

POSITION: Parent & Family Support Adviser

ORGANISATION: Education/Somerset

CONTACT DETAILS (email/mobile): sarah@ehcap.co.uk

Overview and reason for change

- *Parent M requested support for managing her daughter's emotions after attending a "taster session" I delivered for parents on Emotion Coaching at a local Primary School.*
- *The family live in a village in a rural location. The child age 6 lives with two loving parents at home. Relationships were strained (both parental and mother and child in-particular) Mother (M) is highly anxious and parents had successfully accessed family therapy with CAMHS.*
- *The child displays oppositional behaviours at home, child and parent M unable to emotion regulate effectively. Parent M shouts a lot and feels very stressed. The child is often in charge and can be aggressive and has frequent emotional meltdowns at home, school and in public. The child is operating at emotional age of approximately 3 years. Parent M has a history of mental health needs and at least two episodes of significant past trauma. An estimated score of 5 ACES (this case was pre use of ACE scoring)*
- *Parent M is wanting to improve relationships, lower stress and increase her confidence to parent successfully. Parent D is less concerned but is mostly supportive. Parents committed to CAMHS work and parent M attending Tuning Into Kids parent 6 week parent programme.*
- *Social Prescribing : parenting support Tuning in to Kids Parent support group and parent Family Support Advisor Wellness Coaching referral*

What did you do?

- *Parent M participated in Tuning in to Kids group-work course and then CAMHS work. Although the referral to our parenting PFSA service was accepted, it was initially suggested to access us after CAMHS work, if still required. Parent felt she was not making significant progress with CAMHS and requested PFSA input. I then worked with both parents to offer personal support sessions.*
- *The School Emotional Literacy Support Assistant service, collaborated together on family plan. They provided some emotional support/regulation activities for the child at school. I attempted unsuccessfully to liaise with CAMHS (who were still open during my involvement). I delivered personalised parenting sessions on emotion coaching, reinforced learning from Tuning in to Kids and mindfulness. I gave parents simple home tasks to practice using Emotion Coaching techniques, including self care. Over a 6 months time frame.*

- *My line manager trusts my professional judgement and supports flexible time frames to work a case for several months, when my input is productive and required.*
- *Connecting across services: I encouraged parent M to seek personal support for her own health through her GP and she followed this through.*
- *Involving people with lived experience - I encouraged parent M to seek support from health services and consider attending a MBSR course*
- *Unexpected challenges: Helping the school team to understand when parent M's lid was up and working to stay out of judgement and taking it personally.*
- *Time frame: 3-4 months was allocated. The work took 6 months to complete.*

What happened?

- *The whole family have benefitted and are now functioning more healthily and happily. Parents are no longer at risk of separating. Wider family relationships are improved and more harmonious.*
- *Parent M has not needed to go on medication or access other health services.*
- *The child still benefits from Emotional Literacy Support Assistant support in school. She is now able to access most of the education curriculum.*
- *Wider system benefit – expected future savings in terms of reduced need for CAMHS intervention and greater probability that the child will be well as an adult and contribute positively to society.*
- *Integration of services – this is a model that involves integration of health, education and care services. The Mindful Emotion Coaching psycho education tool is being cascaded by a health professional into schools and across children's services.*
- *Did this process require a new way of thinking and working? If yes, please specify?*
- *The key mindset for this work is the coaching model where the coach and coaches are equal and each hold expertise that they share. It requires patience, persistence and flexibility in delivery along with a belief that parents can overcome their challenges.*
- *Outline how the individual was placed at the heart of the decision making process and how you listened and incorporated what mattered to them?*
- *The interventions are person-centred. The parenting needs are assessed and discussed with the parents and then a plan is agreed. The work is individually tailored to meet the needs of the family.*

Finance and commissioning

- *The funding to cascade Mindful Emotion Coaching was provided by Somerset County Council – Public Health between January 2015 and January 2019. The funding for the Parent Family Support Advisor is from the Local Authority Early Help budget- allocated through schools in Somerset.*

Next Steps: Sustainability and scalability

- *What are the next steps for the programme?*
- *Next Steps – EHCAP is working with the Living Better team in West Somerset (Lead GP is Kelsey Bovington at Dulverton Health Centre) and with the Health Connectors at Frome Health Centre in Mendip to find ways of embedding this model of wellness coaching for young people and families into primary care and children’s services. This will involve collaboration between primary and secondary care as well as across children’s services as funding will need to be shared between Community Paediatrics (secondary care), CAMHS (CCG) , Early Help (Local Authority) and Primary Care (CCG).*
- *Is there learning that is transferable to other areas?*
- *Emotion coaching works in ALL relationships!*

Testimonial

- *I can seek a quote, if required*

Reflections: Top Tips

- *This parent really benefitted from a personal service, reinforcing and embedding strategies. I did expect to make progress quicker than I had anticipated. My learning would be to simplify the work to reduce feelings of overwhelm for the parent and compassionately request the parent be more proactive from the start.*
- *My involvement was approximately 6 months. This parent needed sessions spaced out and time to learn and practise skills, work through and follow up her own health needs. Some parents take time to build trust with professionals and build their skills to trust themselves. I believe with self determination, this parent built new neural pathways and it then become normal to work through parenting challenges without being overwhelmed. She developed the ability to respond calmly with her lid finally down. Learning a skill for life.*
- *What were the difficulties or challenges you faced and how did you overcome them?*
- *Time constraints. Keeping the session to time and a pressure to close with back log of referrals. Frustration when progress seemed slow at times.*
- *Can you share any tips for success?*
- *Compassionate connection is key. This parent needed to feel safe to explore some painful and distressing feelings of inadequacy and lacking in confidence to parent. She needed to be heard and understood in a respectful relationship before moving to problem solving.*

- *Some parents are looking for direction and strategies to practise and test out. This parent did not respond well to the CAMHS therapist's approach of solely reflecting back without some minimum guidance or steer (in fact she felt distressed by this). She did respond well to reflection followed by useful questioning ie, how might you put this into action? What words might you use? What is your child likely to be feeling in this situation? What's being communicated beneath the behaviour?*