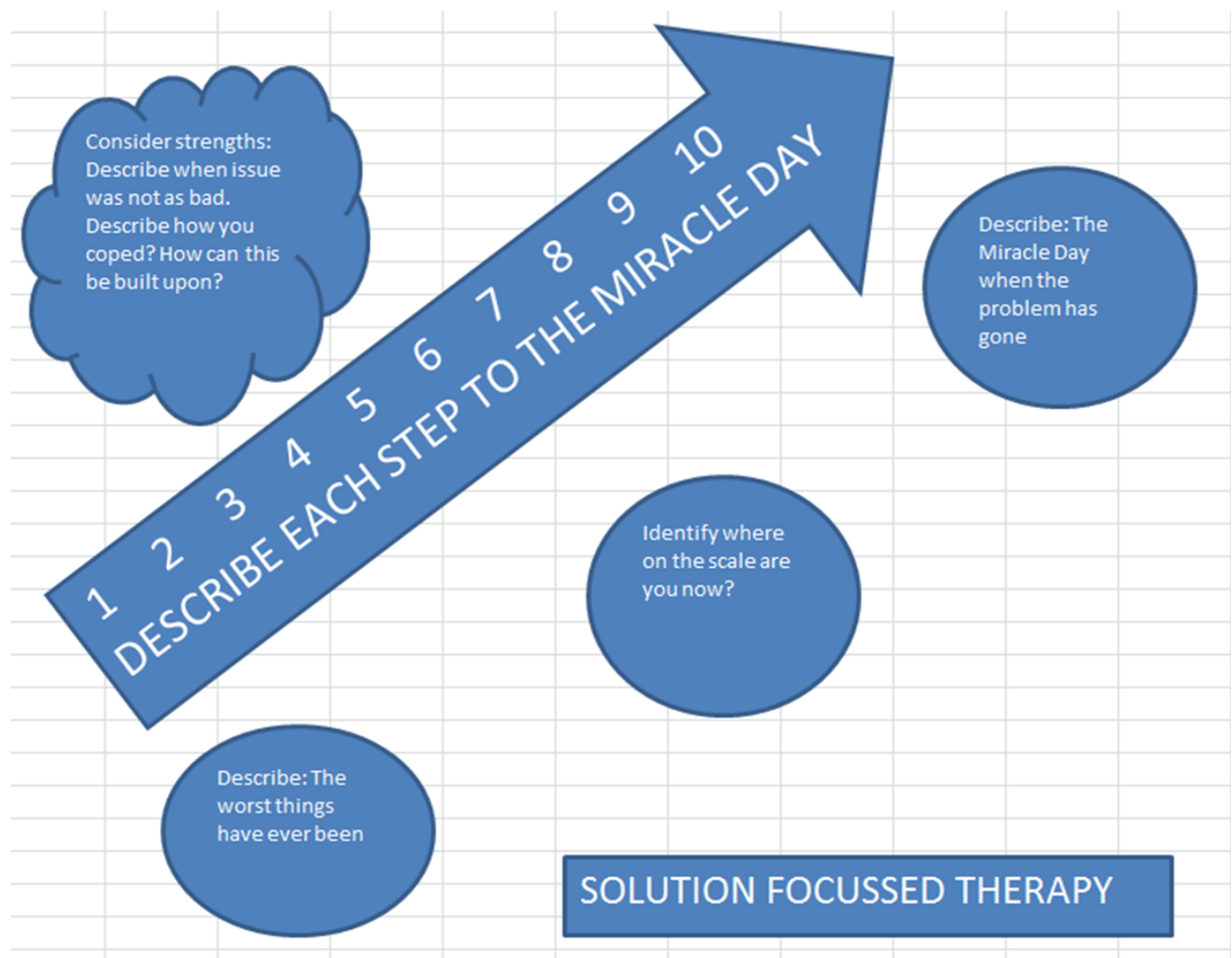
YES

NO

**NOT
SURE**

Solution Focussed Therapy

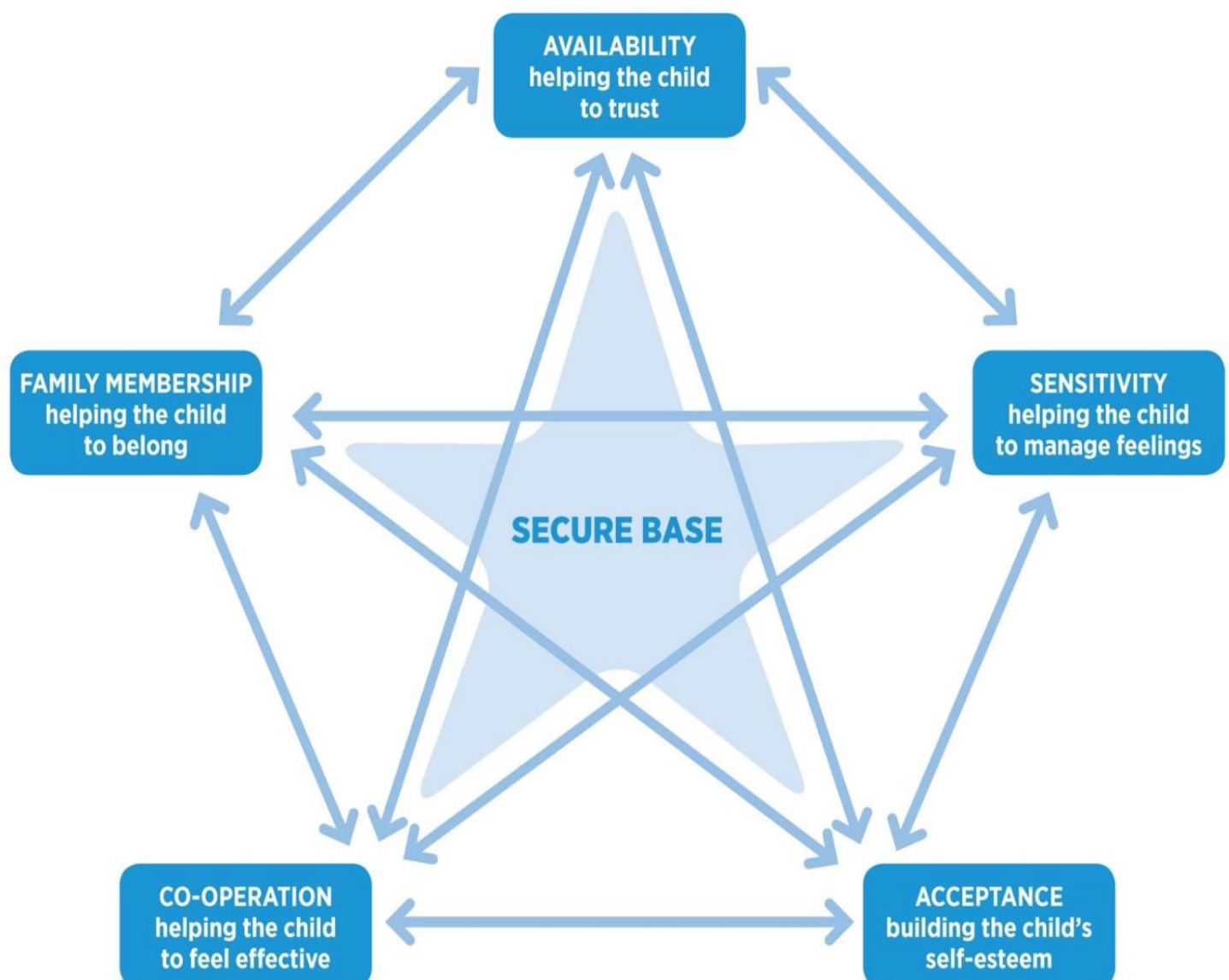
This tool is inspired by solution focussed therapy and is probably more suited to adolescent children or adults. The idea is to ask the participant to visualise what their ideal future looks like where their problems have been solved – this is also known as the miracle day. Ask the person to describe the worst problem there has ever been. This can be used to discuss how they made it a bit better compared to now and hence how strengths can be built upon to reach their goals. You can ask the person to identify where they are now on the scale and each step they need to take to gradually get to their miracle day. This can also be used to measure progress as the intervention continues.



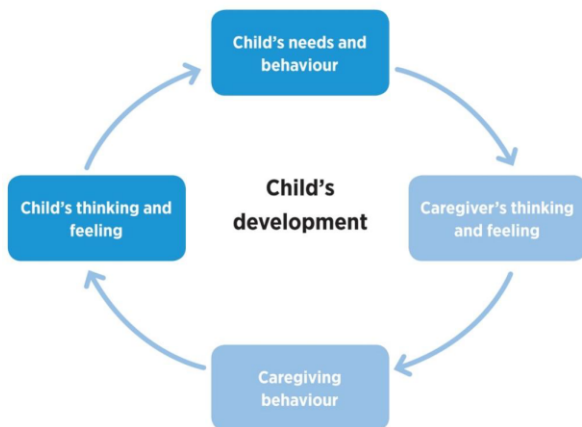
The Secure Base Model

The Secure Base Model can enable all professionals who work with children and families to think about the strengths and difficulties of caregivers and their children. This cycle begins with the child's needs and behaviour and then focuses on what is going on in the mind of the caregiver. How a caregiver thinks and feels about a child's needs and behaviour will determine his or her caregiving behaviours. The caregiver may draw on their own ideas about what children need or what makes a good parent from their own experiences or from what they have learned from training. The caregiving behaviours that result convey certain messages to the child. The child's thinking and feeling about themselves and other people will be affected by these messages and there will be a consequent impact on his or her development.

As a direct work exercise, the practitioner can reflect with the parent/carer on the dimensions of the secure base model to review if the parent/carer is meeting the child's needs and if there is anything they could do differently to improve.



The caregiving cycle



Acceptance – building the child's self-esteem



Co-operation – helping the child to feel effective



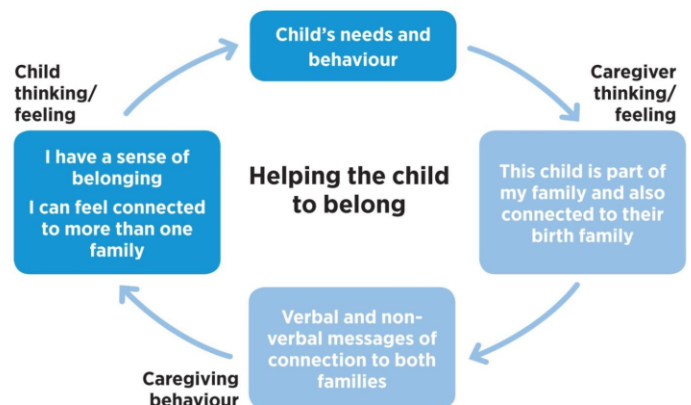
Sensitivity – helping the child to manage feelings



Availability – helping the child to trust

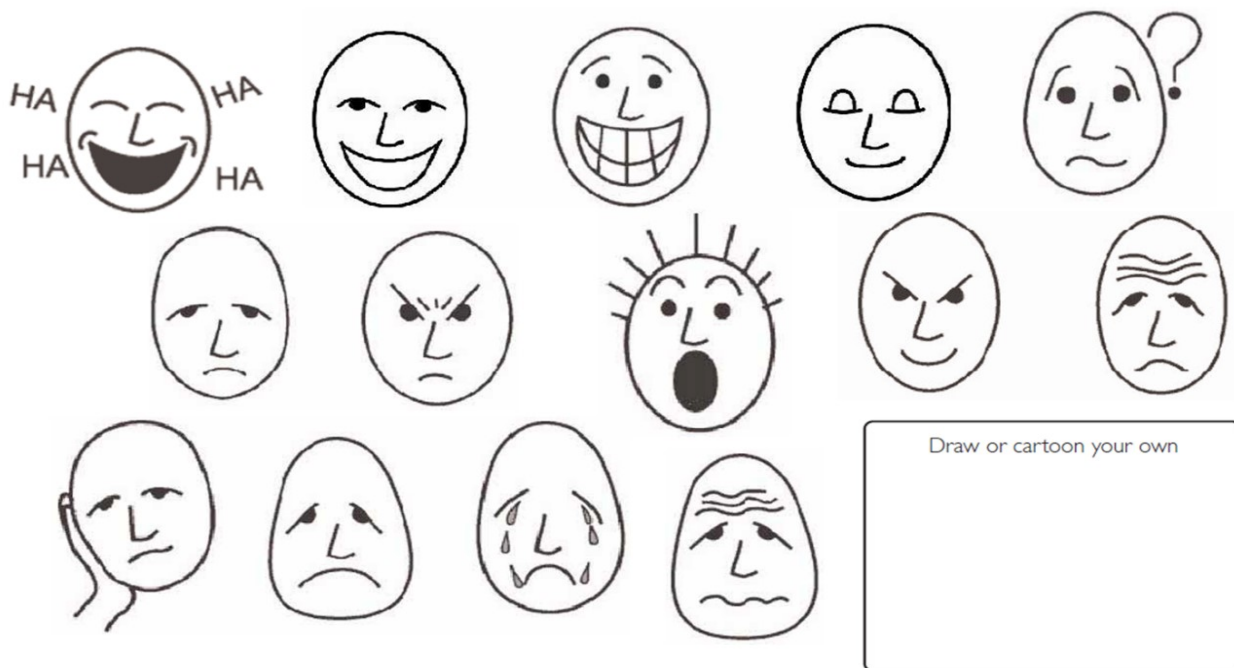
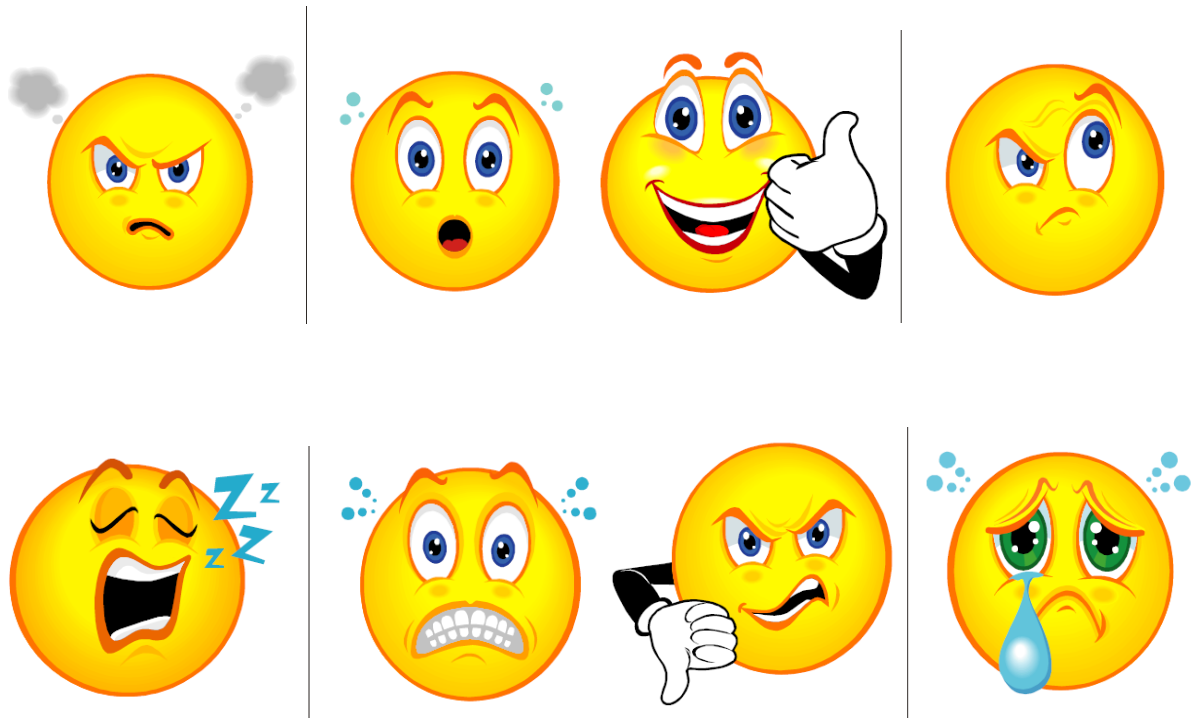


Family membership



Emotions

The emotions tool can be used to identify the child's emotions or the child's views of the different emotions that other people in the child's network have. This can act as a springboard to ask the child about certain incidents that make the child happy or sad or that make people in their network happy or sad etc. This can be used to explore strengths and difficulties in the child's experiences.



Kid Moods



SILLY



THANKFUL



CONFUSED



AMUSED



NERVOUS



SICK



TOUGH



PLAYFUL



LONELY



SURPRISED



TIRED



HUNGRY



RELAXED



JEALOUS



LOVED



HAPPY



GROSSED OUT



FULL



SAD



ANNOYED



BORED



CONFIDENT



IN LOVE



EXCITED



SCARED



HYPER



PROUD



ANGRY



EMBARRASED



CRAZY

Useful resources – websites – Podcasts – further reading – toolkits

Sign up to Research in Practice to access a wide range of resources. Visit www.rip.org.uk

Podcasts

Learn on the go podcasts on motivational interviewing:

<https://soundcloud.com>

Search:

- Attachment Theory
- Strengths Based Conversations
- Research in Practice
- Strengths based conversations: an introduction.
- Strengths based conversations: supporting good practice
- Strengths based conversations: Skills for effective communication

Genogram

www.strongbonds.jss.org.au

Search:

- Cultural Genograms
- Ecomaps

Ecomaps

www.strongbonds.jss.org.au

<https://www.signsofsafety.net/>

<https://www.stresshealth.org/>

Professional curiosity

Think language- to help better understand social care terms:

<https://www.thinklocalactpersonal.org.uk/> - Care and support Jargon Buster

Food poverty

<https://www.polity.org.za> - Nothing left in the cupboard

BASW – Anti-poverty Guide

Contextual safeguarding

<https://www.contextualsafeguarding.org.uk/> - Contextual Safeguarding Practices

Restorative practices

<https://transformingconflict.org> – Restorative conversations

<https://onlinelibrary.wiley.com> – Family support services delivered using a restorative approach

Managing difficult conversations

<https://assets.publishing.service.gov.uk> - Strengths based Approach practice framework and handbook

Sources for tool Kits you can use with families

<https://www.westsussexscb.org.uk> – say it your own way

<https://learning.nspcc.org.uk> – solution focused practice toolkit

<http://www.opentalk.info> – How it looks to me

<https://www.bucks-lscb.org.uk> – Voice of the child toolkit

<http://www.socialworkerstoolbox.com/> - Social work tools and resources

<https://www.headstartkent.org.uk> – Headstart having a resilience conversation

<http://www.sheffkids.co.uk> – Communi CRATE Worksheets

