



The Tavistock and Portman **NHS**
NHS Foundation Trust

ASSOCIATION OF CLINICAL PSYCHOLOGISTS

The Whole Family Team with Perinatal Specialism: a responsive and inclusive approach to under 5s

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Our context



Our team

- We are a specialist service offering psychological therapy to families during **pregnancy** and with babies, toddlers and children up to the age of **5 years**.
- Our **multidisciplinary team (FTE 6.0)** includes: Clinical Psychology, Educational Psychology, Systemic Family Therapy, Child and Adolescent Psychotherapy, Psychiatry, Social work & Nursing .

We Support: (a wide range of need from adjustment difficulties to edge of care)

- Babies/young children and their carers who have had difficult or traumatic experiences
- Parents/carers who struggle with the transition to parenthood
- Parents/carers who experience antenatal or postnatal low mood, stress or anxiety, or experienced trauma where this is having an impact on their parenting or relationship with their child.
- Parents/Carers who are experiencing difficulty mentalising for their child
- Parents/carers who are in conflict and experience relationship difficulties (not where there is domestic abuse)
- Parent/carers who are concerned about aspects of their child's behaviour or emotions
- Parents who have had complex life experiences that may affect how they relate to their baby
- Parents who experienced difficulties during pregnancy or birth where this is impacting on their parenting or relationship with their baby.

Our offer:

- We offer a broad range of **evidence-based** interventions
 - VIPP & VIG
 - Parent-infant Psychotherapy
 - Mentalisation based work
 - Co-parenting & couples work
 - Family therapy
 - Groups (parent-infant psychotherapy group, Circle of Security)
- Many of our families require a flexible **practice-based evidence** approach that might integrate aspects of other interventions.
- Many families require a number of different interventions from our service.
- We offer consultation and support to the Local Authority (HV, FW, SW) to aid psychological thinking and support a families need at the broadest systemic level.

Barriers to accessing service provision

- We understand that for some families there are barriers to accessing services:
 - Previous experiences with services/systems
 - History of trauma (esp within context of relationships)
 - Uncertainty of how support could be helpful
 - Construct of 'psychological readiness' in services not in families
- We meet families in flexible locations that suit them (Children's Centres, home, park)
- We do not discharge after 3 DNA's but work to understand what might be preventing attendance.
- We work hard to build up trust and can offer a long period of engagement before offering intervention
- Work on developing a shared formulation

Embedded service provision

- WFT-P Clinicians have an embedded role in the LA Children's Centres. Each Children's Centre has a clinician that is linked to them (min 1 day a week), where they will spend time and get to know and support the staff.
- This clinician will offer monthly group case consultation with the FW & HV team in that Children's Centre. Individual consultations are also offered to support in a flexible and responsive way.
- This is feedback from the Children's Centre Management about how they value the role.
 - Co-located Local Authority and WFT-P staff have become a multi-agency system that feels "*truly integrated*" and "*a community of practitioners*".
 - WFT-P clinicians bring a high level of expertise to the teams are highly respected by the HVs and FWs. WFT-P clinicians hold expertise and knowledge which the HVs and FWs often rely on to support their work with families. WFT-P clinicians develop the confidence and competence of FWs & HVs through frequent contact and opportunities for shared learning and capacity building.
 - WFT-P clinicians' accessibility enables FWs to consult with a specialist practitioner and to benefit from the expertise of a colleague they know and trust. FWs and CAMHS practitioners can arrange joint contact with families (sometimes in the CCs, or home visit) which supports engagement and better outcomes. FWs are able to learn in practice

Thrive

- Thinking about **NEED not Threshold**
- **Getting Advice:** consultation work with Local Authority practitioners.
 - Frequent and regular access to individual and group consultations.
 - Supporting psychological thinking.
 - Considering 'need' and 'what would be helpful'
- **Getting Help & Getting more Help:**
 - CAMHS appointments with clinicians



Thrive

- **Risk Support** is defined as a service to children and young people and families who are currently unable to benefit from evidence-based treatment but remain a significant concern or risk. **We work with the network and not the family.**
- Risks might relate to issues around family breakdown and high Levels of Social Work involvement
- These are all associated with very poor mental health outcomes. In some circumstances these families do not consent to CAMHS help or in some cases have had long term CAMHS input that has not brought about change. It might also be that other factors need more immediate focus than CAMHS (housing, domestic abuse, LA court proceedings).
- The offer of Risk Support helps the professional network to think psychologically, it also help the network to stay connected to each other and work together to support the family. Additionally, WFT-P are in a good position to determine when it might be helpful to offer direct CAMHS input again.
- Because of our positive relationships with the LA it enables them to trust our view on the utility of CAMHS work. (move away from pressurised to offer direct work when it is not appropriate)
- With each consultation we write up a memo that that includes the shared understanding and some shared recommendations for next steps.

Commissioning arrangements

- Camden CAMHS is funded by a pooled budget between Health and Camden Local Authority (LA)
- Joint commissioning (Health & LA) in place improve partnership working
- Majority of the contribution is from Health.
- Pooled budget pays for all of Camden CAMHS, not just the LA based CAMHS teams Supports a shared goal and vision CAMHS (sense of working together)
- LA & Health have both committed to a shared leadership as result of the joint investment

Where to intervene?

1. Individual/family level (building relationships, getting alongside a family, developing a foundation for therapeutic work)
2. Wider professional network and system (using our formulation to support the wider networks' work with a family)
3. Systems and processes (trying to implement change at a broader level)

Working with professional networks

- Working with babies and young children: anxieties often run high and this can play out in the network
- Working with complex trauma: splitting and fragmentation in networks (activation, avoidance)
- Professionals often feeling powerless to influence certain parts of the system (e.g. housing, impact of crime, immigration status) –leading to sense of overwhelm or helplessness
- Offering containment to support a return to thinking and reflection
- Supporting the network to think about what's been asked of a family and how they might experience this (e.g. attending stay and play, multiple appointments)
- Holding on to the voice and experience of the baby/child
- Space to process our own feelings and gain support from our team is essential

Examples of supporting networks

- Supervision and support to stay and play (young parents drop in)
- Additional reflective space for Family Workers and Health Visitors supporting families living in Bridging Hotels (Afghan Resettlement Scheme)
- Developing relationships with adult mental health services and perinatal mental services (improving transition between services)
- VIG training & supervision to FW (facilitating the VIG offer, skilling up the workforce)

Examples of wider systems work

- 1001 critical days steering group/start for life steering group-supporting decision making
- Best Start for Baby (Enhanced Health Visiting Offer) – Psychological Lead is seconded from our team
- Escalating concerns around housing: temporary accommodation and impact on access to health care and mental health.