

Graded Care Profile 2 example of collaboration

A Health Visitor (HV) and a Family Support Worker (FSW) from Epsom family centre completed a GCP2 with a family. The family have 2 children aged 18mths and 4 ½ yr old. Concerns included history of domestic abuse from previous partner who is the father of the 4 ½yr old and who is currently in prison. Father of the 18mth old is now also in prison who is mother's current partner. The 4 ½yr old is being assessed for Autistic Spectrum Disorder. Both children have witnessed domestic abuse, criminal activity, threats against family in and out of the family home. Mother does not have capacity to recognise and address the emotional trauma of her children.

GCP2 was completed jointly by HV and FSW over several visits. The HV and FSW completed separate visits during the period of assessment and then discussed their evidence and gradings to agree the grades on the report.

The mother was initially reluctant to engage but felt encouraged when she could see the positives that the GCP2 was highlighting. Some areas of concern identified through the GCP2 were that she was unable to set boundaries and say 'no', as she found this overwhelming and was unable to cope with the conflict. She rewarded unwanted behaviour which in turn was having a negative impact on both children's emotional and physical wellbeing. Since identifying this by using the GCP2, the mother can now identify where she needs to make changes and has a better understanding of how her actions and behaviour can have a positive impact on the children, for example by engaging in the 'Be you Best' programme to promote healthy eating. The HV developed questions around GCP2 and phrased them in a way to help mother to understand the different areas of care and to get the information needed. Completing the GCP2, clearly identified concerns regarding the safety of the children e.g. the children being able to unlock the front door unsupervised. The FSW supported the mother in managing her own daily stress and the GCP2 helped her to break down areas of care, so that she could focus on manageable 'bites' and problem solve with attainable goals. Specific areas were focused on one at a time e.g. bedtime one week; reducing bottles another week both of which have been achieved. Mother was able to see the progress which has improved her engagement with both FSW and HV and given her a sense of achievement and pride.

The mother has now accepted help for her own mental health via the G.P and is continuing to work with the FSW and nursery nurse on setting boundaries.