Achieving Permanence

Programme Participants' Workbook

Part 4: Module 4

and

Completing the Programme

Introduction

Welcome to Part 4 of the *Achieving Permanence Programme Participants' Workbook* to support and record your learning development in relation to Module 4 and the completion of the programme.

The Achieving Permanence Programme is introduced in the *Achieving Permanence Introduction and Overview* document and you are expected to be familiar with that and the outline of the programme including:

- the background and context for the programme
- the vision and purpose
- the learning process
- the programme structure and timetable

However, *this* document (and the companion workbook parts linked to the other three modules comprising the full programme of study and learning) is intended to be a practical programme *workbook* for you to use to: complete, fill in and build up as a record of your learning and reflection throughout each module and across the programme as a whole. Having this as a 'digital' document that you can add to as you progress through the programme seemed the most useful format. We hope that the following notes help you to understand the way the four parts of the workbook (linked to each module) can help you in your learning and development across the whole programme.

After this introduction, each of the four parts of the workbook follow the week-by-week format of each module and set out the following:

Module exercises, tasks and activities

Every module includes exercises, tasks and activities; these are set out in each of the four parts of the workbook with spaces for you to record notes and your responses to the tasks, where appropriate.

Material for preparation and use in the training workshops

The workbook also includes some material that you are likely to refer to during the formal training workshop that is included within each module of learning.

Policy and practice briefing paper

As part of the programme, you are required to undertake some project work in relation to a particular area of interest; identifying and exploring (through reading, research and reflection on practice) a specific topic of relevance to your work to achieve permanence for children and young adults.

Ideally, this would be a topic relating directly to your own specialist area of practice or service, and the children, young people or young adults with whom you work and the issues that one or more may experience.

You are required to prepare a ‘briefing paper’ on the selected topic to share with participants on the programme, your line manager and supervisor (as part of the portfolio requirements), and also with your colleagues and other professionals as appropriate – and to share the insights and expertise directly with the children, young people or young adults and their carers with whom you work, where appropriate.

Portfolio

Finally, in order to complete the programme, participants are required to compile a *portfolio* of work that will be reviewed by their line manager, supervisor or the person within their agency who is identified to support your learning and progress and verify completion of the programme. Where there are tasks within each module (and the related workbook) that will contribute to the completion of the *portfolio*, these are indicated in the relevant part of the workbook. The final, fourth part of the workbook includes more detail on completing the portfolio work.

Additional learning material

Alongside the workbooks and the material included in them, additional learning resource material is also available including reading and case studies – this is available in the online resources that support the programme.

Module 4: Sustaining Permanence

Introduction

Aim and focus

The focus of this final module in the Achieving Permanence Programme is on sustaining permanence: a long-term plan for a child's upbringing. Planning, achieving and sustaining permanence represents an underpinning framework for all social work with children and their families to ensure that children have:

> *'a secure, stable and loving family to support them though childhood and beyond and to give them a sense of security.'*
>
> (CA'89 Guidance and Regulations Vol II: care planning, placement and case review' HM Government June 2015).

The particular emphasis in this programme is to enhance your effectiveness in your work with children, who are or have been in the care system or are living permanently with someone other than their parent; recognising that permanence plans can include adoption, long-term foster care, kinship care under child arrangement orders or a special guardianship order, or a return home.

This module consolidates and builds on the key elements explored in the first three modules to identify and promote best practice, supported by a systematic understanding of current research and theory. It addresses planning, managing, reviewing, and supporting children and young people in their placements and families.

Throughout the module you are encouraged to consider, explore and reflect on the following questions:

Key Questions

- What are the hallmarks and characteristics of permanent care arrangements and placements for children/young adults?
- What factors contribute to sustaining permanent care arrangements and placements for children/young adults?
- What factors jeopardise or contribute to the disruption/breakdown of permanent care arrangements and placements for children/young adults?
- What experience and expertise (knowledge, skills, and values) do you bring to your work to sustain permanent care arrangements and placements for the children/young adults with whom you work?
- How can you work effectively with children/young adults, carers, parents, and families to sustain permanence?
- How can you work effectively with others to sustain permanence?
- What further learning and development will help you to work effectively to sustain permanence for the children/young adults you work with? What and who could support and help you in this?
- How will you put what you have learned into practice? What and who could support and help you in this?
- What happens when you put what you have learned into practice?
- How has your work developed?

Week 1: Sustaining Permanence – Avoiding Disruption

Essential Tasks/Activities

1) Watch Josh Shipp on YouTube ‘Every kid is one caring adult away from being a success story’

   https://www.youtube.com/watch?v=wwwFASyQc98

2) Read part 5 of the programme case study ‘Permanence Planning’ and complete the task below:

3) Review the work that you have undertaken in relation to your own reference case study and update the genogram, ecomap, therapeutic relationship tree and permanence plan that you created during the modules one and two

4) Consider the issues, insights, lessons for practice, dilemmas or questions relating to work to sustain permanence that have emerged in discussions with the programme cohort

To assist with task 1)

On watching Josh Shipp on ‘YouTube’: ‘Every kid is one caring adult away from being a success story’, what thoughts and feelings has this raised for you? **Notes:**

To assist with task 2)

Part 5 of the case study: Permanence Planning

Following Chloe's removal from the placement, the placement of Jack now 8, Skye, 10 and River, 13 continues with Audrey and Norman. It's decided in their reviews that Skye and River will move to local schools rather than continue being driven by Norman to and from school.

River begins to tell Norman that he is fed up of going to contact with his mum when she never shows up. Skye still wants to see her mum and is disappointed that she rarely comes.

Skye and River have contact as much as they can with Belle - this is arranged between both sets of foster carers.

Jack and his Dad meet regularly at the contact centre. Chloe's placements continue to breakdown. Jack wants to see Chloe but it's not always possible as Chloe is now being sent out of county. Jack's behaviour at school and in placement is always unsettled after he has seen Chloe, this lasts for a week or so.

Jack has lived with Audrey and Norman for 2.5 years, he is on a Care Order.

River and Skye have lived there for 2 years and are also on Care Orders.

Audrey and Norman are short term foster carers.

The social workers know there should have been a permanence plan but Audrey and Norman have not agreed to make a commitment to the children and because the placement is going well it is not felt to be in the children's interests to disrupt them.

What issues, insights, lessons for practice, dilemmas or questions relating to work to *sustain* permanence are raised for you by the case study in general and 'part 5' in particular?

Notes:

Week 2: Sustaining Permanence in Practice

Essential Tasks/Activities

1) Read part 6 of the programme case study 'Planning for Chloe' and complete the task below.
2) Prepare for Workshop Four by writing up brief details of the 'policy and practice briefing' topic you have been exploring, using headings below and including:
3) a list of useful references and resources relating to your 'policy and practice briefing' topic.

To assist with task 1)

Part 6 of the case study: Chloe's permanence plan

You have just faced a stream of consciousness from a new social worker on your team, Yasmin. Following the latest reorganisation, you have had to allocate cases quickly with only a cursory glance at the latest review reports. You have asked the social workers to find time to read the background and get a sense of the children's history but you know realistically that there is not time to do that.

Yasmin is angry that she must manage a change of placement for Chloe. Chloe is 13 and has been placed in a therapeutic placement (her 10th placement since coming into care 6 years ago) out of county where her behaviour has begun to improve, her school reports show that she is now learning and she has started playing sport and losing weight after the health professionals had flagged her obesity as increasing her risks of acquiring life limiting conditions. Her relationships with her peers were developing as a by-product from her sport. Last week's directive has insisted that there is no more out of county funding for placement with immediate effect and Chloe will be placed in the local residential provision, as Fostering have decided Chloe is not suitable for foster care as she becomes violent in family care and has a history of hurting animals.

Yasmin is angry about the decision because she does not think it is in Chloe's best interests. She has been to the residential home in preparation and been told by the staff that they cannot limit food even to a child who is severely overweight and she is concerned how that element of Chloe's care plan will be managed. Yasmin has read reports suggesting that Chloe might be vulnerable to sexual exploitation and felt if the staff could not manage to be assertive about what food they provided, she had questions about their ability to stop Chloe going missing.

Additionally, Yasmin wanted to send Chloe to the local school and discussed it with Chloe's dad, with whom Chloe still has contact. Yasmin then got a phone call from the adoption team manager who used to be the supervising social worker to the carers looking after Chloe's brother, Jack. Leslie had told Yasmin to read the files as it was important to consider Jack in her planning for Chloe. Jack and his foster siblings all attend the school Yasmin was going to recommend for Chloe, in addition Leslie was concerned how contact was managed between Chloe, Jack and their dad.

Yasmin was overwhelmed, angry and anxious about what the best decisions for Chloe were.

You have asked Yasmin to read Chloe's files and summarise the pertinent points for supervision later today.

What further issues, insights, lessons for practice, dilemmas or questions relating to work to *sustain* permanence are raised for you by the case study in general and part 6 in particular?

Notes:

To assist with task 2) & 3)

During the workshop, there will be an opportunity to share information about your work in relation to the 'policy and practice briefing' topic that you selected at the beginning of the programme – specifically to consider how the insights from exploring the topic may be relevant for practice that *sustains* permanence.

In preparation for this, it would be helpful if you would outline brief details of the 'policy and practice briefing' topic, using the headings below – and bring these notes to the workshop:

Policy and practice briefing topic: Work undertaken to explore the topic: Key learning points and implications for practice that may be emerging for you, for children/young people, for carers, for others with whom you work: Generally: In relation to sustaining permanence: Useful references and resources relating to the topic that you have identified in the course of the 'policy and practice briefing work':

Week 3: Essential reading

- The Fostering Network (2017) *Staying Put Guidance for Children and Young People Services, Fostering Services, and Leaving Care Services. What must be in place to ensure continuity of care for young people in England*.

- Baginsky, M., Gorin, S. and Sands, C. (2017) *The Fostering System in England: Evidence Review Research Report.* King's College, London and Quest Research and Evaluation Ltd.

Week 4: Workshop

Preparation and review

My goals for today are:
In order to achieve these goals, I will need to:
My new learning goals at the end of this workshop:

The following material will be referred to directly during the workshop.

Children and Young People's Health, Development and Wellbeing; Carers' Capacity to meet Needs; Supporting Factors
Using the Assessment Framework – adding to the detail ~

Adapted by Phil Heasman from: 'Safeguarding Children Living with Trauma and Family Violence' A.Bentovim et al (2009) JKP (Ch. 5)

Child or Young Person's Health, Development and Wellbeing				
		Domain Dimensions and Sub-dimensions		
Specific evidence for this particular Child/Young Person (with source/date/status – observed or inferred - of information)	**Strengths (potential indicators)**		**Difficulties (potential indicators)**	**Specific evidence for this particular Child/Young Person (with source/date/status – observed or inferred - of information)**
Health **3 2 1 0 -1 -2 -3**				
	Foetus healthy in pregnancy	**General physical health**	Foetal health or survival threatened in pregnancy; repeated injuries and/or infections at any stage of development	
	Good general health in perinatal period, the early years and later childhood		Chronic physical illness and/or illness or injury repeated hospitalization	
	No injuries or illnesses requiring repeated or protracted hospitalization		Onset of soiling or enuresis after continence was firmly established	
	No physical genetic illnesses or conditions		Physical or genetic illnesses or conditions	
	Child takes exercise and eats a healthy diet		Takes little exercise	

	Child has positive health attitudes		Child has negative attitudes towards health	
	Positive trajectory of physical health	**Growth and Development**	Negative trajectory of physical growth and failure to thrive	
	No persistent developmental problems		Presence of a developmental problem, e.g: learning difficulties, autism or delay in language development	
	No non-accidental injury	**Injuries or illnesses related to physical or sexual abuse**	Non-accidental injury	
	No genital injuries or infection		Genital injuries or infection	
	No other evidence that the child has experienced sexual abuse		Other evidence that the child has experienced sexual abuse	
	No fictitious illness or injuries to child reported		Fictitious illness or injuries to child reported	
	No significant level of anxiety or depression	**Mental health**	Protracted periods of anxiety or depression	
	Absence of delusions or persistent hallucinations		Firmly held delusions or persistent hallucinations	
	No major sleep problems		Major and protracted sleep disturbances	
	Absence of flashbacks of abusive or traumatic experiences		Flashbacks of abusive or traumatic experiences	
	Capacity to mentalize and appreciate feelings and point of view of others		Lack of capacity to metalize or appreciate feelings and point of view of others	

Education 3 2 1 0 -1 -2 -3				
	Satisfactory unfolding of cognitive and language skills	**Development of cognitive and language skills**	Significant delays and/or unevenness in cognitive and/or language skills	
	Satisfactory readiness for educational contexts; interest in learning	**Attitude to learning and work and adjustment to educational context**	Child not ready to participate in or cannot adjust to educational context	
	Accepts teaching; self-reinforced learning		Lack of interest in learning; rejects teaching; no self-motivation to learn	
	Satisfactory acquisition of educational skills and knowledge according to ability	**Educational progress**	Failure to acquire educational skills and/or knowledge at level appropriate to ability	
	No special educational needs	**Special educational needs**	Evidence of special educational needs	
	Has special educational needs but makes progress expected taking into account the nature of their specific educational difficulty		Failure to achieve at level expected for intelligence and specific education difficulty e.g: dyslexia	
Emotional and Behavioural Development 3 2 1 0 -1 -2 -3				
	Emotional states and levels of arousal well-regulated, appropriate responses to age and stage of development	**Regulation of emotional states relative to age and developmental stage**	Persistent or recurrent states of arousal, frustration, distress and disorganized emotions	
	Secure attachment behaviour towards caregivers and/or other salient adults	**Early attachment behaviour**	Markedly insecure or disorganized attachment behaviour towards caregivers or other salient adults	

	Capacity to concentrate and maintain attention; not overactive	**Concentration and level of activity**	Difficulties with attention and concentration; marked overactivity	
	Feelings clearly and appropriately expressed	**Expression of feelings and characteristic mood**	Expression of feelings lacking or inappropriate; pervasive negative mood	
	No persistent anxiety or depression		Persistent anxiety or depressed mood	
	Traumatic experiences resolved; no persistent post-traumatic symptoms	**Response to traumatic and stressful events**	Persistent unresolved traumatic symptoms	
	Positive emotional and behavioural adjustment and reasonable response to stressful events		Exaggerated or absent response to stressful events, mood difficulties, oppositional behaviour, aggression, self-harm, dangerous behaviour	
	Collaborative and pro-social; no or infrequent dangerous risk-taking behaviour	**Social behaviour** **Behavioural disorders are usually included here although they get double-coded under family and social relationships if that behaviour is evident in those relationships**	Severe or persistent uncooperative behaviour	
	No severe nor persistent aggressive behaviour, stealing		Aggressive behaviour or stealing	
	Shows sympathy and empathy		Lack of sympathetic and/or empathetic behaviour	

Identity 3 2 1 0 -1 -2 -3				
	Child has secure sense of self as an individual who belongs to a family	**Sense of self as individual in family**	Child does not have a secure sense of self as individual belonging to a family	
	Child is able to make choices, assert their views and need, and act as an individual at a developmentally appropriate level	**Individual choice and action**	Child unable to make choices, assert personal views or needs and cannot initiate action for self; 'omnipotent' self of self; over-assertive	
	Positive sense of self as valued and of value to others; confident in where belongs socially and culturally but preserving sense of identity	**Sense of self and others in social and cultural context**	Negative sense of self as unvalued or bad; unconfident or unhappy with where belongs socially or culturally; no sense of belonging or identity absorbed; no independent views or actions	
	Satisfactory sense of gender and/or sexual identity and comfortable with it	**Gender and/or sexual identity**	Unhappy with gender and/or sexual identity or uncertain of it	

Family and Social Relationships 3 2 1 0 -1 -2 -3				
	Child able to participate in a network of emotionally responsive, stable, affectionate relationships inside and outside the family	**Child's growing relationship with family and others**	Child has a network of disrupted, unstable relationships or relationships marked by enmeshment, or hostility, absence of warmth inside and outside the family	
	Child able to relate to, be responsive towards and show affection and empathy for others		Child withdrawn, hostile or unable to be responsive and empathic towards others in family	
	Child has a network of secure organized attachment figures	**Development of network of attachments**	Child has a network of insecure, disorganized or indiscriminate attachments	
	Collaborative relationships with Parents/carers, reasonable demands made by child; child protective towards and protected by siblings and peers, older and younger	**Relationships with Parents/carers, siblings and peers**	Exploitative, avoidant, over/under-dependent relationship with Parents/carers, unreasonable demands made by child; child fighting and/or rivalrous with siblings, abusive towards or abused by peers and siblings	
	Positive relationships with teachers and peers	**Relationships in school**	Negative relationships with teachers and peers	

	Child connected, responsive, independent, pro-social attitudes and relationships, respects diversity	**Attitude to family, social and cultural contexts**	Child isolated, dominating, controlling, dependent, antisocial attitudes and relationships, prejudiced	
Social Presentation **3 2 1 0 -1 -2 -3**				
	Awareness and capacity to present self-positively, with pride in appearance, dress, hygiene and behaviour, appropriate to age, gender and culture	**Understanding the need to pay attention to appearance, dress, behaviour and hygiene (as appropriate for their age, gender and culture)**	Lack of awareness or capacity to present self in positive light, with pride in appearance, dress, hygiene and behaviour, appropriate to age, gender and culture	
	Impairments adjusted to and managed. Copes with discrimination by others	**Adjustment and attitudes to impairment and discrimination by others**	Failure to adjust or manage impairment, child rejects impairment and/or diversity in self or others; child unable to cope with discrimination by others	
	Evidence of respect for family, cultural, religious and spiritual values and diversity in own social presentation	**Respect for family, cultural, religious and spiritual values and diversity**	Shows lack of respect for family, cultural, religious and spiritual values in self-presentation	

Self-care skills 3 2 1 0 -1 -2 -3				
	Positive self-care, emotional and communication skills unfolding in sequence of competencies leading to increasing independence within child's capacity	**Developing a capacity for independent living skills**	Poor self-care skills, uneven pattern of development of emotional and communication skills so that the child fails to achieve independence given their capacity	
	Positive capacity to problem-solve in family, school and community	**Developing a capacity to problem-solve in family and community contexts**	Failure to problem-solve in family, school or community; child helpless or over-confident	
	Appreciates contexts of danger and risk, realistic sense of safety and an ability to keep self safe, capacity for exploration	**Appreciation of risks and safety**	Failure to appreciate risks, over-anxious or puts self in danger	
Additional notes: e.g. missing information/summary of main strengths/summary of main difficulties				

Carers' Capacity to meet Needs				
		Domain Dimensions and Sub-dimensions		
Specific evidence relevant for this particular Child/Young Person **(with source/date/status – observed or inferred - of information)**	**Strengths** **(potential indicators)**		**Difficulties** **(potential indicators)**	**Specific evidence relevant for this particular Child/Young Person** **(with source/date/status – observed or inferred - of information)**
		Basic Care **3 2 1 0 -1 -2 -3**		
	Carers work well together to provide adequate, reasonably organized, effective basic care	**Carers' capacity to provide effective basic care**	Carers fail to provide adequate basic care. Carers divided and provide ineffective, inadequately organized basic care	
	Carers reasonably adaptable to child's changing needs, basic care consistent over time	**Adaptability to changing needs and consistency of care over time**	Carers fail to adapt to child's changing needs; basic care inconsistent over time	
	Carers able to place appropriate reliance on and support from extended family and community agencies to provide basic care	**Carers' ability to use extended family and community resources to provide basic care**	Carers place undue reliance on family and community or unable to use family or community resources to enable them to provide basic care	

Ensuring Safety 3 2 1 0 -1 -2 -3				
	Carers provide positive care-giving responses to care-seeking behaviour by child, evidence of establishment of secure attachments	**Establishment of secure attachments**	Unresponsive care-giving by carers or rejection of care-seeking behaviour by child, evidence of insecure or disorganized attachments	
	Carers have reasonable expectations of child in respect of protection and ensuring safety, appropriate handling, reliable care-giving and protection	**Carers' expectations of children and handling of protection issues**	Carers have inappropriate expectations in relation to protection and safety of child, unreliable, fragmented care-giving and handling of protection issues	
	Carers ensure adequate care and safety for children in home and environment	**Provision of safety in the home and in the environment (relative to risks and developmental stage)**	Carers fail to protect children from hazards in the home and environment	

	Carers protect children from individuals who present a risk to them	**Protection from individuals who present a risk to children**	Carers fail to protect children from individual(s) who present a risk to them in the home environment or elsewhere	
Emotional Warmth **3 2 1 0 -1 -2 -3**				
	Carers express feelings clearly with consistency, parental warmth, tolerance, receptiveness, attunement, empathy and understanding towards children and appropriate responses to children's feeling states	**Parental consistency, responsiveness, empathy and understanding of children's varying emotional states**	Overwhelming or absent expression of feelings by carers. Carers unreceptive, cold, critical or punitive towards children and lack of empathy, attunement and/or understanding, parental inconsistency in responses to children's feeling states	
	Carers valuing of child, positive emotional tone, calmness, atmosphere warm	**Carers valuing of children and carers' emotional tone**	Carers attacking, rejecting, scapegoating, devaluing, undermining towards children with negative emotional tone, negative. Parents/carers emotions predominate and atmosphere negative, chaotic and panicky	

	Carers supportive towards children, engaged and involved, respect child, maintain balance of dependence and independence	**Degree of carer support, engagement and participation and management of balance of dependence and independence**	Carers unresponsive, over-involved or under-involved with child, enmeshed with or ignore, exploit, disqualify, humiliate the child; Parents/carers promote either under-dependence or over-dependence of child	
Stimulation **3 2 1 0 -1 -2 -3**				
	Carers provide stimulation, praise and encouragement, responsive to child's learning needs	**Degree of carer stimulation and praise, encouragement and responsiveness to child's learning needs**	Little stimulation provided by carers for child's learning and social development; Carers cold, rejecting, undermining; critical atmosphere, unresponsive to child's learning needs	
	Carers provide clear communication, attentive listening, acknowledgement and responsiveness towards children	**Carers' ability to communicate with children and listen, acknowledge and respond to them**	Carers fail to acknowledge or listen to child. Carers controlling, directive, stifling towards children or ignore them; minimal interchange between Parents/carers and children	

	Carers provide challenging tasks and activities in home and social contexts and support learning and social development. Carers involved, sharing, focused and creative in relation to children's play, learning and social activities, provide encouragement, persistence and continuity	**Provision of opportunities for learning and social development and parental participation**	Carers provide few or inappropriate opportunities for learning and social development in family or social context, lack of parental involvement, focus or sharing in relation to children's play, learning or social activities, failure to provide encouragement or continuity	
	Child well-prepared and supported for and Parents/carers involved in educational contexts	**Preparation and support for child for educational contexts**	Poor preparation and support for attendance and involvement in educational contexts and Parents/carers not involved	
Guidance and boundaries **3 2 1 0 -1 -2 -3**				
	Carers provide positive and reflective guidance and behavioural management and adequate care, realistic expectations of children, appropriate use of reward and sanctions	**Guidance and behavioural management**	Absent or oppressive guidance and behavioural control, unrealistic expectations of children, inappropriate, punitiveness and use of sanctions and rewards	
	Carers hep to manage or distract child from frustration	**Helping children manage frustration**	Carers' intolerance or reinforcement of frustration or negative states in child	

	Carers provide flexible boundaries and rules, Parents/carers maintain structures and adult and child distinction	**Clarity and flexibility of boundaries, rules and expectations**	Carers set rigid boundaries, lack of boundaries or rules, over-protection or child expected to care for parent	
	Carers manage decision-making collaboratively in relation to providing guidance and boundaries for children, oppositional behaviours managed without undue conflict with child	**Management of conflict and oppositional behaviour**	Carers' provision of guidance and boundaries marked by frequent futile arguments with child, failure to resolve conflicts with or manage oppositional behaviour by child	
Stability **3 2 1 0 -1 -2 -3**				
	Carers ensure stability provided during development	**Degree of stability of care and 'parenting' during developmental and family life cycle**	Transient family structure, disruption, no adaptation to changes in family and social contexts	
	Carers maintain appropriate contact with key members of family and significant others despite separation (where appropriate)	**Maintaining contact with known family members**	Isolation of carers and children, contacts not sustained, or distorted	

	Carers maintain stable network for child/young person	**Stability of a network of important figures**	Unstable network	
	Carers help child/young person to develop social responsibility and a sense of their identity in family, cultural and social contexts	**Developing child's/young person's sense of social responsibility and family, cultural and social identity**	Carers expect child/young person to be inappropriately adult or treat them as much younger child. Carers fail to help their child to develop sense of their identity in family, cultural and social contexts	
	Carers maintain consistency and stability in the face of significantly stressful and potentially destabilizing events	**Managing stability in the face of adversity and major changes**	Child/young person exposed to variations of carer involvement and disruption in the face of stressful and destabilizing events	
Additional notes: e.g. missing information/summary of main concerns/summary of main strengths				

Family and Environmental Factors				
		Domain Dimensions and Sub-dimensions		
Specific evidence relevant for this particular Child/Young Person (with source/date of information)	**Strengths (potential indicators)**		**Difficulties (potential indicators)**	**Specific evidence relevant for this particular Child/Young Person (with source/date of information**
Family history and family functioning **3 2 1 0 -1 -2 -3**				
	Stable household, maintenance of significant relationships despite separation and change, family and social support	**Stability of the household**	Unstable changing household, relationships disrupted, not maintained or destabilized by extended family and social context	
	Stable childhood and protected from major losses or disruption; traumatic events processed, so autonomous functioning achieved	**Parents/carers' childhood**	Unstable family environment in childhood; exposure to violence, abuse, rejection, loss, illness; traumatic events unprocessed and attachments dismissive or preoccupied or entangled	
	Recognition and acknowledgement of significant past events, relationships and circumstances and appropriate 'coming to terms' with traumatic or distressing experiences	**Impact of family history**	Unresolved past significant events, relationships or circumstances having major impact on current emotional states and family functioning	

	Adequate functioning, reasonable health, acknowledgement and management of physical and mental illness or impairments, or personality difficulties, appropriate management of drugs and alcohol	**Individual functioning of the Parents/carers during development and currently, physical and mental health, management of impairments, personality difficulties, criminality, substance misuse**	Negative functioning with regard to physical and mental health, impairments and disability, personality problems, criminal activities, substance misuse	
	Family members use appropriate treatment; community support is used	**Family's use of treatment and community support**	Family members fail to engage in treatment and social support or reject appropriate services	
	Couple supportive, respectful, confiding, balance of assertiveness and ability to compromise	**Couple relationship**	Couple isolated, unsupportive, unconfiding, unbalanced, dominant or submissive pattern, destructive, at war	

	Violent partner ceases domestic violence, acknowledges responsibility, aware of consequences for partner and children; collaborative, sharing, motivation to change	**Domestic violence issues**	Violent partner denies or legitimizes violence, continues to be violent, fails to take responsibility or blames victim, impact on children ignored, uncollaborative, resistance to intervention	
	Reasonably flexible yet stable family organization meeting individual needs and adaptable to changing circumstances and life cycle stages	**Family organization to meet family members' basic need and respond to changing needs and stressful events over life cycle**	Family rigid, chaotic, disrupted by stress, minimal adaptation to changing individual needs, inconsistent provision of care for family members	
	Family members have reasonable strengths in ability to communicate, listen and respond to each other, to express and respond to feelings appropriately to maintain positive family alliances and a sense of individual and family identity over time	**Nature and stability of family functioning**	Family members have considerable difficulties in communicating clearly and listening to one another and responding appropriately and expressing and responding to emotions positively; family alliances divide or disempower some family members, negative sense of individual and family identity	

Wider family **3 2 1 0 -1 -2 -3**				
	Network of supportive family members; support available when needed with disability, illness and times of stress; care-giving provided and practical and emotional support	**Relationship with the wider family**	Wider family intrusive, over-involved, abandoning or ineffective; failure to provide care-giving or practical or emotional support when needed with disability, illness or times of stress	
	Protection from individuals presenting risks to family members provided	**Protection of family members from individuals who present a risk to them**	Failure to protect from individuals who present risks to family members	
Housing **3 2 1 0 -1 -2 -3**				
	Stable housing availability, suitable for needs of child and other family members, maintained by owner or family, child and parent friendly, adapted for disability	**Availability, quality, maintenance and adaptations**	Unstable housing circumstances, unsuitable for needs of child and other family members, poorly maintained by owner or family, poorly adapted for children and/or disability	
Employment **3 2 1 0 -1 -2 -3**				
	Work available, working patterns consistent with supporting family life and providing adequate consistent care	**Nature and pattern of work**	Inconsistency of work availability, unpredictability of working patterns, work patterns fail to support and provide for family life	

	Balance between work hours or pattern and child's needs for care or contact and substitute care arrangements adequate	**Balance of work and parenting**	Hours or work pattern undermines family life, or interferes with child's needs for care or contact and substitute care arrangements inadequate	
	Unemployment managed in way which does not undermine family life	**Issues associated with unemployment**	Unemployment disrupts and undermines family life	
	Work undertaken by young people or associated responsibilities appropriate	**Child's experience of work**	Undue pressure on children and young people to work or take responsibility for care due to patents' work patterns	
Income **3 2 1 0 -1 -2 -3**				
	Sustained and adequate income, entitlements claimed and utilized	**Availability of income**	Income inadequate, inconsistent or unsustained leading to privation; entitlements not claimed or used inappropriately	
	Primary focus for use of available resources is on child and family needs	**Use of available resources**	Available resources used on adult needs, children and family needs neglected	

	Children buffered from variations in income		Children not protected from impact of variations in income	
	Resources well-managed and adequate standard of care maintained within income		Available resources poorly managed and inadequate standard of care maintained	
Family's social integration **3 2 1 0 -1 -2 -3**				
	Family accepted and integrated into neighbourhood and wider community	**Integration of children and Parents/carers into local neighbourhood and community contexts**	Children and family isolated, not accepted by or integrated into neighbourhood or wider community	
	Family uses available resources, educational and social opportunities to support development of children's sense of identity, social skills, independence and sense of responsibility	**Family use of available resources, social and educational opportunities to develop social skills, identity and independence of children**	Family does not use available resources and opportunities for development of child's identity, social skills, independence and sense of responsibility	
	Acceptance and valuing of diversity; discrimination actively discouraged	**Community attitude to diversity**	Climate of threat, discrimination, absence of tolerance, antisocial influence in neighbourhood and wider community	

	Peer group and friendship networks available and used by children and adults in family	**Availability and use of peer group and friendship networks**	Peer group and friendship networks unavailable or not used by children and adults in family	
Community resources **3 2 1 0 -1 -2 -3**				
	Availability of accessible community resources and facilities to fit needs of child and other family members	**Community resources and facilities**	Absent or inadequate or inaccessible community resources and facilities which do not fir needs of the child and other family members	
	Threshold for services reasonable; recognition by services of needs related to child living in context of family violence	**Access to universal services**	High threshold for services; little or no recognition by services of needs related to child living in context of family violence	
	Specialist resources available and accessible	**Accessibility and availability of specialist resources and services**	Lack of availability of or access to specialist resources and services	
	Recognition by services of needs related to child living in context of family violence		Little recognition by services of needs related to child living in context of family violence	

	Good communication between services and family		Poor communication between services and family	
Additional notes: e.g. missing information/summary of main concerns/summary of main strengths				

Adapted from: ‘Safeguarding Children Living with Trauma and Family Violence’ A.Bentovim et al (2009) JKP (Ch. 5).
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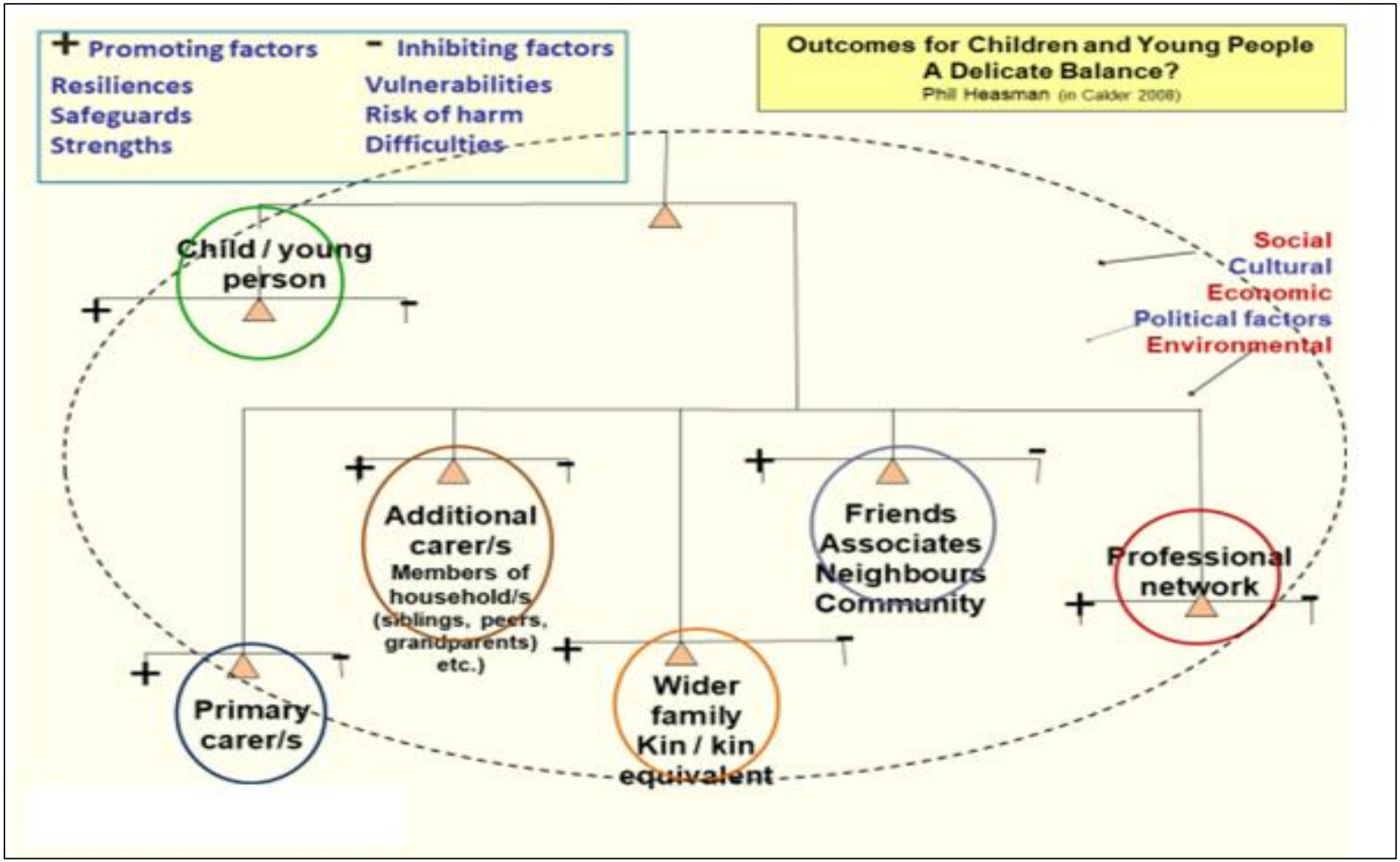
Care-needs profile

Area of care-need	Required from the carer	Link to aspect/s of child or young person's health and development*
Basic care		
Ensuring safety		
Emotional warmth		



The professional component: domains and dimensions – a model to assist analysis (P. Heasman in Calder et al; RHP, 2008)

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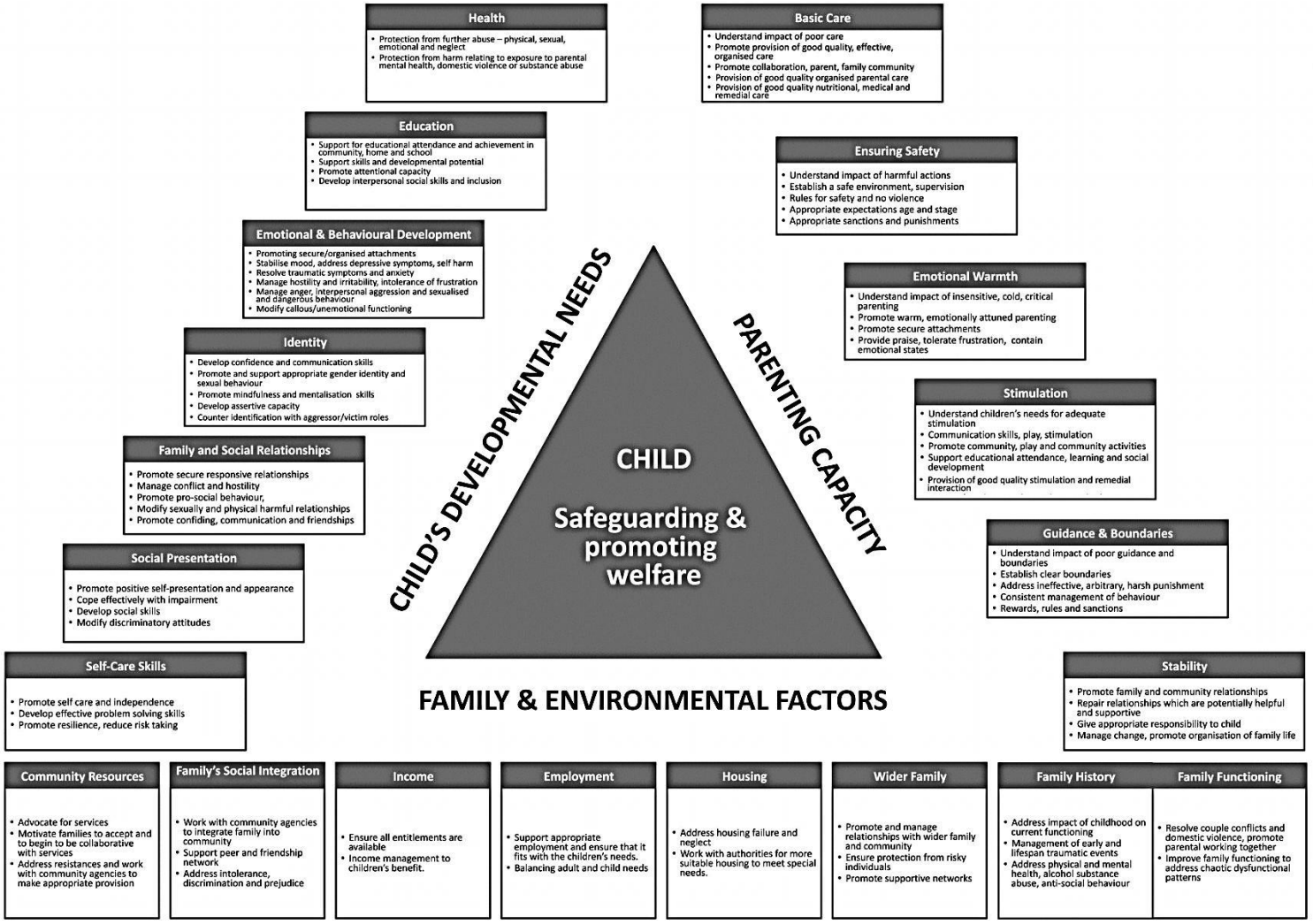
Intervention Goals to Prevent Future Harm and Impairment



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Reviewing the workshop
What has been the main learning today?
How does that fit with my personal learning objectives?
Commitment to action – I can and I will.

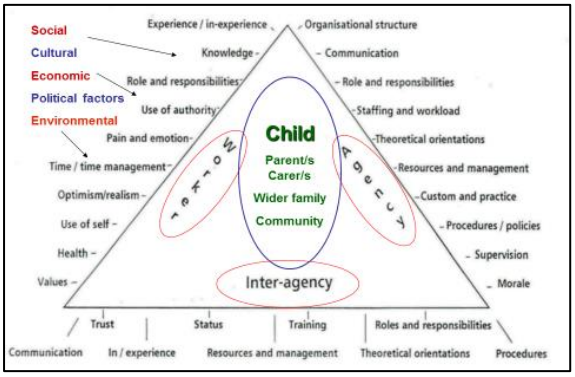
Week 5: Transformational Practice

Essential Tasks/Activities

1) Use the 'professional component' model to identify areas for further development of your own practice, your agency/service, multi-professional practice in relation to achieving and sustaining permanence for the children/young adults with whom you work.

2) Consider and answer the questions below about how you will continue to put the learning associated with this whole programme into practice.

To assist with task 1)



Areas for further development in relation to achieving and sustaining permanence:

Notes:

a) Your own practice:

b) The practice of your team, service, organisation or agency:

c) Inter and multi-professional/agency practice:

To assist with task 2)

How can I apply what I have learned in my practice? What and who could support and help me in this?

Please identify some specific aspects of the learning and material covered and considered during this module - that you can *use directly now to inform and apply in practice in your current work* to help sustain permanence for a child/young adult, or young people.

Notes – what I plan to apply/continue to apply in practice:

i) What insights, ideas, research/theory; practice tools or resources; skills; applied values/approaches?

ii) Context of work to apply aspects (practice resources, knowledge, skills etc.):

a) With whom?

b) Why?

c) How?/method

Week 6: Appreciative enquiry

Essential Tasks/Activities

1) Notice how you have contributed to the effectiveness of work with children/young adults, with parents/carers and with colleagues in aiming to achieve permanence for children/young adults.
2) Prepare a brief reflective account (500 words) about what has happened since you put what you have learned into practice, using the questions below.

Please note that you are asked to include work in relation to task 1) & 2) in the programme portfolio (see guidance and portfolio requirements).

To assist with tasks 1 & 2:

What happens/happened when I apply what I have learned – in practice?

Notes on the work that you have undertaken using the headings below:

i) Strengths, difficulties or challenges relating to the use of: the insights, ideas, research/theory, practice tools or resources, skills, applied values/approaches?

ii) Impact/outcome:

iii) Service users' comments or views:

iv) Learning points/action points for future practice etc…

And for final action and reflection….

How have I developed in my work to achieve and sustain permanence, including permanent care arrangements and placements for children/young adults?

Notes:

Week 7: 'Practice and policy briefing' and Portfolio – final work

Essential Tasks/Activities

1) Complete the work in relation to your 'practice and policy briefing' and draw up plans for sharing and implementing the ideas to enhance practice in achieving permanence for children/young adults.

2) Complete the portfolio requirements, reflecting on and drawing from the four parts of the workbook that you have used to record your development throughout the programme. Present and discuss the portfolio with your line manager/supervisor as part of the process of verifying your completion of the programme.