



One minute guide

Think Family, Work Family

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What do we mean by Think Family, Work Family?

To 'Think Family' means that all staff need to remember that people rarely live in complete isolation and therefore we need to assess the needs of the wider family when we're working with a child or parent. To 'Work Family' means services putting this into practice, and that all the people working with children, young people and adults in a family plan coordinate their work.

[Think Family, Work Family](#) is an approach which helps to understand the unique circumstances of an adult or child, and the strengths and resources within the family to provide for their needs, but also identifies where additional support may be required. It places a responsibility on all practitioners to respond to identified issues, from signposting and referral through to providing services.

Why do we take this approach?

We know that some families have linked complex difficulties in their lives such as learning disabilities, physical disabilities, domestic violence and abuse, mental health conditions, substance or alcohol misuse. Evidence shows that traditional approaches alone cannot make the difference, therefore a joined-up approach that helps both children and young people as well as adults is needed to support what is already in place.

Individuals (children, young people, or vulnerable adults) are more susceptible to risk and harm where they are living with another individual who has support needs. Where there are multiple needs (either with one person or more than one person within the family) this risk can increase, although a non-affected partner or the family as a whole can provide protective factors.

Practitioners who are aware of a [young carer](#) when either working directly with the child or young person or with the adult must assess their needs and respond appropriately.

Who should Think Family, Work Family?

All practitioners should 'Think Family, Work Family'. This involves all the services working with adults, those working with children and young people, and those who work with families. This includes but is not limited to health, the third sector and local authority services.

Our principles and standards

Our [guiding principles](#) and standards are based on:

Safeguarding first - Everyone has a right to be safeguarded from abuse or neglect.

Listening and Communication – We recognise the importance of good communication and listening well

Permanency - The majority of families (in the widest sense) want to stay together wherever possible, and we will provide support to do so in the safest and most appropriate way, increasing the opportunities for better outcomes.

Right Relationships - When thinking and working family, it is important to consider a child, young person or adult's relationships with their family, friends and local community.

Planning - A holistic approach to planning should include identifying strengths of individuals and the whole family, as well as recognising individual needs.

Information sharing and consent - The need for consent (and the consideration of capacity to consent) to share information should always been considered.

Reducing barriers to effective multi-agency working - Leeds is committed to a culture of professional challenge where debate and differences of opinion are welcomed.

Recognising and responding to needs early - the [Leeds Early Help Approach](#) supports practitioners to hold multi-agency conversations in response to emerging need.

Restorative Practice and Strengths Based Approach - [Restorative Practice](#) and Strengths Based Approaches are key to working with children, young people, and families in Leeds. People are more likely to engage and make positive changes when practitioners and services work with them rather than do things "to" or "for" them.

What should practitioners do?

When working with a child or an adult, practitioners should: be aware of the individuals in the household; assess any needs those household members may have; consider potential impact of any identified needs on the child or adult; and respond to needs appropriately. In all instances, practitioners should discuss concerns with line managers and/ or safeguarding leads.

Working together with the family, multi-agency assessments and visits should be used to better understand needs, identify actions, develop a joint plan and improve outcomes. Where there are parental vulnerabilities such as domestic abuse, mental health problems, substance misuse and/ or learning disabilities present in a family, assessments must take account of the impact on the care provided to vulnerable adults, children and young people. Practitioners unused to undertaking assessments of children and young people should seek advice and support from their safeguarding lead.

If a **child is at risk** of significant harm you should contact Children's Services [Duty and Advice](#), tel: 0113 376 0336 (out of hours 0113 535 0600). If an **adult is at risk** of abuse you should contact Leeds Adult Social Care, tel: 0113 222 4401 (out of hours 0113 378 0644).

Key contacts and further information

You can read more in the [Think Family, Work Family](#) protocol and practice guidance on the Leeds Safeguarding Children Partnership [website](#).

For more information about safeguarding adults, please see the Leeds Safeguarding Adults Board [website](#).