

Keyworking Addendum

REFLECTIONS FROM KEYWORKING SERVICE PILOT SITES: KEY LESSONS
AND CHALLENGES






Foreword

By Dame Christine Lenehan,
Director of Council for Disabled Children

I was delighted that the Recommendation that each child or young person in an inpatient setting or at risk of going into an inpatient setting (due to their mental health, autism and/or learning disability) who does not already have an individual performing this role should have a keyworker/named worker, was accepted and incorporated into the Long-Term Plan.

It has been a real pleasure to see that recommendation become real and it is a great credit to the children and young people team within the learning disability and autism programme have ensured that this process has been followed through. The fact that young people and experts by experience have been at the heart of the programme has enriched it significantly.

I have had the opportunity to be involved in the development of services, to understand their reach and their different approaches, but they have one common factor, that the rights of the children and young people are central and upheld. It is very important that we embed the Keyworking approach into the heart of services, that it impacts not just our processes but also our culture, that is how we will see real change.



Introduction

“ The keyworker saved my life.

In 2019 the NHS Long Term Plan committed the NHS to implementing Dame Christine Lenehan’s recommendation, in “These are our children”, that by 2023/24 children and young people with a learning disability and/or who are autistic with the most complex needs will have a designated keyworker.

This commitment was made in recognition that, despite the best efforts of many committed professionals, the health and care system was not delivering the objectives of the Transforming Care Programme for autistic children and young people and those with a learning disability or both, and their families. Too many families were not receiving the support they needed at the right time, and too many children and young people were continuing to be admitted to inpatient care when they reached crisis.

In developing this new function, NHS England worked with children and young people, parent carers and multidisciplinary professionals to define what the Keyworking Service should look like and set national objectives that the service would achieve. The result of this development process was not a new framework and metrics, but for a new way of doing things, a commitment to an approach centred on the rights and needs of autistic children and young people and those with learning disabilities and their families. Keyworking Service’s remit is to ensure the whole system is doing everything it can to meet their needs in order to get them out of, or prevent them going into, an inpatient setting. This means ignoring traditional service boundaries and works intensively with both

children, families and professionals to develop and implement solutions that can change children’s lives.

With the additional challenge of the pandemic NHS England has worked with local system partners to establish:

- **2020/21- 13 Pilot Sites**
- **2021/22- 14 Early Adopter Sites**

This document is an addendum to 2 existing guidance documents developed by CDC together with NHS England and Health Education England. These are:

- **Keyworking Function Workforce Competency Framework-** defines the core competences required by the service to deliver the Keyworking function across 4 areas:
 - Placing the child, young person and their family at the centre
 - Effective Communication
 - Achieving change and unblocking the system
 - Bridging and working across the system
- **Keyworking Function Guidance-** sets the vision, mission and objectives for the keyworking functions.

This Addendum focuses on how Keyworking Pilot sites have developed their “Mission” to translate the national Vision in order to deliver the defined objectives for children and families.



IMPROVE CHILDREN AND YOUNG PEOPLE’S LIVED EXPERIENCE SO THEY FEEL:

- Safe and happy
- Listened to, informed and involved
- Involved in their plans, care and support

IMPROVING ACCESS:

- Timely access to the right personalised support
- Assessment, care and support are integrated across education, social care and voluntary, community services
- Continuity of care and support
- Well planned and well managed transitions

IMPROVE PARENT/CARERS & FAMILIES LIVED EXPERIENCE SO THEY:

- Have reduced stress and uncertainty
- Are more stable, feel listened to, informed and involved

IMPROVING QUALITY OF CARE:

- Reasonably adjusted support
- Reducing inequalities
- Implementation of Care and Education Treatment Review (CETR)
- Outcomes agreed with young person and family
- Involved in their plans, care and support

This Addendum is based on in-depth interviews and organised into 4 chapters ‘

- the importance of setting a vision
- setting up the Keyworking service
- delivering the Keyworking service
- key processes

The documents referenced from keyworking services are accessible via the shared Keyworking Community of Practice Platform.

The experience of the Keyworking Service Pilot sites is beginning to show what this approach can achieve. The purpose of this resource is to highlight the experiences of the pilot sites in setting up and embedding their role, and how they have addressed the key challenges.

The content together with the Health Education England (HEE) eLearning Modules sets out the building blocks of the Keyworking Function, and this resource should be read alongside them.

We would like to thank all the Pilot sites who were so generous with their time and shared their resources with us, with particular gratitude to Oxfordshire, Black Country, Hertfordshire, Heywood, Middleton and Rochdale, Devon and Plymouth.

Key Documents

- **These are our children**
- **Keyworking Function Workforce Competency Framework**
- **Keyworking Function Guidance**



Chapter 1: Importance of Setting a Vision

The importance of Developing a Clear Mission for the Keyworking Service in the Context of the Local System

“ I think the project management, and all of those things are really important. Of course they are. But if you don't have that vision really solidly in place before you launch or have people already in post, it doesn't work.

Each local system must develop a Keyworking Service model that translates the national framework into their system. While the national framework and guidance documents provides important parameters and guidance that local services must reference, it is not a single national operating model that can simply be dragged and dropped into a local context. To be effective the Keyworking Service must have a high degree of flexibility and discretion, it needs to understand the complex range of statutory frameworks underpinning provision for children and families, not only those specific to autistic children and those with learning disabilities or both, and it has to navigate the specific structures and challenges of their particular area.

In our work with pilot sites, it was apparent that there are 2 fundamental elements that every Keyworking Service must address to ensure that their model is able to deliver the vision:

Independence - What approaches and activities will support and enable the Keyworking Service to build strong, trusted relationships with children, young people and families, potentially following a period of difficulty. Without this, Keyworking Services risk replicating the approach and engagement of the existing professional network- that is not their function.

Influence - How will the Keyworking Service build strong relationships with professionals across all services working with children- including into adulthood, while also being empowered to challenge services when appropriate. Without this Keyworking Services risk performing a purely family help or advocacy role- that is not their function.

Every pilot emphasised the need to reflect on this challenge from inception, and that it an ongoing process that will need dedicated time and resources.

“ We were given what the keyworker role was but each area has to run differently, because each area has their own challenges and their own strengths. So, over the past year we've been really developing how we want this to run... we're adding the next layer.

Importance of Co-production

“ If we go to the beginning and making sure that we are valuing the experience of those with lived experience right from the very start of that co production, making sure that the parents and carers have been involved all the way through as partners.

Committing to a process of genuine co-production with children, young people and their families with lived experience is absolutely critical to developing a local vision that understands the challenges they face. It can also help generate positive engagement where parents and carer representatives are brought into the development process at the earliest stages, rather than at later stages where significant decisions about the design of the service had already been made. While there are technical and operational aspects that need to be agreed, all pilot sites emphasised the paramount importance of the culture and ethos that underpins this vision. The Humber Communications document sets out a schedule of engagement and co-production activity undertaken by a pilot site.

“ Right from the start, we were all really clear on some of those messages and that we needed to change the culture. Culture comes up again and again in our thinking... challenging

each other to say ‘Are we just putting another system in place or will this actually make a difference? Yes, there's the national guidance, but what will actually work and happen?’....I think that was really key.

“You also had parent carer forum groups and also young people who... had that lived experience of how difficult it is to navigate the system when they needed the support at the time that they needed it. So in the early days before the Keyworker Pilot even came to fruition, those groups were set up and steered what our Keyworker Pilot was going to look like.

Co-production engagement with children and young people was recognised as vital, some pilots highlighted an area they wished to improve, but children had been involved in shaping the service design, job descriptions, and in one pilot were the first stage of the interview process for all applicants (see below)

“Finally, one of the things that I'm really proud of is that we launched a logo competition for the service and the young people have actually participated, and as a team, we narrowed it down to two and now a group of young people are going to choose the final logo. And again, we're going to have a ceremony for that.”

Senior Buy-In

The initial vision must ensure there is clear ongoing support from senior relevant health, education and social care leaders, and clear communication channels and escalation processes to address challenges. The interim evaluation is clear about both the significance and the challenge of developing this vision. The time needed to explore the options and agree, in writing, a shared vision and objectives should not be underestimated. Committing this time and resource is an investment as this vision document will play an important role in securing ongoing and practical support for the Keyworking Service from senior relevant partners. The evaluation highlights the need to maintain a sense of ownership and continuity, without this the turnover of senior sponsors has potential to fragment responsibility for the Keyworking programme and undermine momentum.

This was reinforced in our pilot site interviews:

“Our bid was co-signed by education, social care, and parent and carer forum but actually their input was really low, so it ended up by being held in health, which is a good place to start because of our key relationships with the acute hospitals and inpatient and CAMHS units. But actually, it doesn't work if you don't have a really good grasp in the other systems or they are buying in.”

“Something that we've been conscious throughout the whole pilot is being really clear we're meant to be a region wide pilot and owned by lots of different agencies. But sometimes I think the perspective from others looking in, is because we're hosted within the local authority maybe that the keyworkers are like a social worker type role, which is sometimes difficult because we want to make sure that the keyworkers do feel like they can challenge different areas of the system and are working across the whole of the region.”

Positioning the Keyworking Service

“ We were sat within the CAMHS service and that was really tricky because we're not CAMHS. We're a very independent team and I think that was really difficult in the first instance. So, in terms of advice going forward, I think it's having that clear leadership structure within the team.

As a new function delivered by a new team, where the service is located will have implications for how it operates. The majority of the pilots we spoke to had located the Keyworking Service within the statutory system; CAMHS, the CCG or the Local Authority. This decision was based on how the existing elements of the Transforming Care programme had been delivered, which agency had been the primary driver, and how successful this had been. Parent carers and young people with lived experience should be involved in making this decision, and where there was significant tension in the relationships between families and an organisation, this needed to be taken into account.

“ Historically CAMHs and Parent Carer Forum did not have the best relationship. So I actually started having initial engagement with them separately, giving them updates, getting their views and then slowly bringing both groups

together and they are now actually sitting on the project board. So that's really nice to get to that stage and it feels they have been immensely helpful in pulling me into the SEN strategy because they didn't want me there.

Being hosted within a statutory organisation made it easier for the Keyworking Service to access their communication and IT systems, as well as build relationships and an understanding of their ways of working. However, the service must have knowledge of a full range of support options and make referrals for all relevant services, not just within their hosting organisation.

“ Having that overarching access to systems has been really helpful because they can actually see, 'oh yes, he did make a referral to social services, they've declined it, but they've said you should go here' and really tracking that through that communication.”

“Because the local authority are hosting we found it very easy to get access to the social workers' systems ... there's an early help system and education system and then the UMIS system. And they have access to all three. They've struggled to

have access to the health recording systems... and that's something that we're trying to work through. I don't really know what the blockers have been, but it's been really hard.

This advantage also generated risks and each pilot site stressed that the Keyworking Service needs a distinct identity from the very start and is not viewed as part of the host organisation by families or the wider system.

“ So we are within the TCP cohort, initially the plan was we were actually going to sit within CAHMs, but on reflection it would not have been suitable because we wouldn't have maintained our independence, so that that was kind of a setback straight away.

In one site, the Keyworking Service was hosted in a voluntary organisation with an existing track record and strong working relationships, with an explicit motivation of ensuring it was independent and able to offer clear challenge to the system partners.

“ We wanted the voluntary sector...It was a very deliberate decision, right from the outset that we wanted the keyworkers to sit outside of those two

organizations [Local Authority and NHS] to really give them the freedom.

In one pilot the Keyworking Service was split between two NHS Trusts, reflecting the geography of the region. This approach allowed services to build up a knowledge of the local service system and form relationships with professional networks but had presented challenges in implementing a unified approach across this service boundary.



“ We are effectively two smaller teams within that bigger LDAP SW team... That's a Keyworking, specific decision and we don't have any other services that cross boundaries in that way. Families tell us that navigating services across those two borders are really challenging. So it's nice that the Keyworker Pilot crosses that divide... but equally it's been difficult because of the differences in the way the different NHS trusts work. So that has been a barrier, although we are trying to overcome it... getting the right support from the right people at the right time is really challenging for families... I think the great thing is that as we evolve, we can be a bit more fluid... we know the community, we know the area, we know the services, we know the infrastructure.

Governance and Oversight Arrangements

The interim evaluation is clear that creating new service requires ongoing commitment and active ownership from a range of professionals working across the broader children and young people's system including into

adult services. The operation of the Keyworking model cannot simply be allocated to Keyworkers themselves, an appropriate level of seniority is required to create a new service.

Across the pilots this took different forms, such as a governance board or steering group with senior multiagency representation working alongside the Keyworking leadership. The active involvement of this group is particularly important in the initial phases as they help shape the development of the Keyworking Service's approach, as set out in the next chapter.

“ In the early days we were meeting with steering groups and coproduction partners monthly. Now we're meeting with them quarterly as we've grown... They're confident in what we're doing and that it's met that original brief and now we don't need to meet with them quite so frequently.”

“In the early days, steering groups were set up... Where you had representatives, leads really from health, education and social care alongside parent carer forum groups and also young people... before the Keyworker Pilot even came to fruition.

As the pilot developed, the need for representation from additional services became apparent in order to bring in expertise to address emerging issues.

“ We've managed to get her (the head of the disability service) now onto our project board, to pull in a couple of people from the other side... And to start to really understand and perhaps even change some of the things that they do.

This structure and terms of reference of these arrangements should perform an oversight and support function for the Keyworking Service. They must enable the multiagency system leadership to understand what the Keyworking Service is doing, the impact it is making and also provide a clear route to address strategic challenges the service is encountering in its delivery.

The Humber Operating Procedure document is an operating model detailing how a pilot site translated the national framework and guidance into a model that integrated into their local service structure.

Data Reporting

In addition to regular project updates the Keyworking Pilots had considered how to use data to demonstrate their impact, working with relatively small numbers of unique and complex cases meant sites had been creative in developing impact data to show positive outcomes achieved or worked towards.

There will be nationally mandated outcomes data produced by NHS England to help understand the impact of the Keyworking Service at a national level, but keyworkers may want to augment this with their own data and analysis.

“ We're using our data captured...online. We have Rio, our online notes where you can see the time frames we have been working with people. Since we've been involved, we've had three admissions to tier four and two of those were for eating disorders... What we're finding is that families are very captured on whether or not they feel like they've got the outcome they wanted.”

“You can have some successes that can be short term, but there's still a success if we've delayed admission for six months, that could give us enough time to turn that young person around.

It might not do, but that delay in itself is a success...The other thing is I don't think we collect really enough information around the soft data.”

“We had to report to board about outcomes for Keyworkers ...Our Keyworking Service is very much linked to the DSR that we have in place. So from that, we can see if people's RAG rating in terms of their risk being reduced... and write down the green and that's like a very clear show. ...The positive outcomes - being able to go to the cinema or being able to actually do something that they've always wanted to do and that confidence has increased - capturing that has been quite difficult.

The Humber Service Standards Statement Outline document is developed by one pilot site to monitor and report the services progress, and the Humber Services Standards Statement shows this complete with information and RAG rating.



Key Points

- Before implementing the Keyworking Service, leadership needs to create a vision document, outlining what their key objectives are and how they will achieve this in the context of the specific challenges and strengths of their system
- Co-production with children, young people and their families is vital from the very beginning when developing this vision
- Clear Governance arrangements with ongoing senior buy-in is crucial
- Where the Keyworking Service is hosted will have implications for how it embeds into the wider system
- As a new service, keyworkers are in a position to challenge systems and implement cultural change- but this will create tension
- The Keyworking Service will need to determine how it will capture data and outcomes e.g. evaluation forms, system data and personal stories – to show the impact it is having on children and families.

Key Documents

- Oxfordshire Introductory PowerPoint
- South Yorkshire Evaluation PowerPoint
- Humber Keyworking Service Operating Procedure
- Humber Service Standards Statement Outline
- Humber Service Standards Statement
- Humber Communications

Chapter 2: Setting Up the Keyworking Service

“One of the Keyworkers said it felt like they were knitting the jumper whilst wearing it. They were almost developing the role whilst they were in it and all Keyworkers definitely felt the role and what they needed to do was only evident once they started doing the work.

The strategic vision and operational plan is a key foundation for setting up the Keyworking Service, but it is only a starting point. Translating this plan into an impactful Keyworker function needs a committed and skilled workforce who are empowered to develop and build on the plan.

Leadership

“From my point of view, I saw the job spec, and I've got really excited, I can definitely bring my skills in here. I thought it was really lovely to have something that was completely brand new and was really open.

The leadership of the Keyworking Service is essential to its success as they will have to shape and lead a diverse team, understand and develop solutions to complex problems and build productive relationships with senior professionals, in potentially challenging circumstances.

The “newness” and uniqueness of the Keyworking Service came across very strongly in all interviews with leaders, and this was seen as a real positive and motivating factor in taking up the role. Being able to do things differently and trying to address long standing challenges in a new way had been an empowering, even liberating, experience for many of the people we spoke to, all of who had long careers working with children and families.

“I thought wouldn't it be lovely to be part of the solution, instead of as a part of the problem? ... I know, all the Keyworkers would agree, we have found it really exciting to be part of the setup.”

“I think it's that permission to be able to make changes. I think when you've been working either in NHS or social care or any of those systems and services for so long you can get pulled into it and feel like you're not allowed to step up and

speak out. Whereas I feel like this gives that permission.

This attitude sets the culture and approach of the Keyworking Service and every area emphasised the importance of getting this leadership in place to oversee the recruitment and induction processes. When this didn't happen there may be a lack of clarity and a period of drift that needed to be addressed, taking significant resource and energy to address. It could also affect the initial experiences of the Keyworkers appointed period a leadership structure was in place. To ensure the ordering is correct system partners should carefully consider the sequencing of recruitment including incorporating potential notice periods for applicants for different roles.

“One of the things that hasn't gone particularly well, and I keep on highlighting to new services, is recruit your leadership first before going on to recruiting everyone else. “Starting a job that didn't have clear structure, and nobody to actually say ‘this is what you do. This is your job.’ It was like there you are, sit there for a minute. Sort of go along with some other people. See what they do. So it wasn't necessarily teaching me what I needed to do. It does feel in hindsight that it would be good to have had

that structure in place, getting the processes in and then recruiting. But obviously that's in an ideal world.

Developing a clear model

“We the joiners and connectors of the dots but not a dot ourselves.

Keyworking is a multifaceted and dynamic role, and every area had developed its own way of describing the essence of what their service did.

“I think for me the biggest learning is... what I call the oiling motion, that the keyworkers are enablers, unblockers and oilers, and they are champions.”

“We have to know a lot about a lot of things, but we are not masters of anything, if that makes sense. Like the magpie.

This complexity is the strength of Keyworking, but creates a potential for confusion if the purpose and responsibilities of the Keyworking function are not clear, both to the service itself, and the wider system. This clarity was not always in place prior to Keyworkers being recruited, with most sites acknowledging there was some confusion about the meaning and expectations of the role and this could cause tension in relationships with both professionals and families, and for Keyworkers themselves.

“That is also really important in terms of the culture of the service and its efficiency and its effectiveness and people understanding that we're not a duplicate social worker. We're not a duplicate family support worker. We're not duplicate anything, we are serving as a Keyworker function within the system.”

“We're not there to fill a service gap that the family or young person needs. We're there to identify it and pull the service in when they need it. The great thing about what we do is we work really clearly across different sectors. We work across health, education and social care, and our role is to communicate more effectively with those statutory services.”

To minimise this potential tension, it's vital that the Keyworking Service is able to dedicate time and resources to developing the practicalities of the role and how its remit will be delivered in practice. The relationship between the leadership of the Keyworking Service and the system partners was particularly important in this initial period of transitioning the existing vision and operational plan into an existing service.

The interim evaluation was clear that responsibility for this cannot only sit with the leadership of the Keyworking Service itself, but requires support and engagement from across the system, and should be taken into account when planning the initial Keyworking Service workplan. This was echoed by the service leads we spoke to, who had taken on the responsibility for a developing a service. Being given permission and support to spend time developing how the service would operate in practice was really valued. When pilots weren't able to do this before starting to work directly with families there was a strong sense that it made the initial period of Keyworking very challenging.

“We also set up an away day and in the away day we focused very much on the Keyworker process. What is it gonna look like? What's the journey gonna look like for our young people and what do we need in place to make that journey as efficient as we can make it for them? What we were really mindful of is we do not want to be another service that goes with their formal NHS sheets marking things off.”

“Actually we found that it made more sense for us to take a little bit of a back seat, sit in those DSR’s, really understand what the issues were coming through and get embedded that way, as opposed to kind of just grabbing the bull by the horn and running with it, which was our initial reaction, but actually we took time, which seemed to help”

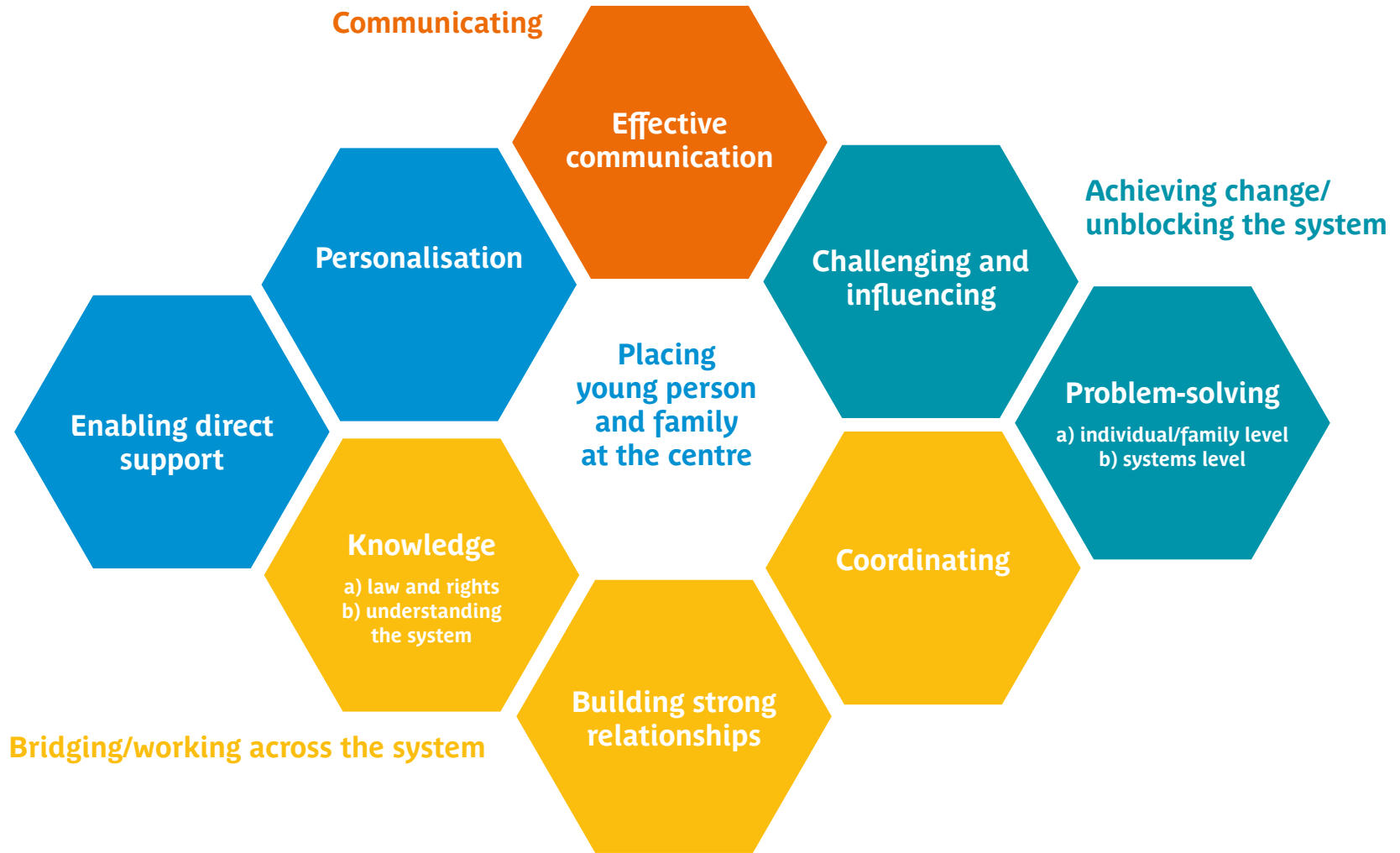
“We put the model in place. But that vision hadn’t been fine tuned in any way, shape or form, and by the time I was able to move full time to the project, the case managers have been in place already for six weeks, so I think that was really hard for them. In those initial first weeks to not have any guidance. I think if you want people to buy into something you need to support them with creating a joint vision and you need to provide the training and those initial steps are so important and that didn't quite happen.

Structure and Function of the service

“ You’ll never work in a team like it again because it's not your bread and butter NHS staff. It’s people from all types of walks of life and that's really exciting.

The Workforce Competency Framework sets out the core competencies required to deliver the Keyworking Service:

Core Competencies



Every pilot stressed the importance of having these core competencies fully represented in the service, and that required a diverse team that was able to draw on a range of professional skills and experience. Placing the young person and family at the centre was the core, shared ethos of every site. Sites were clear that this meant Keyworkers not being bound by established ways of doing things in other services, and not just do things the way they may have done them previously.

“ I also think it’s probably the most young person centred way of working you can do because ultimately we work for the young people. We don’t really work for the services and I think that that’s something that’s really, really positive. Not being part of those processes and not being that embedded you don’t ask, you just do, that’s been really, really good.”

“I tried to look at people’s personalities as well. I don't think it's just about core skills...I think that we have a lot more extroverts than we had introverts. And I think that created a really poor balance. We have since recruited and I think that now we are a much more balanced team that works as a team. So, it's just the one thing that we needed to think about.”

Service Structure

The Keyworking Service Pilots had all tried to ensure that their service had the full range of skills and competencies required, and the majority, but not all, we interviewed had adopted a structure with a service leader or manager, overseeing 2 different roles at different bands that emphasised different key competencies.

“ The way that the team is set up, we have social prescriber/recovery workers. We have case managers and there's my position.”

The language varied across pilots but the expectations on each role was relatively consistent

Senior Practitioner Role – may have overall responsibility for a case, triaging referrals, addressing strategic challenges, escalating issues with partner organisations. This was described as a case manager or consultant keyworker role.

“ The senior practitioners have clinical responsibility for that young person and that family. And if a young person comes through as a referral, they would be the person that would be triaging those referrals and would be the

person that would attend that initial MDT.

Practitioner Role – focused on working directly with children and families, this may involve visiting and undertaking activities. In one area this was described as a social prescriber.

“Tends to be the practitioner works directly with the young person in exploring what their hopes and aspirations and their needs and strengths are and what they would benefit from, practically. And that's across all environments. Our practitioners for example, would visit the young person in school or at home and get that real, holistic view of the needs of that young person, whereas the senior practitioner would be pulling the network around the young person.

While the balance between staffing at each band differed between pilots, the Keyworking function is a combination of these 2 roles and it is vital there is clear understanding of how they will work together in practice.

“We've got four Keyworkers, two consultant Keyworkers and one team manager, and I think the consultant Keyworkers are in that role because

they do feel like they can challenge a little bit better. But the Keyworkers do also challenge.”

“Recovery workers/social prescribers, they probably work much more with their families and the young person...linking them with the community, very person centred. The case managers are the ones that I meet almost every day to review and assign the actions and they actually push others to do things, we don't necessarily do it ourselves. We might support others, but we don't take on the actions ourselves.

One area highlighted the need to ensure that the expectations of role were consistently met.

“I had to challenge the case manager saying you're a senior practitioner, I think it's lovely to spend time, and I would love to spend some time just playing a game with a young person. I need you to be knocking on NHSE, asking where the CETR is or you know, that's your role and you can't be asking a practitioner to do that. So, we had to really define those roles.”

A tiered structure is not the only approach, but every site will need to ensure that the full skills are represented within their service, with clear understanding of how those competencies will be appropriately matched to the key elements of the role.

Key Documents

- Humber Structure Flow Chart
- Keyworking Service Structures
- Oxfordshire SEND presentation
- Keyworking Job planner

Job Descriptions

- Humber Job Description Practitioner
- Oxford Job Description Practitioner
- Oxford Job Description Senior Practitioner
- Doncaster Job Description Senior Practitioner

Recruitment

“ If you get easily frustrated, this is not a job for you. So, you have to have the right attitude and core skills. Everything else, it's very much, can you see the potential of people or not?... Perhaps this is why Keyworking suits me, because I'm a firm believer in seeing those rough diamonds.

As well as structure, getting the right mix of people is crucial, and the recruitment process needs to attract candidates with professional knowledge and experience from across the children's system. These technical skills must sit alongside a commitment to upholding children's rights and the interpersonal skills to build relationships with different types of people, including children with additional communication needs and those experiencing mental health difficulties. Many pilot sites emphasised the benefits of having an inclusive approach to recruitment that actively encouraged applications from a broad range of backgrounds and experiences. In this context a lack of formal experience could be a potential benefit but requires the service to ensure that the purpose and nature of the role is explained in a way that attracts motivated applicants from outside a narrow range of fields.

“ I think strength, in a way, is people's naivety, because I think when you've worked in the NHS

in particular for many years, it's easy to ... just follow the systems...the processes. Now our big part is to challenge, me coming from an NHS background is probably taking me the longest to challenge because I'm thinking, but I know that's just what they've got to do. I know that's just how it works. But actually, for the team, they just want to know why does it have to be like that.

As well as the job description and advertisement, having the right interview structure is important to assess these competencies in different ways, including involving child and family experts by experience and a range of professionals in their processes. Pilots stressing the importance of having children and young people directly testing the applicant's commitment and ability to work with them in challenging circumstances, and in one area this was the first stage of the recruitment process. Parent representatives we also actively involved in the recruitment process, and this was part of the formalisations of the role of parent carers within the services, which included parent carers sitting on the steering group, and taking on elements of the Keyworking role directly.

“At first we were doing the professionals panel first and then the young person's panel. We've switched that around and that would be our advice, to go with the young person's panel first.”

“We can't employ people that can't break down those barriers, it's just that person centred connection, that's just really going in and being open and being approachable. And we needed to screen out all those that could say the right things in a professional capacity, but actually couldn't demonstrate that to us in practice.”

“You might be anxious because it's an interview process, but if you can't communicate with me when I am willing you on, how on earth are you going to do it when I'm about to head into a Tier 4 provision because at that point, I don't even want you potentially coming through the front door, so it's not easy, don't expect an easy ride at that point. It's not going to happen.”

“We've always had children and, young people's panel. We've always had parents sitting as part of the professional panel because they are professionals with us, alongside us, you know, everybody's judgment is of equal waiting

Key Documents

- Humber Applicants Guide
- Oxford Interview Questions Band 4
- Humber Keyworking Interview Questions
- Humber Lead Keyworker Interview Questions
- Doncaster Interview Grid



Induction and Training

Once Keyworkers are recruited, they need to be thoroughly inducted with a training plan in place from the start. This must include a grounding in the key systems they will be working across. This was partly achieved by the HEE e-learning training, but some pilots had invested in additional training on key elements of the system including legal training on SEND legislation, Social Care processes and training on key issues in mental health and the youth justice system, and additional issues like Personal Health Budgets and medication reviews (STOMP-STAMP). Part of the induction should be an introduction to the teams and services the Keyworkers will be interacting with, to understand their ways of working, while also being an opportunity to explain what Keyworkers do and start building relationships across professional networks.

“Inductions include the time spent with each of the agencies to understand their ways of working. I think it's quite easy for them just to have the local authority induction and then not quite be linked in. And that's worked really well with, specifically, our behavioural support service. They were involved in team meetings and got to know that service quite well.”

“I'm really looking at perhaps some leadership training for some of our keyworkers.. I think it's probably going to help to understand the complexity of systems. And not only are we not embedded in one, you are kind of above education, social care, health, and even in health it might be acute and mental health and it's kind of trying to bring all of that together when you're just sitting above it. It's really hard, isn't it?”

Key Documents

- Humber Keyworking Service induction
- Humber Keyworking Service Training Plan

Wellbeing

The nature of the Keyworking role can cause significant emotional strain. It involves supporting families in very difficult and distressing circumstances and has the potential for conflict with other professionals over the best cause of action. Therefore, it is important to proactively recognise and support the wellbeing of Keyworkers to help develop their practice, support their own emotional and mental health, and prevent burnout. Pilot sites had introduced a range of mechanisms including peer-to-peer support, reflective practice sessions or access to counselling sessions.

“We set up peer supervision for the practitioners and the senior practitioners, so we've got a space just to reflect on the role and the pressures that the role brings. But those are things that would have been hugely beneficial to run with from the very start.”

“We've introduced reflective practice sessions now...we have requested some psychology support for that. A clinical psychologist will come in and give that safe space for the team to reflect on those difficult situations.”

“We got practice supervision as well. All of us have got practice supervisors as well, to think about what we're doing and keep the team safe and have a safe space to talk.”

The emotional impact of working with children and families in crisis can be profound, with Keyworkers investing significant energy in building these relations. This is a real positive, but the implications must be recognised and addressed by services. Alongside general emotional support some leaders had considered how to manage the ending of cases in a sensitive way, recognising the impact on the Keyworker as well as the family, and how to ensure Keyworkers were able to experience a mix of cases to avoid potential burnout.

“We're really clear in terms of Keyworkers that when you start working with the child, it's not for the long term... You don't want the Keyworkers to be needed if that makes sense. I know we had a team meeting the other day and the Keyworkers were saying how they find closing very difficult because they want to continue working with the child. But what they keep saying is actually it's a real positive that you don't need me anymore.”

“There was one particular person that was able to acknowledge, ‘I need some success stories that don't take six months.’ I think that we will really need to think about the well-being of our workforce because we are investing so much in terms of training and support every year. So I'm trying to perhaps keep a few green ones so that people can have a really good goodbye and resolution and recognition of some nice work because I think that's really important to keep the tank full.”

Key Points

- It is best to recruit leadership positions first as this will ensure clarity, structure and direction for the rest of the team
- A diverse balance of skills, experience, knowledge is crucial to the service's success. This may involve different roles within the team
- Interview processes should include children, young people and their families as well as professional panels
- The service will need to create and communicate a distinct identity, the team should not simply be seen as support workers or social care workers
- When inducting Keyworkers, it is crucial to ensure that other professionals and services are aware of who the Keyworking Service are and its purpose
- The wellbeing of Keyworkers must be considered from the start- this can be done through peer to peer support, supervisions and counselling
- When recruiting Keyworkers, it is essential to look at a range of skills and backgrounds, and consider their relationship building skills especially with children and young people.



Chapter 3: Delivering the Keyworking Service

“Keyworkers really do become agents of change... for all children.

Every Keyworking Service was able to divide their function into two core aspects, both of which emphasised building strong, trusting relationships with:

- children, young people and their families
- professionals in the children's network, and the children's system more widely

Importance of building relationships when working with Children, Young People, and their Families

“There are times when the keyworker comes in because relationships are broken down. It's about rebuilding.

When working with children, and families' Keyworkers need to be able to establish a strong trusting relationship, they must see children and

families as allies. It is also crucial to be seen to have a significant degree of independence from the wider children's system as they will frequently be involved with cases where children and families no longer trust professionals within the system.

This could be a major barrier to engagement, and all sites had worked on approaches to this initial engagement and being able to explain who they were and what they did in a way that clearly differentiated it from the other services in the child and families' life. It was important they were not seen as either duplicating these professionals or that they were there to “manage” the children and families on behalf of other services. They tried to achieve this through formal material designed to be aimed at children and families at initial point of contact, promoted through services and parent groups. Pilot sites also encouraged an approach that felt distinct from other services, with an emphasis on empowerment and being family led and so not automatically representing a “corporate” based position.

“A lot of our families, they struggle, they feel like they can't say anything in meetings. They feel like they've just got to sit and listen and be told, but we're there to empower, we do say that we are that listening if you're having a shit day, you can

always get in touch with us. We are contactable. We will always endeavour to get back in touch, but we do make it very clear we're not clinical, so that's the part that sometimes is a struggle for our families, that say if there is a crisis, we might be the first people they want to contact because we're the ones who do get back to them.

This was not always possible, and pilots mentioned cases where ongoing processes, particularly around initiating care proceedings meant it was not always appropriate to maintain Keyworking involvement. However, every participant described a tenacious, committed team culture that didn't give up at the first rejection and would invest significant time building the relationship with the child and family.

“The support when people were giving up on us is something that will stay with us for a long time.”

Feedback from parent.

Understanding this shared context was crucial, as was identifying the separate needs of the child and the parent carers while also recognising the needs of any siblings. A bespoke plan may involve primarily working with the child, or the parent, or both depending on the needs and preferences of the family. One pilot spoke about assigning separate Keyworkers to the child and the family when that was the best option.

“What we've had to do for some of our cases is doubling up. We find often families and young people have a very different idea of what their goal should look like. So as a family, they might want their child to be back in education. But actually as the child, that might not be their key goal. To start with, they might actually prefer to do some of the confidence building.... We've had a couple of young people that are going 'Well, if you're gonna be speaking to my mum and dad afterwards, you're not for me, are you? You're here for all of us. And I don't want that.' We've listened to our young people and on those occasions what we'll do is we'll put a second Keyworker in place.

Every pilot described the importance of a flexible, person centred approach to working with children and families, that incorporated more structured elements, storytelling, outcome setting, professional mapping, alongside taking part in social activities. Ensuring that these approaches were integrated effectively was a key role of the service lead and senior Keyworkers. A number stressed the importance of a system to ensure that social activities were part of a strategic approach to understanding what children and families wanted to change in their lives and with services, and did not become a more general family support or personal assistant role.

“One of our Keyworkers went down to a little stream with one of their young people who was looking for fossils. And she said actually he hadn't talked to any social worker at all and just sat there and said everything was fine. When he talked to his Keyworker, he was significantly self-harming and so they went and did activities and actually he really opened up. And then she was able to talk to the network, and when he was in the meeting, she was able to gently push him and say “actually that's not true, is it?” and help him to open up and share his feelings or she could say what they spoke about together.”

“When our Keyworkers are trying to build up a relationship with the young person and they don't just go round to the family home and sit down and talk to them on the sofa for an hour and leave. They've been doing it really creatively. They've been going on bike rides. I think one of them went to the cinema the other day... So they do take on that type of activity to identify what is important for them and to move it on.

All pilots sites were clear that this is an active, not a passive role, and exploring with children and families what needed to be changed, and how this could be achieved, including by children and families, was at the core of their role.

“We...say to families we are here to make as big a change as we can to add to your young person's life, but also to your lives, we want to make sure that you feel that you are being supported at the right level.”

“She's very good at that in helping families see actually, you've got a very, very key role in this, and this isn't all about professionals doing the doing. There are things you can do”

“And we also want to empower you to make sure that you know when you go to these meetings, you're OK to say, well, what? What is that about?”

The other aspect of Keyworkers relationship with children and families was understanding their relationship with the wider professional network developing approaches with the family to identify and address problems and barriers. This included mapping professional networks, identifying potential gaps and helping children and families to navigate, what may sometimes feel like a confusing and stressful situation, by enabling them to identify and access appropriate service.

“They were...building up a database of their localities about what services are out there. So we have got a database?”

“So first of all, we would navigate who's involved in your young person's care. We will help them understand who they are, what they do and how to contact them, because I think that that's really fundamental... and we'll do a lot of signposting around local services.

Being hosted within a statutory organisation made it easier for the Keyworking Service to access their communication and IT systems, as well as build relationships and an understanding of their ways of working. However, the service must have knowledge of a full range of support options and make referrals for all relevant services, not just within their hosting organisation.

Resource Allocation

While the core focus of the Keyworking Service is to deliver change through working with families and existing services, in some cases, Keyworking Services were able to directly use their own resources, for instance, an allocated personal budget, on individual cases to help them achieve a positive outcome.

“[Personal Budgets] can help Keyworkers step back e.g. one is doing a lot of artwork and scrap booking with her young person. She may consider paying for her to do an art course, or get art materials she can then do by herself when she [the Keyworker] steps back.

“A Keyworker can have up to £500 for a child as a one-off personal budget and the aim of that is to try and prevent things escalating or to try and resolve the situation very quickly...Some will be less, some will be more and it has worked really well. It's something we can put in place quite quickly and the money goes straight to the parent or the child depending on their age and capacity to manage that money. And it's been spent on laptops, computers, courses of gym membership, things like that.

Ending Involvement

“ You will keep coming to see me and support me even when I am back in the community won't you?

Part of the Keyworking journey involves the stepping down process when the case has achieved a positive outcome. This is an important process not just for ensuring the stability of the children or young people, but as lot of areas found, it was especially important for their families too.

“ Our evaluation has showed that it's the families that are struggling in endings with us rather than the young people, because the young people still have a lot of support if we step down correctly, people are stepping up and doing their role. So, it's the families who are missing out on the regular contact... So we've now got this peer support who are offering that role for our families.

Key Documents

Communication information

- Humber Keyworking Families Information Sheet
- Norfolk Children, Young People and Families Flyer
- Norfolk Easy Read Flyer
- Humber Easy Read Keyworking Leaflet
- South Yorkshire Keyworking PowerPoint

Tools under development

- Outcomes Development Sheet
- Staff Risk Assessment

Importance of professionals in the children's network, and the wider children's system

“ I think for us Keyworking has always been about prioritising, these are the most complex kids where things should have been done yesterday. This is why we are here.

The other fundamental aspect of the Keyworking function is working with the wider professional network to develop solutions to the challenges and barriers that have contributed to the risk of admission increasing.

All areas had dedicated considerable time to balancing the need to be both independent and represent the best interest of the child and family whilst building constructive relationships with professionals already involved with them. The Keyworking Service works intensively with a child and family to develop a holistic understanding of their circumstance, views and priorities. It then amplifies these views and needs through the professional network, working with professionals to ensure they understand their role in addressing these priorities, This approach of working with the family to identify priorities and working with professionals to address them was described as providing an effective” or “credible” challenge, articulated by one service lead as “a pincer approach”

“ With the more complex cases ... we have this kind of pincer approach. So, it's really important to bring the other professionals on board because everyone is under huge pressure... of course that there's an element of carrot and stick if people are not doing things appropriately or not really listening, I can escalate and I know what the mechanisms for escalation are. But it works better if we are able to bring people on board with us.



Across the pilots there were 4 core elements to this approach

Communication – promoting information about the Keyworking Service and its purpose to the wider children’s system, relationships built with influential professionals in different services and agencies brought together in regular steering group type meetings.

“All professionals now have access to our leaflet....and we also have one-page profiles and we often send them to professionals and say look, as the person that's seen this family more, would you mind sharing this? The hope is they will also have a look at it so they know who we are and what we're there to do. And again, when we do those meetings, part of that meeting is to have the discussion of what we are, who we are, what we're there to do.”

”Knocking on doors and thinking actually can I come and talk to your regional SENCO through monthly meetings so that we can present our service and outline our expectations of them. Or ...we met with all of the team managers. It was a lot of presenting and a lot of Q&As.

Where the professional network working with the child were unaware of the purpose of the Keyworking Service it could be difficult for Keyworkers to introduce themselves and explain their function while also trying to influence change.

“The professional networks don't quite understand their role and maybe the title has caused some difficulties, so they see them as maybe an advocate or a support worker or they're just not quite sure on what their role is. And sometimes that doesn't help with the challenge and being listened to if we're trying to advocate on behalf that young person”

“For example, in education, we're not quite so well known, whereas in health and social care we are. So, it's about using those forums even now, six months on to really find out what do they think of what we're doing and how could we navigate the system a bit better and how could we work more collaboratively with education to support that area more.

Key Documents

- Hertfordshire Multi-Agency Leaflet
- Humber Keyworking Service Briefing
- Hertfordshire Keyworker's Professional Information Sheet
- Norfolk Professionals Flyer

Operational – When Keyworkers were assigned cases, they introduced themselves and developed an agreed understanding of what their role would be, considering the specific circumstances of the child and family in partnership with the wider professional network. The mapping of the professional network that the Keyworkers do with the child and family can fulfil this double role in ensuring Keyworkers fully understand, what can be, an exceptionally complex set of services and professional interactions.

“ And something we do with our families is we set up a bit of a mind map of which professionals are on board. And to be honest, it helps us as much as it helps the families. We have with the young person in the centre, either a picture or the name. And then all around the outside, we have all the key professionals, those key people that we need to get around the table, who you do need to

build the relationships with and we find that if we can build the relationship, we can then be that link to help the family build the relationship as well.

In practice terms this stage involves a Keyworker meeting with professionals and attending, or if necessary convening multiagency meetings where the Keyworker presents the approach developed with the family, and discusses the development and implementation of a shared approach. For more complex cases this is a core element of the senior Keyworker role, given the challenge in managing a broad range of stakeholders trying to address often complex problems.

“ So one of our first things we would always do, is set up an email trail with professionals because we think, as a starting point, that's really helpful and we don't have families included in that email trail and we were very transparent about that. But that is because, a lot of our families that have come to us, have got history with professionals... So we have that as a space for professionals to share. That would be our first point of call to escalate any issues and to share information.

“And then we asked the care coordinators often to set up the first professionals meeting so that we could introduce ourselves to the wider network and we could really explain what was our role.”

“Keyworkers have really formed good relationships with the other professionals, so they have quite good communication between them, or they would do a joint visit together, or a joint session. And I know one of our Keyworkers just doing quite a lot of joint sessions with the CAMHS worker. So they were both meeting with the individual together and that really helped.

Despite the efforts to promote the service, there was a common theme that individual professionals may be wary of the team until they “experienced” them, but after working together grew to value them, enabling a more open exploration of new approaches.

“People thought that she might be coming in to just see what was going on and be a bit nosy and criticise...that was the perception...But once she started working with the families and showed

she was actually there to help ...we noticed when we started working with the same professionals again, it was a really different story and they were really open and really enthusiastic about a Keyworker.”

“The...CAMHS worker, was able to almost work alongside me and see the differences and what she said was, ‘do you know what? You took a lot of weight off my shoulders’ because what I was doing behind the scenes was contacting education, I was ensuring that we've got a knowledge of the young person’s wants and wishes in terms of education. And I was being that link. So rather than the CAMHS worker having to hold all of that alongside the therapeutic work and the risk management as well, I was able to at least take a little piece away from her and that was my role. I wasn't making her life easier, but she felt I was and I think that helped; they could see the process and they could see how it really could work.

Escalation and challenge – Building positive relationships is at the core of the Keyworking approach, but it is inevitable services will encounter conflict in individual cases and a clear route for escalation is imperative. This is to address individual issues and prevent tension developing between the Keyworking Service and other services. The service lead is a vital role in this, with a process to help the whole team identify which cases may require an escalation- for instance a referral has been rejected or an element of service that should be in place is not being delivered- and involve them in this process.

“ In this particular case, at one point we had the safeguarding lead for this CCG involved. I escalated the competency of the social worker to a very high level, but equally trying to maintain some sort of level of confidence for the parent... So, that was really tricky... So how do we look after each other? So, we have a reflective forum I meet with people at least monthly on a 1 to 1.

When this is done in an uncoordinated way this could create additional tension and stress and make successful resolution of issues less likely.

“ We had to have a few conversations about the way in which we do that challenging. Sending that email at Friday at 4:00 o'clock saying, “why

haven't you done this?” “why haven't you done that?” that's not going to be helpful for anybody... What we probably hadn't taken into account was that these families might move on, but we still have to work as a professional collective. So, we were very mindful of that and that's where we're looking at this kind of escalation phase”

“You know, we have an escalation process and I think it's one of the things that we need to improve on. We've created a lot of flowcharts and processes but I think that we need to create more because no one has done Keyworking before. So, we didn't know what were the processes and flow charts that we actually needed.

Strategic – In every interview service leaders were clear that the Keyworking Service role was not limited to individual case work, in part because their work highlighted strategic problems in how services worked together or gaps in provision that could not be addressed on an individual basis. This was done through the steering groups set out in the governance process and through multiagency forums, including the DSR- set out below.

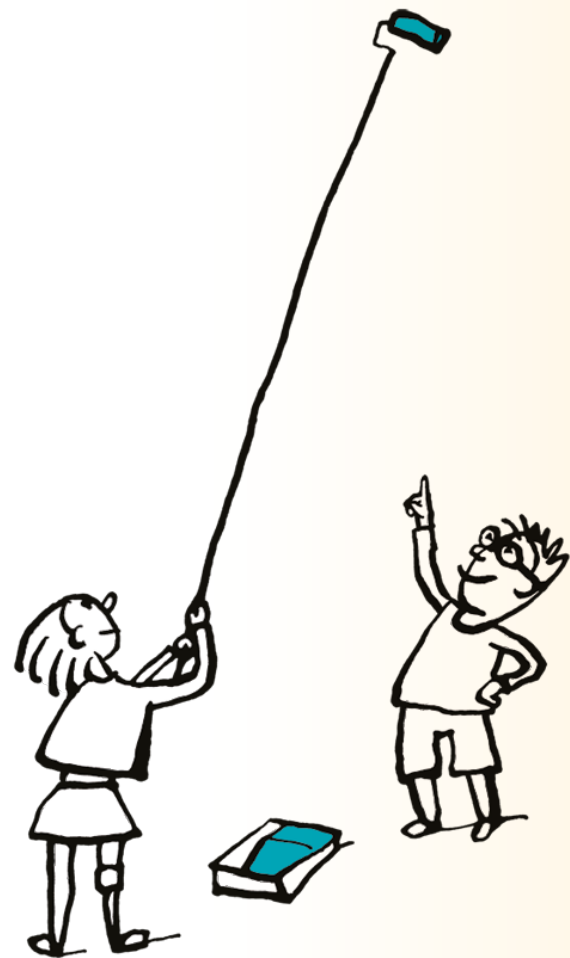
“That's another part of what we're doing just so that we can say, look, we're seeing this time and time again; very quick changes over of social workers with no handover. So that is obviously a system issue. And then you've got a family who are in distress because they're having to go back through their story again. They're not building a relationship. They've done all that work and now feel that don't want to go through it again and they're burnt out. So, it's those kind of things we're trying to capture in case studies. So, we're not directing it at one social worker, we can escalate it up and direct it to the team manager and say, right. Actually, what can we do? How can we think about this in a different way?”

“We are currently working with the CCG at looking at a provision that supports individual work with parents, and so we have a number of parents who may be on the spectrum themselves and who perhaps are misunderstood regarding their parental ability. It's not that they need their children to be removed. What they need is to be equipped with the skills to do things.

Key Documents

- Written Case Studies of Keyworking Approach in action





Key Points

- The Keyworking Service must establish strong relationships with professionals, children, young people and families- independence is key to this.
- The Keyworking Service should ensure that children, young people and families are kept involved and informed throughout e.g. sharing strategies, co-producing goals, sign-posting services and helping families develop an understanding of the professional networks within the system
- The Keyworking Service must build influential relationships with professionals across the system, securing buy-in and a shared, unified approach
- When working with other professionals and agencies it is crucial the Keyworking Service develops open communication channels
- The must establish clear processes for challenge and escalation
- Maintaining independence from other children's services is key in creating trusting relationships with families

Chapter 4: Key Processes

“ Right now, we are the gatekeeper.

Both the Dynamic Support Register (DSR) and the CETR were crucial in enabling the Keyworking Service. Where these processes were not fully developed the pilots spent considerable time and energy on working with partners to improve them. The balance of where pilots concentrated their efforts depended on the circumstances of each area and what the service identified as the barriers that were preventing them from delivering their role and effecting change for children and families.

Dynamic Support Register

“ It comes through us and no one can get put on the DSR unless they come in as a referral to us. So at least we know who's on there [and] why they're on there.

The Dynamic Support Register has a critical role to play within the Keyworking Service, it needs to function as an effective referral mechanism that determines which child or young person services needed to prioritise and work with. Where DSR registers were not

sufficiently developed for this to happen the Keyworking Service prioritised improving its operation. In some cases, this meant the service had to take on a major role in “owning” the DSR, and maintained oversight of referrals, ratings and decisions, describing themselves as the “gatekeeper” of the register. Holding it within their team also allowed the Keyworking Service to monitor cases where a keyworker was not actively assigned such as those children and young people on green or in some areas, amber.

“ We hold both of the DSR and Keyworking in our service. The reason we wanted to hold the DSR was because there was a historical document, but when we looked at it there weren't really clear parameters about what was red, what was green, it was dependent on the individuals experience, their anxiety level, all of that. We started with having a very clear definition of what was red and amber and green, we review it as a team. If we have questions, we go back to the clinical team and we ask about before making a decision and then we put it on the DSR and then, if they are amber or red, they are allocated

the case manager.”

“So then we came along. It's like DSR. What is this? Who are these people? And a lot of the ones that were on there didn't meet any sort of criteria. We've had to do a lot of work to start off with to go through each of those young people and really look at whether they should be on there.

To ensure that the service was able to identify the children who would most benefit from the Keyworking Service the DSR had to deliver a referral process and a clear criteria for rating, or triaging, cases. Some pilots used tools to help them make more objective decisions and ensure that children and young people were meeting the minimum thresholds for the DSR, whereas others developed their own approach. What is vital is that there is a clearly understood process for adding people to the register and decisions about rating are based in evidence and facilitate a multiagency discussion of the needs of the child.

“ [You] get a lot of emotional bias attached to the family and sometimes you need a tool like that just to strip that back and look at what's really happening and what does this young person and their family really need right now. And do they meet our criteria for support where

we're really small team”

“It's also being really mindful of what we're there to do. Our primary aim is to stop young people from going into a mental health placement inappropriately... or a 52 week placement unnecessarily... Otherwise every young person that's at a risk of a placement breakdown would possibly fit our criteria for support.

Once a clear criteria had been determined areas looked to streamline the referrals process. One area did this by using a triage system, where all referrals would come to the Keyworking Service to be discussed and then decided if and where they would be placed on the register. Within this the service would allocate cases directly to keyworkers, but it also enabled the service to proactively monitor green, and non allocated amber cases.

“ When someone is referred, we put them on the system as referral and place them on the triage waiting list ...Although they are not allocated anyone they can be discussed.”

“Even though we don't work with the yellows, I take it on myself to sort of have oversight of them. So, every now and then, I'll just have an open up of their records just to make sure everything's fine...

I think if we've got them on a list, then we've got some sort of duty of care, just to sort of keep an eye on them and make sure everything's OK.

In addition to a referral and triaging mechanism, some pilots took the DSR further, using it to instigate an active multiagency forum for decision making about cases. Some areas did this by organising “tracker meetings” (the frequency of these ranged from weekly to monthly) where the keyworkers would arrange a multi-disciplinary meeting with other services to review and discuss cases.

A key benefit of arranging these tracker meetings was the opportunity of “networking with the whole system” and bringing services together to discuss cases and address any gaps or barriers in support for the child or young person. Pilots also recognised the need to bring in leads of services as they had the authority to make decisions during the meeting and help proposed action points move forward swiftly.

“You might need additional support from the people at the meeting really. If for example, we weren't able to pull social care in, that would be a great opportunity for us to say, well, we really feel that this young person meets the criteria for a social worker and you know, how do we get that process supported. And typically,

those decisions are agreed there and then in the meeting”

“Sometimes if we're stuck with getting the right level of service support and discussing that young person at a tracker that triggers an action. So that one of the leads for social care for example would then follow up on that and then come back to us very promptly... which means that we're able to feed back to the family quite clearly that we were able to escalate a blockage and now we have quite a clear outcome from that.”

“Also it is a great way of if you're really stuck, getting the right professional pulled in.

Where it wasn't already in place the Keyworking Service also had to determine a process of consent for children and young people who were either added to the DSR or actively using the service. By seeking consent at these different stages the Keyworking Service was able to keep the young person informed of any changes or updates to their cases. Where the child or young person may not consent to working with a keyworker directly, the service could ask for consent to work with the family or other professionals, this enabled the service to continue to support the young person in a way that was comfortable to them and ensured they were involved and listened to.

“Consent is gained for the young person to go onto the DSR, even if it's yellow, and then further consent is gained should the young person be allocated a keyworker... So, it's really clear now that the young people on the DSR, we have consent for, and appropriate referral processes have taken place to enable them to be added to the DSR.”

“We do ask for consent to keyworkers, so if a child does not consent then we won't allocate, but the offer is open so it's always there. Also if a child says they're not bothered about working with a keyworker but they're happy for the keyworker to support the network of professionals and to support the family. Then we would do that as well.

Professionals Referral Forms:

- Rotherham Keyworker Referral Form
- Humber Keyworker Professionals Referrals Form
- Sheffield Keyworker Professionals Referral Form

DSR triaging documents

- Doncaster and North West London DSR PowerPoint
- Humber Information Sharing
- Cheshire and Wirral Tool
- Humber Families Referrals Flow Chart
- Humber Triage Referrals Flow Chart

Care, Education Treatment Reviews

Keyworkers played an important role in the arrangement, delivery and follow up of CETR's. In some areas the Keyworking Service had to ensure that CETR's were being used appropriately, for those children who were either in or at risk of entering a mental health placement, and not as emergency multi-disciplinary meetings for professionals. Once a CETR had been decided keyworkers ensured that the correct professionals and services were present at the meeting by contacting the CCG to arrange the review and circulate any information required beforehand.

“ I think sometimes people are asking for CETR when really, they're asking for a professional meeting to discuss the system around the family. And I think that's what the keyworker team help with is just in understanding whether or not a CETR is needed or whether or not a professionals meeting is needed.”

“Process that we would do is if I need to call a CETR contact the CCG, the CCG would then arrange the CETR so they would pull in the professionals that needed to be pulled in and an independent chair.

Keyworkers are essential in the post CETR follow up as they had the oversight to monitor what had been implemented and hold services accountable, particularly when it came to tracking agreed action points and ensuring they were being taken forward. This was an especially important function as some areas used external chairs who only attended the CETR and did not have the remit to follow up the recommendations suggested in their reports.

“ They still might have a weekly meeting as professionals and things might be escalating again, and the keyworker can sit there and say well the recommendation last time was to explore this like have we done this yet? Should we do that first before considering another CETR; making sure that the actions are understood and followed up. They have capacity to do that. It's not a defined area of their role, but we've noticed that that's the role that they will take.”

“What we noticed is for children that aren't allocated the keyworker sometimes the action plans for the CETR get left. There's not deadlines or things get missed and then they might have another CETR and the same actions are being thought about.”

“They help. They have that link with the other professionals and just check that things are being taken forward.”

“Follow up meeting will either be chaired by a member of the keyworker team or a member of the CCG. If they weren't able to attend. So typically, it's the quality assurance nurse lead in the CCG that would chair the follow up meeting.

Key Documents

Children and Young People Consent Forms:

- CETR Easy Read Consent Form
- Humber Keyworker Consent Form
- Sheffield Keyworker Consent Form

Other:

- Humber Keyworker Enquiry Form

Key Points

- Most pilots have taken a major role in the oversight and ownership of the DSR- including establishing a clear criteria (and referrals process where this was not in place)
- Keyworkers organised multi-disciplinary ‘tracker’ meetings to discuss cases and address any issues with services
- Areas should look to establish a consent process for children and young people who were being placed on the DSR as well as those who chose to work with the Keyworking Service
- Keyworkers proved crucial in making sure recommendations from CETRS were actioned by services
- Some pilots play a significant role in supporting CETR’s develop into more effective multi-disciplinary meetings.



**NATIONAL
CHILDREN'S
BUREAU**
Part of the family

About the Council for Disabled Children

The Council for Disabled Children (CDC) is the umbrella body for the disabled children's sector with a membership of over 200 voluntary and community organisations and an active network of practitioners and policy-makers that spans education, health and social care. Their aim is to see a fully-inclusive society where disabled children and young people and those with special educational needs can lead full and happy childhoods and rewarding adult lives. They do this by working with the sector to find out what is and isn't working on the ground and use what they learn to influence policy and improve practice.

CDC hosts the following networks and projects:

Early Years SEND Partnership

IASS Network

Making Ourselves Heard

Special Educational Consortium

Transition Information Network

CDC is proud to be part of the National Children's Bureau (NCB), a leading children's charity working to build a better childhood for every child.

CDC is also part of the consortium that delivers the Every Disabled Child Matters campaign.