Mediation in Early Intervention Work
A UK Example

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The Case For Early (earlier?) Intervention

- Preventing escalation to specialist services – cost avoidance, outcome impact, resource implications
- Allowing intervention before crisis point is reached
- Engaging with families on a voluntary basis to start ‘where they are’
- Prevent passing families on – counter productive – trust relationships damaged, engagement effected, renegotiating work
Where Does E.I sit?

The Essex Effective Support Windscreen

Multi Agency Guidance: Working in partnership to help children and families improve their lives

Universal Services

Additional Services

Intensive Services

Specialist Services

IF UNSURE CONSULT

All partners working with children, young people and their families will offer support as soon as we are aware of any additional needs. We will always seek to work together to provide support to children, young people and their families at the lowest level possible in accord with their needs.
Skills Base in E.I

• Motivational Interviewing
• Mediation and RJ skills inc. Family Group Conferencing / Family Meetings
• Safety and Contingency Planning
• Biederman’s Theory (DA work)
• Solution Focussed work (Inc. Brief model)
• Systemic approaches inc. cycles of abuse / power and control, positioning theory
• NVR work
Ethos and Culture

- Assertion and tenacity in engagement
- Respecting the starting point of families and also of partners in their work
- Whole family approach which is solutions focused and strengths based
- Flexible approach to working alongside the family and at times and in places that best meet family needs
Ethos and Culture

• Creativity and innovation in work, thinking ‘outside the box’ to promote solutions
• Safeguarding of children and the protection of vulnerable adults is paramount
• Sharing all documents with family members at all stages
• Full, informed consent to become involved is present and regularly reviewed
Family Assessment

• Relationship based
• Use of tools – genograms, scaling tools e.g. outcome star, petals tool
• Agency info – consent with partners, no hierarchy, all welcome at family behest
• Strengths based with challenges recognised
• Success identified alongside contingency planning
## Shared Family Assessment

### Our Family Journey

Things we might want to consider about our journey, family and relationships, housing, finances, employment and education, how we get on with our community, our boundaries and behaviour, any substance misuse issues, health (physical and emotional)

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>Our family story - what has happened in the past and what is happening now?</td>
<td></td>
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<tr>
<td>Key events in our family’s life - how have they affected where we are now?</td>
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<tr>
<td>What is our family good at?</td>
<td></td>
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<tr>
<td>What have we tried in the past, what worked, what didn’t and who helped us?</td>
<td></td>
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<tr>
<td>Safety and Risk - Is there anything that means that there is a risk of harm to ourselves or others, including family members, staff or the wider community?</td>
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Carla and Tim ......

• Carla and Tim, Liam (5) and Bobby (3)
• Together since 17 and 19 years of age
• 3 years to date of police recording ‘domestic incidents’
• Under 5’s Health Visitor worried over Tim's drinking
• Following another incident, Carla and the children temporarily moved to a refuge after encouragement from the Children’s centre (under 5s) and Women’s Aid (DA service)
• 12 month Order for no contact and an exclusion from home for Tim for 12 months
Carla and Tim ......

• Tim forced to move to community housing for adults with MH needs and was receiving therapy
• Tim was drinking heavily (again)
• Carla had a number of health issues inc. Chrohn’s and anxiety issues
• Carla has no contact with her own family
Quick Exercise – first thoughts?

What do you think you would have identified as the family’s needs through the Shared Family Assessment (SFA) process?
Needs which were identified

• Carla was struggling to manage the children’s behaviour and this was fuelling her anxiety attacks
• Carla was feeling isolated with no family support and felt she did not want to burden friends with her issues
• Carla was feeling ‘let down’ by the Childrens Centre and WA who pushed her into the court order and then “left her to it” (her words)
Needs which were identified cont..

- Carla was really missing Tim and wanted him to come home once the order was over – she wanted him back ‘now’
- Both of the children were having limited contact with Tim but without support this was proving hard to sustain
Thinking about those needs.....

What work would you seek to complete with the family?

And / or with individual family members?
What really happened ......

• Identification that Tim and Carla would come back together, whatever happened, post the Order – they were adamant
• Neither partner knew what this would look like or the practicality of it happening successfully and safely
• Carla felt Tim needed help as well as her so the worker gained consent from Tim for a worker to be allocated to him as well
What really happened ......

• The 2 workers met with ‘their’ half of the partnership to hear what they wanted life to look like and when

• They then worked together to devise a timeline and moving forward plan which included keeping Carla and the children safe

• The workers met regularly to review progress and to check out how the other half of the partnership was feeling about things – shuttle work
What really happened .......Tim

• Timeline and genogram completed to help Tim ‘see’ his life journey and the important people in it for him

• Tim invited his EI worker into his MH sessions so that all work integrated and there was no therapy conflict

• Worker used Motivational Interviewing to look at and work towards ‘what life will look like back together as family’
What really happened .......Tim

• 1-2-1 sessions on managing conflict and anger – strengths based and signs of safety utilised

• Support play & contact sessions with the children, with Carla’s worker present to feedback what she wanted Tim to be like with the children going forwards and to take back positive views of the sessions

• Development plan of gradual reintegration back into the family
What really happened ……Carla

• Timeline and genogram completed to help Carla ‘see’ her life journey and the important people in it for her

• Working with Carla and the children around parenting strategies and routines – bedtimes identified by Tim as a trigger and shared with his own worker who fed back

• Use of Power and Control wheels to help Carla differentiate between healthy and abusive relationships in her life and past
What really happened .......Carla

• Supported to attend local community groups to wider circles of support

• Supported with attending hospital appointments to manage her own health needs, with children being looked after by Tim – Tim's worker feeding back and gradually withdrawing

• 1-2-1 sessions on managing conflict and anger – strengths based and signs of safety utilised

• Worker used Motivational Interviewing to look at and work towards ‘what life will look like back together as family’
Themes – worked separately but in tandem

• Day to day life as a family
• Changes in 12 months living apart
• Co-parenting of the children and consistency
• Maintaining positive changes made
• Wider support
• Moving on
Back Together

- Gradual reintegration over four weeks – workers supported challenges posed
- Joint work with the couple and their individual workers
- Family dynamics, safety planning, positive activities, access to longer term community support
- 1-2-1 with own workers continued
Outcomes

• Carla is managing her anxiety attacks – which have decreased – better
• Children’s behaviour improved and continued to improve once Tim returned home – dual planning/work with parents helped to mitigate the impact of this for the children
• Parental communication is improved – less argument and no abuse
• Family are safely together with access to community support
• School report positive behaviours between all family members
• No return to services