

Issued 7 April 2020, updated 13 July 2020

General Principles

- Our Resilient Families relational and systemic way of working will still apply throughout COVID, and we will continue to use Resilient Families tools and methods wherever we can.
- Assessment and plan templates will not change during COVID, accepting these may need to be populated differently during COVID.
- During COVID, we will continue to ensure that our assessments and plans are whole-family-centred, goal orientated, and reflect the reason/s for referral.
- Whilst we will make sure our assessments and plans during COVID have identified, (as a minimum) whether the family has the basic things they need to survive and the strategies they need to cope, we will stay focussed on the reason/s for the referral to Family Early Help and continue to work with the family to address those issues. We will update plans as needs change.
- The core principles and skills of Resilient Families family practice apply as much during this crisis as at any other time (acknowledging that some may more challenging when our work is partially or fully remote):

Core Principles of Purposeful Practice in Assessments and Plans	
<ul style="list-style-type: none"> • Curiosity 	<ul style="list-style-type: none"> • Relational, compassionate practice, using the relationship to help create the conditions for change, and contracting and re-contracting
<ul style="list-style-type: none"> • Mentalizing and reflecting 	<ul style="list-style-type: none"> • Using creative techniques through direct work and observations to make sense of the physical and emotional world of the child/ren, parent/s, and caregivers
<ul style="list-style-type: none"> • Drawing out, and building on, strengths 	<ul style="list-style-type: none"> • Thinking systemically and looking broadly at the systems the family are part of (including extra-familial systems and networks outside the family home)
<ul style="list-style-type: none"> • Exploring history for each family member and its impact on today ("the why now" question) 	<ul style="list-style-type: none"> • Exploring ethnic and cultural background, the impacts of structural inequity and racism, and examining our own constructs, biases and assumptions
<ul style="list-style-type: none"> • Considering the role of extended family, friends and community in supporting this family and help get them where they want to be 	<ul style="list-style-type: none"> • Triangulating evidence from various sources, drawing on the whole network around a family including extended family, friends, community and other professionals

<ul style="list-style-type: none"> • Critically analysing what we learning during assessment to formulate a hypothesis (listening, understanding, making sense of) 	<ul style="list-style-type: none"> • Co-producing a plan with the family, with SMARTER goals that the family feel reflect where they want to get to
<ul style="list-style-type: none"> • Quick wins, especially to aim to get basic needs met (bottom rung of Maslow) 	<ul style="list-style-type: none"> • Acknowledging grey areas and unknowns, and being clear on what we will do to discover more

- We will start where a family is at today, being mindful of the potential impact of COVID on each family member.
- We will continue to identify family strengths and build on these as the foundation of our work with families.
- We will continue to consider risks, concerns and challenges to safety, welfare and resilience, using threshold documents and risk assessments as usual.
- We will continue to identify the hopes, feelings and wishes of each family member to build our assessments and plans.
- We will continue to work with, and be part of, the family's helping network - including friends, wider family, community organisations, community itself and other professionals - as we build our assessments and plans
- We will continue to address and consider the impact of poverty, oppression, and structural inequity on families, and take steps through the assessments and plans to alleviate these impacts as much as possible.
- We will continue to use quick wins, short term immediate goals and longer term goals, accepting that in some cases longer term goals might be paused or re-evaluated depending on a family's unique circumstances and experience of the COVID crisis.

Starting work with a family during COVID

- Being mindful of the potential impacts of COVID on the basic essentials of family life (bottom rung of Maslow), the Family Resilience Framework 'basics' and 'coping' sections may be helpful to help frame conversations with new families to make sure they have the basics they need to survive (food, shelter, enough money to pay essential bills etc), and the strategies and resources they need to cope with the immediate practical or emotional effects of COVID. This can be used alongside other tools and methods.

The basics and coping needs may affect some but not all families, and you should stay mindful of, and focussed on, the reason/s for the referral to Family Early Help throughout your exploration work as you would normally do.

- Staying mindful of the reason/s for the referral, you can continue to explore how to best support the family to go further and deeper into the usual exploration phase of the assessment process, and you should use your professional judgement in your conversations with families. Your manager will continue to support you with this in your supervisions and through case direction.
- Direct work with each child in the family should be undertaken (via phone or video if the family has opted for virtual visits only) to enable each family member to have their voice heard throughout assessment and planning stages. The Child Resilience Framework and the range of direct work tools on the Guidebook here <https://ascpractice.camden.gov.uk/early-help-guide/family-early-help-covid-guidebook/fscf-procedures-during-covid/remote-direct-work-kit-bag/#main> may assist with this, alongside your own preferred direct work methods.
- We should continue to explore the family's history with them and the impact of past events that help us make sense of their situation today, but will accept that for some families their immediate needs during COVID may make this aspect of assessment more challenging. For other families it will not be more challenging.

It may also be more challenging to hold open conversations with parents whilst they are at home with the children, and to build the relationship virtually. We will do our best to achieve this.

We will be led by each individual family and apply our professional judgement. We will explore this in our supervisions with our managers who will provide case support and direction as usual. We will use our critical analysis skills, and provide a rationale for our thinking and our decision making in our case notes.

- Risks and concerns regarding the safety and welfare of the children should be identified as usual through the exploration phase, recorded as usual in the assessment and plan, and escalated to our managers as needed.
- We will continue to liaise with people in the family's helping network - including friends, wider family, community organisations and other professionals - during the assessment phase as much as possible, and include them in the plan as much as possible.
- Our assessments and plans will be co-produced with the family; they will reflect the family's hopes, dreams and wishes for the future, and describe achievable goals, owned by the family, that support them to get where they want to be.
- The goals we agree with families and their helping network should continue to be SMARTER with clarity about who is doing what and by when.
- Assessments and plans will be signed off by managers in the usual way.

Ongoing Work with families during COVID

- Where we have been working with a family for some time and an assessment and plan has already been done, we will re-contract with the family to establish what help they would find most useful at this moment, and what goals they want to work towards.
- We will update plans with new, more immediate goals if and where necessary. We will agree with the family which goals from the current plan might be paused and which might continue during COVID. However, we will stay mindful of, and focussed on, the reason/s for the referral at all times, and their associated risks.
- We will use our critical analysis skills and provide a rationale for our decision making in our case notes and updated plans. We will not wait for a review stage to do this if a delay would be unhelpful or detrimental to the family.
- Amendments to plans will be signed off by managers and casenoted in the usual way.