

One Adoption West Yorkshire

MULTIDISCIPLINARY TEAM
QUARTERLY REPORT
Q2 2023-2024

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TEAM



One
Adoption
Agency
WEST YORKSHIRE



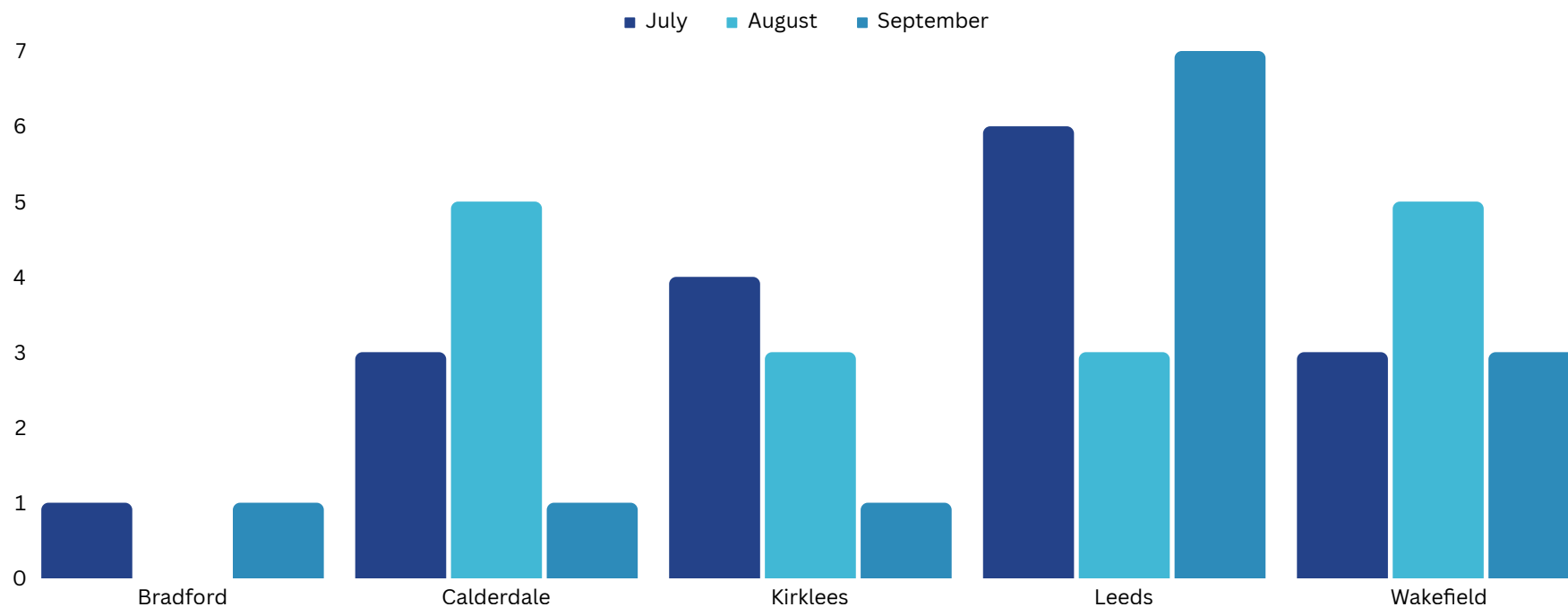
SERVICE PROVIDED

Enquiries

The Multi-Disciplinary Team (MDT) welcome referrals from One Adoption West Yorkshire (OAWY) workers where they feel MDT support would help with their work with a family.

From 1st July, 2023 to 30th September 2023 the MDT have received **46** enquires to MDT for support for OAWY Social Workers and families.

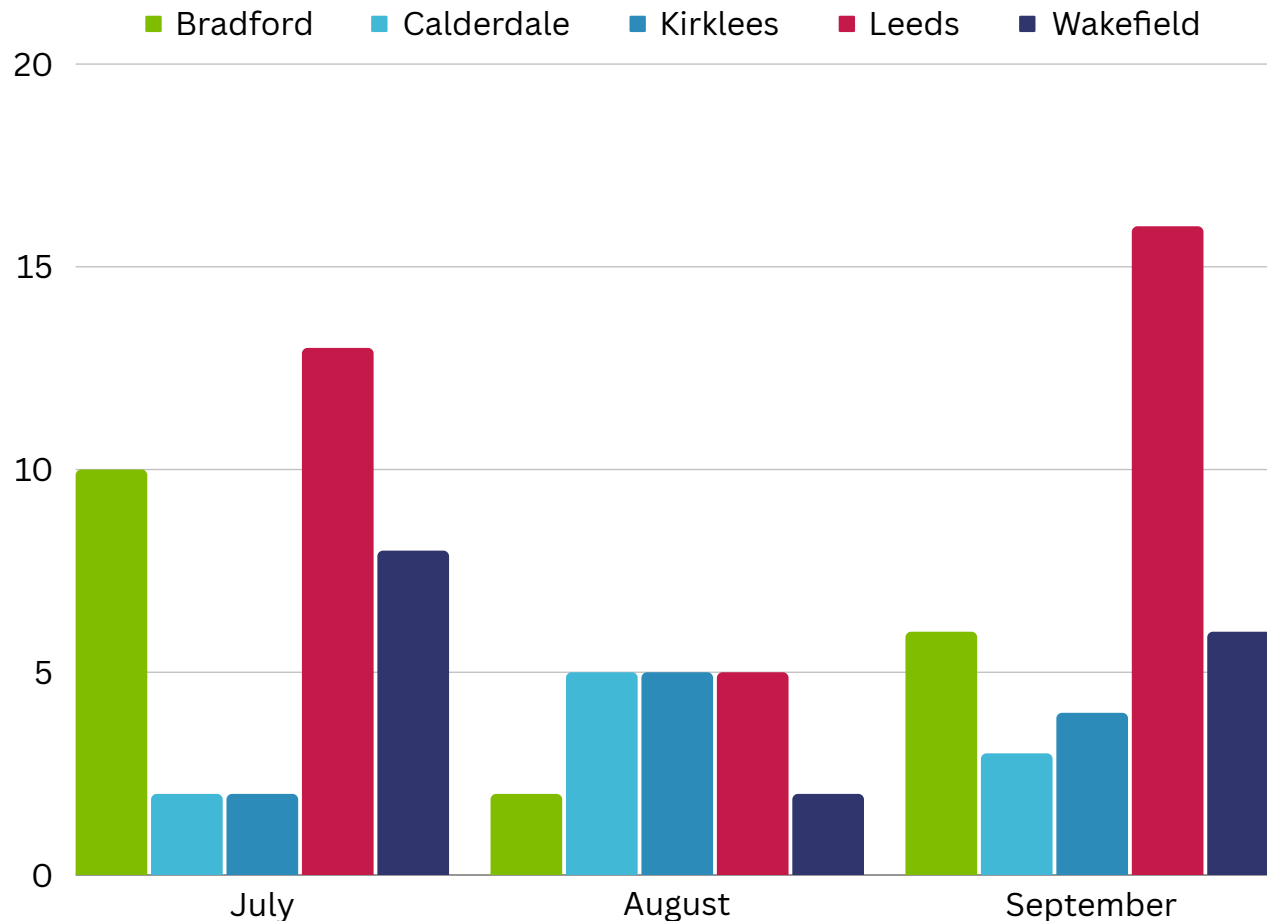
No. of MDT enquiries by LA



Consultations

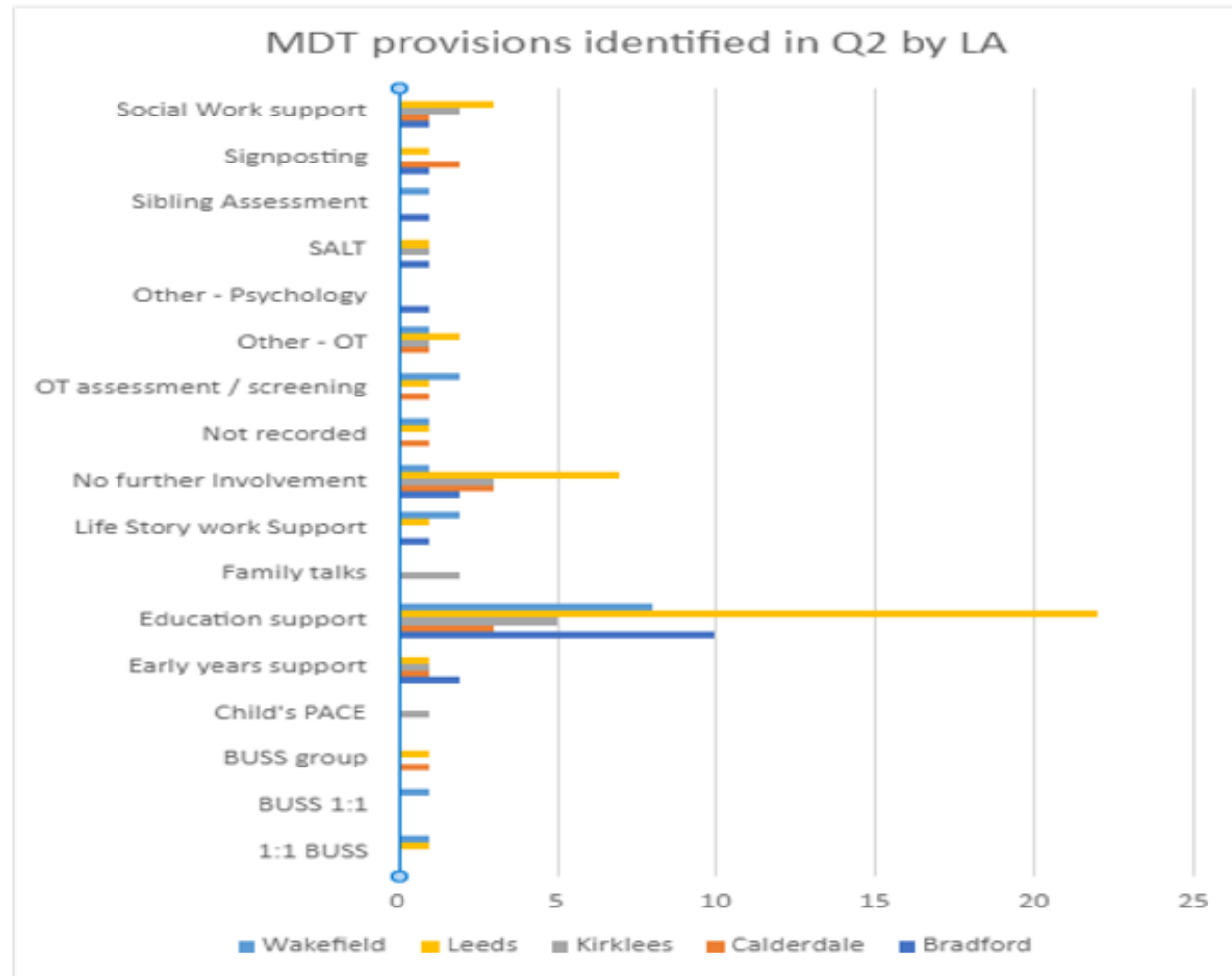
The support offered by the MDT includes a variety of 'one off support,' including formal consultations with families, drop-in consultations, informal support conversations with social workers as well as an education and life story helpline.

89 consultations were delivered this quarter.



Provisions

In addition to the one-off support offer, the team offer several types of longer-term support. During this quarter **110** sessions of support were delivered. The services include assessments, therapeutic interventions, social worker supervision and support.



IMPACT

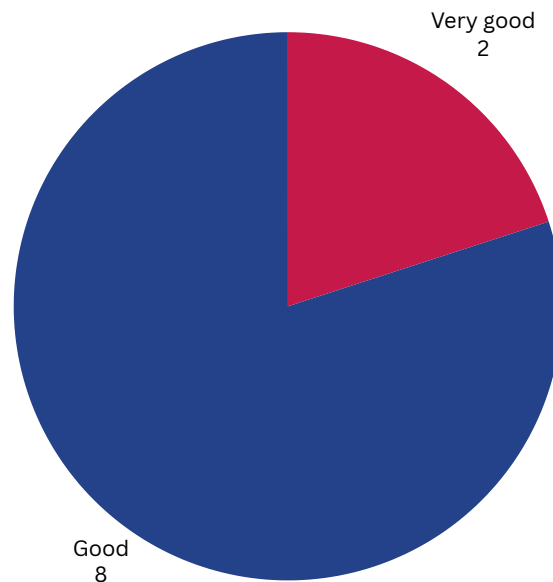
The MDT has a robust service evaluation plan utilising standardised outcome measures to measure interventions prior to the work and again at the end, as well as a catalogue of quick surveys which capture feedback in the below areas:

Families' access to, and experience of services is improved

In quarter two, all families reported that their experience of the MDT service was either 'very good' or 'good' (scales rate from very good to poor).

Most families also stated that the MDT fully addressed their reasons for attending (rated fully to not at all)

"Overall how would you rate the MDT service?"



Adoptive families tell us that the quality of life of their adopted child/ren and family has improved

The MDT offers various interventions to help improve the quality of life of their adopted children and improve family life overall. Children who have experienced early adversity often have difficulties with their sensorimotor processing systems which then causes difficulties with everyday life at home and school. To support this the MDT offer a BUSS (Building Underdeveloped Sensorimotor Systems) one-to-one intervention.

Goal based outcomes are administered pre, mid and post interventions. These outcomes show a marked improvement in children's sensorimotor processing with a score of **4.3 increasing to 8 (out of 10)** who access this provision.

Qualitative feedback from parents included:

'Excellent service with very nurturing and encouraging staff. Xxx was brilliant with our daughter, and we could see the progress slowly taking shape. Our daughter's confidence grew week by week'

That children and young people's emotional and mental health is improved

The MDT does not currently use outcome measures to measure emotional and mental health, however increasing parents' confidence, improving the child/ parent relationship and child's responsiveness to parenting, as evidenced in our outcomes, would help improve attachment relationships, increase resilience in children and reduce risk of poor mental and emotional health.



That parents have more confidence and more resilient in parenting their children

The MDT offer families 'Family Talks' which is a DDP (Dyadic Developmental Psychotherapy) informed space for families and an MDT worker to help them at varying levels across their adoption journey. This can be a space to process grief, work through blocked care, develop therapeutic skills or help parents with tricky family dynamics. The aim is to build parents' confidence and resilience.

The MDT use Goal Based Outcomes (GBOs) to measure success with Family Talks. **GBO's showed an improvement from 3 to 8 (out of 10)** The 'thinking about your child questionnaire' was also used to measure change. **This score improved from 51 to 64.**

The MDT deliver training to parents on education issues, Closer in Play and Life Story. Surveys were sent out following the training.

This quarter we delivered training to parents on therapeutic parenting. Introduction to therapeutic parenting is our training which offers an introduction to attachment, brain development and therapeutic parenting for adoptive parents. All participants, rated the course very good or good. **Parents scored increase in knowledge at 4.1 (5 being highest) and 4 for confidence (5 being the highest) after attending the training.**

There is a reduction in the number of adoption breakdowns and disruptions

This quarter, six children/sibling groups were referred to the MDT where the families have been considered at risk of breakdown and the MDT have offered support. **Out of the six families none have returned to local authority care.**



There is less demand for intensive assessment and treatment services

The MDT has received **46** referrals this quarter, which would have been passed to mainstream services for assessment and support. **110** sessions of early intervention therapeutic sessions have also been delivered.

The education outcomes of the adopted children improve, and the number of school exclusions decrease

Our education specialist offers attachment and trauma training to schools across West Yorkshire. With a better understanding of the needs of adopted children and young people and how to meet their educational and emotional needs within schools, their academic attainment will improve as well as exclusions decreasing. This quarter, **10** schools were trained across West Yorkshire.

Teachers reported an increase in understanding of attachment and trauma knowledge after training with **the average score being 4 (out of 10) prior to training 9.5 (out of 10) following the training.** They also stated that they would be less likely to exclude an adopted child now, due to an increase in their knowledge around attachment and trauma.

That professionals working with children are skilled up in understanding and responding appropriately with families experiencing difficulties

Training: This quarter the MDT has delivered life story training for professionals. All professionals scored the course 'very good' and **overall scores for increase in knowledge were 4.5 (out of 5) and increase in confidence was 4.5.**

"I wanted to find out what life story work was so I would be able to discuss it further with my adopters, I feel confident I would be able to do this now."

"It has boosted my confidence when talking to parents about this area"



Consultations: Professionals attending consultations and drop-ins, rated them all 'very good' or 'good'. **They scored their knowledge after the interventions as 4.4 and confidence as 5 (out of 5).**

"It was very good to have space to properly discuss and think about my young person and to try and get some clarity in my own head as to what may be of benefit for him. The use of questions helped me in this as I was really unsure as to what the right approach/options for him was."

'Really helpful to have a reflective space to think about supporting a family where I had become 'stuck'. A suggestion was made which I would not have considered due to lack of knowledge about available options.'

'The service has been a huge support to my work. It has really helped me think about things I wouldn't have considered and also has continually been child focussed. The multi-agency approach is also really helpful when bringing specific issues.'

"I have accessed a consultation for a complex transition period for a sibling group. This resulted in being allocated specific reflective space for the professionals as required. The whole process is currently running fairly smoothly, and this is down to the high level of support in place with the MDT reflective space as part of this. There are always 'nuggets' of learning to take away once we have reflected. Thank you, MDT!"



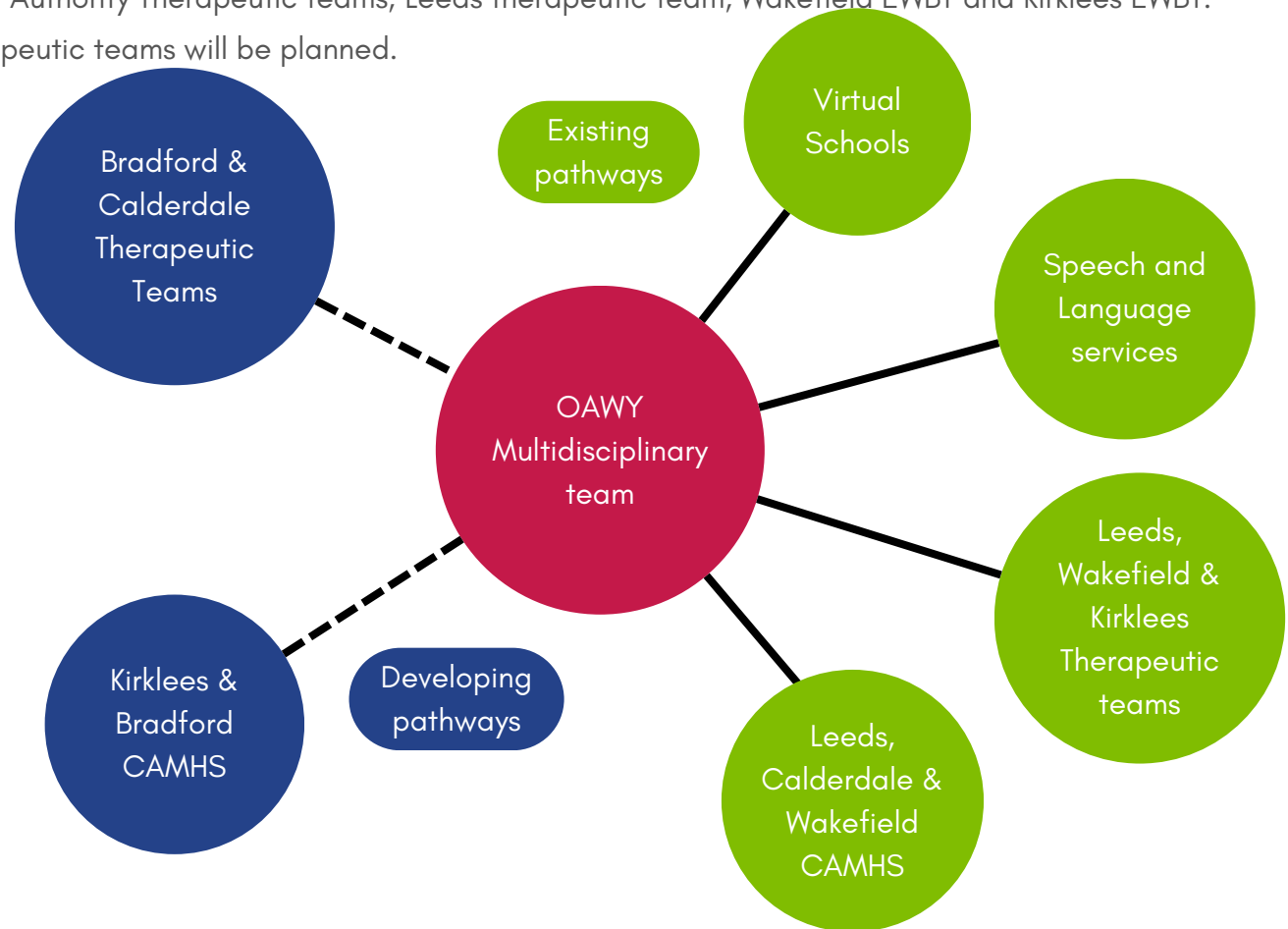
New trauma and neglect informed evidence-based support and care pathways are created

- Pathways exist between Virtual Schools and the MDT and MDT SALT (Speech and Language Therapist) and mainstream SALT services.
- Agreement already exists between Calderdale CAMHS (Child and Adolescent Mental Health Services), Leeds CAMHS and Wakefield CAMHS.
- Meetings with Kirklees and Bradford CAMHS are planned.
- Links have been made between the Local Authority Therapeutic teams; Leeds therapeutic team, Wakefield EWBT and Kirklees EWBT.
- Links with Bradford and Calderdale therapeutic teams will be planned.

Are we keeping this in?

Pathways between OAWY MDT and wider therapeutic services are important for our families, to ensure seamless services, reduce duplication and support early intervention.

The MDT are working hard to develop pathways and working agreements across LA and NHS therapeutic services to support our work and our families.



Case Example

Background information

A 10 year old boy was referred to MDT by the OAWY social worker due to concerns that the ASF private provider may not be meeting the needs of this family.

The adoptive placement is at risk of disruption due to high levels of child to parent violence and parents struggling to continue to parent their child.

There are concerns regarding the suitability of the current specialist education placement.

There are longstanding queries about possible autism/ ADHD which have not been addressed or assessed. There is a sense that the child's needs are wider in nature than developmental trauma. Two previous referrals to local CAMHS services; first time was just into lockdown and was made by parents requesting help (not specific to an ASD assessment). Parents recall being told their child was 'too complex'. The second time was via the GP requesting help and assessment. They received a generic letter back refusing the referral with no name or number for anyone to contact to discuss this.

There have been gaps in therapeutic support by the private provider due to insufficient funding due to the high cost of the private provider. This has meant that the family have had to wait for match-funding to be agreed to fund the therapy. This has had an impact on consistent therapeutic support.

MDT involvement

MDT supported the OAWY social worker with their match-funding application. The MDT met with the social worker, parents and the private provider and reviewed the current therapeutic intervention. The provider ensured that their support will initially be building resilience and confidence in parenting, before focussing on dyadic work. This was deemed as appropriate and parents were keen for this support to continue as they were in crisis. The private provider's focus was trauma however it was agreed with the private provider that we needed to look wider than attachment and trauma and agreed for MDT to undertake an ASD screen. The social worker allocated to the case was NVR trained and experienced, so it was also agreed that the OAWY social worker would undertake Non Violence Resistance with the family to manage the high level risk of violence. TAF meetings were recommended to ensure a joined up approach.

An ASD screen commenced with the MDT Consultant Psychologist and MDT Occupational Therapist. During this work safeguarding concerns were raised due to the high levels of child to parent violence disclosed. This resulted in a safeguarding referral which was accepted by the local team and an early help worker was allocated who worked with the family for three months, linking parents and child in to additional support.

The screen ruled-in the need for full ASD and ADHD assessments. In addition, the screen raised the question of possible genetic factors such as FASD (due to observed distinctive facial features) as well as questions regarding his cognitive ability/ profile (which appears to be a 'spiky' presentation of strengths and weaknesses).

The following course of action was agreed with family:

- That the psychologist would explore options for holistic assessment for all of the above (e.g. via the FASD national assessment centre).
- That parents were to request a referral to a paediatrician for genetic screening
- The psychologist would liaise with school Educational Psychologist re possible cognitive assessment
- Liaison with adoption social worker and manager re coordination of support via TAF meetings/ possible TCI intervention
- Additionally, during the course of this work, there have been 'working together' developments with the Calderdale NHS neurodevelopmental pathway, who have agreed to accept referrals from the MDT clinical psychologists directly for full assessment if requested following the above screening process (rather than parents having to start at the beginning of their screening process again). The ADHD/ASD screen was successfully accepted by Calderdale, which has reduced duplication and wait times for this family.

The MDT education specialist has also been involved and offered support to the school to ensure that they are meeting this child's needs.

The case example demonstrates MDT linking Local Authority and NHS services together, ensuring that families are offered a wider holistic lens, considering attachment and trauma, family functioning, mental health as well as neurological and genetic conditions. The work that MDT offered this family ensured that they received a seamless and joined up service that meets all the systemic needs of the family.