

National AMHP Lead Conference

Think child, think parent, think
family: a guide to parental mental
health and child welfare

27th November 2009

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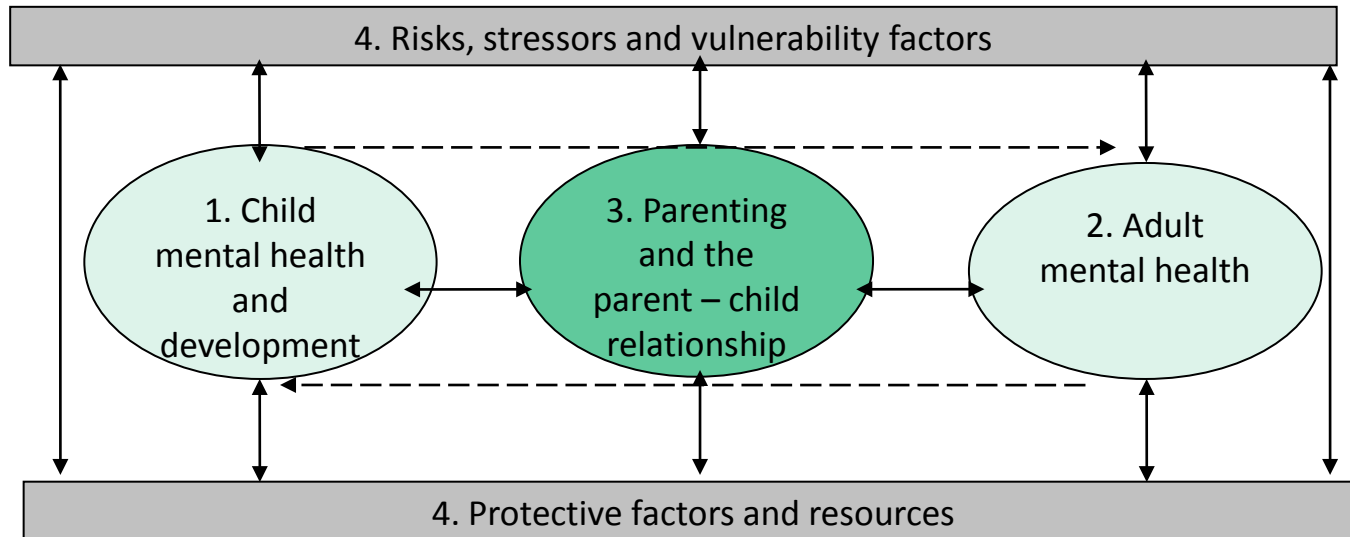
Workshop plan

- Why 'think family'?
- Introduction to the guide
- Implementing the recommendations
- Group discussions and feedback



Why think family?

The Family Model (Falkov, 1998)



- Around one in four adults will experience a mental illness during their lifetime. At the time of their illness a quarter to a half of these will be parents.

Why think family?

- An estimated one-third to two-thirds of children whose parents have mental health problems will experience difficulties themselves (ODPM 2004)
- Parental mental health is a significant factor for children entering the care system (ODPM 2004)
- Nearly a third (29%) of young carers are estimated to care for a parent with a mental health problem (Dearden and Becker 2004)
- Children who are the subject of Serious Case Reviews often have parents who experience mental health problems. (Biennial Analysis of SCRs DCSF 2009)

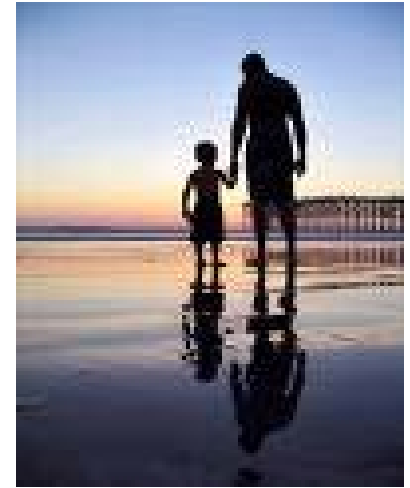
Barriers to 'thinking family'

- Challenge of interagency working
- Fear and stigma
- Confidence and willingness to assess outside usual professional boundaries
- Information sharing
- Knowledge of services



Key messages from the guidance

- Develop services that:
 - Take a 'no wrong door' approach
 - Look at the whole family and co-ordinate care
 - Provide support that is tailored to need
 - Build on family strengths
 - Prioritise the safety of children
- Plus:
 - Signposting and improving access via communications strategy
 - Workforce development
 - Strategic approach – 'Think Family Strategy'



Priority recommendations

- **Screening:** developing systems and tools in collaboration with parents and young people, to ensure the right questions are asked and the data is recorded for future use.
- **Assessment:** adapt existing assessment and recording processes to take account of the whole family, safeguard children and train staff in their use.

Priority recommendations (cont.)

- **Planning care:** needs to be flexible enough to meet the needs of each individual family member as well as the family as a whole, and staff should aim to increase resilience and reduce stressors.
- **Providing care:** develop non-traditional and creative ways of delivering services as a way of targeting families and improving access.

Priority recommendations (cont.)

- **Reviewing care plans:** Reviews should consider changes in family circumstances over time, include both individual and family goals, and involve children and carers in the process.

Taking the guidance forward



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Implementation sites and evaluation

- Six implementation sites:
 - Birmingham
 - Lewisham
 - Liverpool
 - Northern Ireland
 - North Somerset
 - Southwark

Challenges for the sites

- Getting the right people round the table
- Scoping to see what is or is not there
- Getting the views of parents and carers
- Conflicting priorities
- Remembering the local drivers and keeping up impetus

Ideas to meet the challenges

- Developing interagency protocols for mental health and children's services interface
- Reviewing existing referral and assessment procedures
- Joint training for AMH and children's services staff
- Development of parental mental health champions group

Questions for discussion

- What is your immediate response to the key messages in the guide?
- What % of your caseload are parents?
- What is your experience locally of contact with children's services?
- Are you clear about when and how to make referrals to Children's Social Care?
- What sort of training is available to promote joint working?

Questions (cont.)

- In cases where children's social care has decided the child has not met thresholds/criteria, do you know where else to sign post/seek help for the child or family?
- What sort of work might you do with the children to educate them about their parent's mental health and build up resilience?
- How much are children involved in their parents care plans?

Questions (cont.)

- What policies and procedures do you have locally to encourage you to think family in your work?
- What do you think the blocks/barriers are?
- How can you resolve these issues? What role might you have in pushing this agenda?